


Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> • Alteration in skin integrity related to blister to left foot lateral. Revision on: 12/01/2025 Revision by: Lucy(Xifeng)Lu (RPN) 	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of blister by next review date. Revision on: 12/01/2025 Revision by: Lucy(Xifeng)Lu (RPN) Target Date: 02/17/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Blister Left lateral foot) for changes to health status and alteration or complications affecting skin integrity. Revision on: 12/02/2025 Revision by: Danielle Loreto (RAI 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: Danielle Loreto (RAI Coordinator) • TREATMENT: Follow the order apply cushion. Revision on: 12/01/2025 Revision by: Lucy(Xifeng)Lu (RPN) 				
<ul style="list-style-type: none"> • Mohammad is experiencing episode of RESPIRATORY INFECTION (Pneumonia - RFER), Fever. Onset date: 11/17/2025 Revision on: 11/17/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • To effectively treat and manage RESPIRATORY INFECTION without further complications by the target date. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Mohammad/SDM) with decision making for RESPIRATORY INFECTION treatment plan and update accordingly. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • MEDICATIONS: Administer medication/oxygen as per MD/NP order. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of monitoring resident with RESPIRATORY INFECTION for (signs/symptoms, hydration status, overall health condition, process of healing, etc.) until stable. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • PPE PRECAUTIONS: Precaution identified as CONTACT & DROPLET for RESPIRATORY INFECTION and requires use of the following PPE: GOWN, MASK, GLOVES & FACESHIELD for direct care, handling soiled clothes and linens, disposing of incontinent product, etc. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • VITAL SIGNS: Monitor VITAL SIGNS as per order. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) 				
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of 	<ul style="list-style-type: none"> • To promote safety for 	<ul style="list-style-type: none"> • TRIGGERS leading to PHYSICAL (Hitting, Punching, etc.) as expression of 				
Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A	
Last Care Plan Review Completed:		11/17/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>(History of WANDERING, VERBAL, SOCIALLY/Sexual Inappropriate, RESISTANCE to care need, physically aggressive toward another resident on Nov. 1, 2025), urinating/peed near the window, the vent, peeing and moved bowel in garbage related to Vascular Dementia, Anxiety.</p> <p>Revision on: 11/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>Mohammad and/or others during each episode of Expressive Behaviour through to the next review date.</p> <p>Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026</p> <p>• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 8.</p> <p>Revision on: 11/17/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026</p>	<p>behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning, ect.)</p> <p>Revision on: 11/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Mohammad is attempting to strikeout; move back from his reach. Calmly indicate that care will continue when he is calm/ready. Redirect other residents away from Mohammad when he is striking out, hitting, etc. Seek Registered Staff assistance.</p> <p>Revision on: 11/06/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• TRIGGERS leading to VERBAL yelling, screaming, calling names, as expression of behaviour include frustration, limitation in self expression language barrier, misunderstanding care intention, being told he can't do something, not being served meals first</p> <p>Revision on: 11/06/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• VERBAL Behaviour: If Mohammad is heard yelling, swearing or calling others names (In Arabic); use the stop and go approach, calmly remind him to lower his voice and redirect away from team member or resident. Attempt to resolve his concern. Serve resident meals first. Report episode to Registered Staff.</p> <p>Revision on: 11/06/2025 Revision by: Chelsea Campbell-Wright (ADOC)</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 include (confusion, misunderstanding care needs, poor judgement, fearfulness, language barrier, etc.)</p> <p>Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</p> <p>• RESISTANCE to Care Need: If Mohammad 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: 08/11/2025 Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate (history of exposing self and will urinate in public areas, entering into other residents rooms and not easily redirected.</p>			
Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (History of WANDERING, VERBAL, SOCIALLY/Sexual Inappropriate, RESISTANCE to care need, physically aggressive toward another resident on Nov. 1, 2025), urinating/peed near the window, the vent, peeing and moved bowel in garbage related to Vascular Dementia, Anxiety. Revision on: 11/02/2025 Revision by: Jenny Liu (RAI Coordinator)</div>		<div>May try to get into a bed that is being already occupied etc.) as expression of behaviour include confusion, decreased insight, poor judgement, limitation in communication due to language barrier, needing to use bathroom Revision on: 12/03/2025 Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• SOCIALLY Inappropriate Behaviour: If Mohammad is noted to (be exposing self and urinating on the floor, peeing and moved bowel in garbage, etc.), redirect him to his room and assist him to the toilet and clean area using appropriate PPE. Report episode to Registered Staff.</div> <div>If resident is trying to get into another residents room or bed. Try to redirect. If resident is not redirected, try getting a team member that speaks the same language as him. If not successful, team may have to escort the other resident from the area. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</div> <div>• WANDERING: Permit Mohammad to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Redirect Mohammad participate in activities such as listening to arabic music, going for a walk, when wandering into other resident spaces. Revision on: 11/06/2025 Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• DE-ESCALATION: Mohammad calms with going for walk indoors/outdoors, distraction, re-direction, arabic music music Revision on: 11/06/2025 Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div>	PCA			
<div>• Potential for PAIN and alteration in comfort level related to Stroke, History of MVA which led to cervical disk problem. Most Current RAI Pain Score is 0. Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</div>	<div>• Promote RAI Pain Score of 0 through to the next review. Target Date: 02/17/2026</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> <div>• NON VERBAL CUES of PAIN for Mohammad include - (facial grimacing, tight fists,</div>	RN Registered Practical Nurse PCA			
<div>Allergies</div>	Varenicline		<div>D.O.B.</div>	03/03/1942	<div>Physician</div>	Albert Patrick Ng
<div>Diagnosis</div>	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
<div>Facility</div>	Berkshire Care Centre				<div>Print Date</div>	12/11/2025
<div>Resident</div>	Al-Shehabi, Mohammad (922131005652)		<div>Admission Date</div>	08/11/2025	<div>Location</div>	5 519 A
Last Care Plan Review Completed:		11/17/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 08/11/2025 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: 09/23/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Rest/Sleep Patterns, Conflict with Others		• Team members will support Mo's in decreasing social isolation by participating in activities of personal choice for 15-20 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/17/2026 • To support Mo's Psycho-Social well being through to the next review. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/17/2026	• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; music programs, driving simulator, tovertafel, movies, parties, walking groups, socials, etc. Revision on: 11/09/2025 Revision by: Nick Carroll (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as reading, watching TV in own room, walking,. Revision on: 11/09/2025 Revision by: Nick Carroll (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation, music care, reading, reminiscing, walking, Abby Device.) Revision on: 11/09/2025 Revision by: Nick Carroll (Recreation Aide)				
• Potential for CONSTIPATION related to Vascular Dementia Revision on: 09/02/2025 Revision by: Maryola Perion (RN)		• Mohammad will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• COMMUNICATION: Involve/collaborate with (Mohammad/SDM) for decision making regarding constipation management. Revision on: 09/02/2025 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.			Registered Staff	
Allergies	Varenicline			D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)			Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025					

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: 09/02/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	<ul style="list-style-type: none"> 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"> Alteration in skin integrity related to RASHES to PERINEUM AND ANAL AREA. Revision on: 08/13/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote intact skin integrity through healing of RASH by the target date. Revision on: 08/13/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with RASH for changes to health status and alteration or complications affecting skin integrity. Revision on: 08/13/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with Mohammad/SDM in decision making for treatment of skin issues. Revision on: 08/13/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for RASH as per MD Order. Monitor effectiveness and for side effects. Revision on: 08/13/2025 Revision by: Maryola Perion (RN) <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: 08/13/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN Registered Practical Nurse RN	
<ul style="list-style-type: none"> Mohammad is at high risk for ELOPEMENT related to exit seeking Revision on: 08/12/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote Mohammad's safety and minimize risk for episode of elopement each day through next review date. Revision on: 08/12/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	<ul style="list-style-type: none"> ALERT: Mohammad 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: 08/12/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ELOPEMENT ALERT: Redirect Mohammad away from elevator or exit doors as needed. Revision on: 08/12/2025 Revision by: Maryola Perion (RN)	PCA	

Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<div>• Mohammad has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div>	<div>• Mohammad will be safe when choosing to smoke through to the next review Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026</div>	<div>• HEALTH TEACHING: engage with resident and support their effort to explore smoking cessation options (including interventions as prescribed by MD). • STORAGE: Smoking materials to be appropriately stored by (Nurse) and Staff to return cigarettes/lighter/matches after each smoke break. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SMOKING SUPERVISION: Mohammad will be smoking ONLY in the presence of a staff member. Requires Supervision. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SMOKING CONTRACT: Mohammad has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract (refer to chart). Revision on: 11/09/2025 Revision by: Nick Carroll (Recreation Aide)</div>	<div>Registered Staff</div> <div>Clerk</div> <div>Social Worker</div> <div>Social Worker</div>		
<div>• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA), has history of seizure Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div>	<div>• To treat and minimize signs/symptoms or complications associated with CVA through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with CVA for changes to health status and alteration or complications affecting neurological function. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SEIZURE Disorder: Mohammad has potential for seizure activity, injury related to seizure disorder. Inform MD as it occurs. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div>	<div>PCA</div>		
<div>• Potential to experience alteration in RESPIRATORY FUNCTION related to: Chronic Obstructive Pulmonary Disorder (COPD). Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div>	<div>• To treat and minimize signs/symptoms or complications associated with Chronic Obstructive Pulmonary Disorder (COPD) each day</div>	<div>• 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: 08/11/2025 Revision by: Maryola Perion (RN) • POSITIONING: To manage shortness of breath (SOB) elevate head of the bed to</div>	<div>Registered</div>		
Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	through to next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	improve breathing. • MEDICATION: Administer medication inhalers as per MD order and monitor for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	Staff PCA		
• Potential to experience alteration in CARDIAC FUNCTION related to: Arteriosclerotic Heart Disease, Hypertension, Aortic Valve replacement - 2016 Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Arteriosclerotic Heart Disease, Hypertension, Aortic Valve replacement through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Arteriosclerotic Heart Disease, Hypertension, Aortic Valve replacement for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Arteriosclerotic Heart Disease, Hypertension as per MD Order and monitor for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • OXYGEN: Administer Oxygen as per MD order. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN Registered Practical Nurse RN		
• BOWEL Continence - Mohammad is continent and has self recognition of urge to defecate. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad to remain continent of bowels through next review date Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Mohammad 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: 08/11/2025 Revision by: Maryola Perion (RN)	PCA PCA		
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Vascular Dementia, Language barrier, Moderate difficulty hearing. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 08/11/2025	• PRIMARY LANGUAGE: Mohammad primary language is Arabic. He is able to speak/understand Arabic. No longer understands much English. Demonstration may support his understanding. Can use technology to help support with translation if no staff or family are available. Revision on: 08/15/2025			
Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision by: Maryola Perion (RN) Target Date: 02/17/2026	Revision by: Danielle Loreto (RAI Coordinator) • INTERPRETER Required: when needed and staff that speaks Arabic (Floor 5 RN on days) and other staff that speaks Arabic Revision on: 09/02/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Mohammad needs (constant) cueing or demonstrative instruction in tasks and activities. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)			
• Altered VISION related to moderately impaired and uses eyeglasses. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• Mohammad will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• EYEGLASSES: Mohammad wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		PCA	
• Potential to experience (seizure, etc.) related to adverse reaction to Varenicline/Champix. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• Mohammad will be protected from exposure to Varenicline/Champix each day through next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with adverse reaction to Varenicline/Champix for changes to health status and complications. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MEDICATION ALERT: Mohammad has adverse reaction to Varenicline/Champix. Prevent contact with and report if noted to experience symptoms of seizure, etc.. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Mohammad's adverser reaction Varenicline/Champix and minimize risk of exposure to Varenicline/Champix. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)			
• Nutrition Risk Level		• Mohammad will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/21/2025	• EXTRA SNACK HS: Cheese and crackers or banana or soft cookie (alternating) at HS nourishment pass daily to help prevent hunger in early mornings. Toast/cereal is available on the unit in the mornings if he is hungry before breakfast arrives. Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA Registered Practical Nurse RN	E
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)		Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	<p>Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/17/2026</p> <p>• Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/17/2026</p> <p>• Mohammad will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1862 ml/day (25 ml/kg) through to next review date. Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/17/2026</p>	<p>• Honor religious rituals related to diet/eating: no pork. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• Labelled Item Breakfast: 2 boiled eggs daily per resident/POA request Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• Labelled Item Lunch: turkey deli meat daily per resident/POA request Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Mohammad is moderate risk level. Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Mohammad will receive regular diet, regular texture with minced meat (exception: allow regular texture turkey deli meat) Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID CONSISTENCY: Mohammad drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/11/2025 Revision by: Ronnie Fung (FSM - Food Services Manager)</p> <p>• FLUID TARGET: Encourage Mohammad to drink at least 1500 ml per day Revision on: 08/21/2025 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>• FOOD PREFERENCES: Likes toast with jam and boiled eggs at breakfast Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• HIGH CALORIE/PROTEIN AM SNACK: Greek yogurt Mon/Wed/Fri Revision on: 09/16/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>PCA Registered Practical Nurse RN</p> <p>PCA Registered Practical Nurse RN Dietitian (RD)</p> <p>PCA</p> <p>PCA</p> <p>Dietary aide PCA</p> <p>PCA</p> <p>PCA</p>	<p>D</p> <p>D</p> <p></p> <p></p> <p></p> <p></p> <p>D</p>		
• Potential to experience alteration in	• Mohammad will be supported	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of				
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Al-Shehabi, Mohammad (922131005652)		Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
MOOD related to Depression, Decline in Health Condition, Stroke, Dementia Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	Mohammad for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Mohammad effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Anxiety, Depression, New environment, Vascular Dementia. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• To promote adequate rest/sleep for Mohammad based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/17/2026	• PREFERENCE: Mohammad prefers snacks prior to bed and to listen to music to fall asleep. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • REST PATTERN: Preferred bedtime: No specific time, often up and down, usual wake time: No specific time but an early morning/riser and naps on and off. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	PCA		
• URINARY (Mixed) INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad will have urinary incontinence managed every shift through to the next review period. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/17/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is (OCCASIONALLY Incontinen). Report change to level as noted. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	PCA		
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Incontinence	• To protect and maintain skin integrity each day through to the	• 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	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		next review. Target Date: 02/17/2026	Staff as noted.					
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Vascular Dementia. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• Mohammad will be supported to maintain cognitive function through the review date. Current CPS is 4. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Mohammad is feeling lost or in confused state. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)					
• Increased risk for FALLS related to wandering, history of falls, unsteady gait, refusing to use gait aid. Revision on: 08/11/2025 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. Target Date: 02/17/2026	• Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls. • COMMUNICATION: Involve/collaborate with (Mohammad)/SDM in decision making in fall prevention Plan of Care. Revision on: 08/11/2025 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: 08/11/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, quiet environment, etc.) to reduce fall risk for Mohammad. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)				PCA RN Registered Practical Nurse	D/E/N
• Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Vascular Dementia, COPD		• Mohammad will be supported to cope with changing functional abilities and have ADL care	• ADL CARE male staff for care when possible and Arabic speaking staff when available as resident no longer comprehends English well					
Allergies	Varenicline		D.O.B.	03/03/1942		Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Al-Shehabi, Mohammad (922131005652)		Admission Date	08/11/2025		Location	5 519 A	
Last Care Plan Review Completed:		11/17/2025						

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		needs met each day through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026 • Mohammad will have ALL ADL care needs met each day through the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026	• BATHING: Mohammad prefers (shower) on Thursdays and Sundays on afternoon shift. Resident participates with cueing and instructions from staff. Two staff Maximal assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • BED MOBILITY: Mohammad is Independent and able to turn and reposition self in bed. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • DRESSING: Mohammad is able to (lift his arms and legs with cueing and instructions). One staff member to provide Extensive assistance for dressing UPPER & Extensive assistance for LOWER body. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • EATING: Mohammad is able to eat independently during meal times. He eats in the Wild flower ding room. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Mohammad is able to walk Independently with Supervision on the floor. He requires one staff Supervision when he goes down to the patio to smoke or attend activities. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Mohammad requires one staff member to provide (CUES, SUPERVISION) assistance for hygiene. He may require one staff Extensive assistance as needed or two staff when having expressive behaviors. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) • 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: 08/11/2025 Revision by: Maryola Perion (RN) • TOILET USE: Mohammad is able to transfer self to the toilet. One staff to provide (SUPERVISION) assistance for toileting. He may require one staff Extensive assistance as needed or two staff when having			PCA	
Allergies	Varenicline			D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)			Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025					

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, Vascular Dementia, COPD Revision on: 08/11/2025 Revision by: Maryola Perion (RN) 		expressive behaviors. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRANSFERRING: Mohammad is able to transfer self independently. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) ORAL CARE: Mohammad has full upper and lower DENTURES. 1 staff to provide TOTAL assistance for oral care. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) SHAVING - Staff to ask Mohammad if he wanted to be shaved on his shower days or as needed. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) 	PCA 	D
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Mohammad Medical Treatment and End of Life Care Revision on: 08/11/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> To support and honor Mohammad expressed wishes and beliefs through to the End of Life. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 02/17/2026 	<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: 08/11/2025 Revision by: Maryola Perion (RN) 		

Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report


--	--	--

Diagnosis

Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Carcinoma in situ of prostate(D07.5), Person injured in unspecified vehicle accident(V89.9), Presence of prosthetic heart valve(Z95.2), Presence of coronary angioplasty implant and graft(Z95.5), Seizure disorder, so described(R56.80), Pneumonia, unspecified(J18.9)

Allergies	Varenicline	D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Al-Shehabi, Mohammad (922131005652)	Admission Date	08/11/2025	Location	5 519 A
Last Care Plan Review Completed:		11/17/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> Potential for altered hematologic symptoms or complications related to nose bleed. Revision on: 12/06/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and/or minimize complications associated with nose bleed each day through to the next review date. Revision on: 12/06/2025 Revision by: Maryola Perion (RN) Target Date: 12/09/2025	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with nose bleed for complications or changes to health status. Revision on: 12/06/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> Sleep Patterns Revision on: 11/03/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote adequate rest/sleep for Josephine based on identified sleep patterns/preferences each night through to the next review date. Revision on: 07/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	<ul style="list-style-type: none"> PREFERENCE: Josephine likes to have a snack prior to bed. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> REST PATTERN: Preferred bedtime: 9:00pm, usual wake time: 8:00am and frequently naps during the day. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	PCA			
<ul style="list-style-type: none"> Alteration in skin integrity related to RASH both legs Revision on: 11/03/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote intact skin integrity through healing of RASH by next review date. Revision on: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/03/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with #2 left lateral calf for changes to health status and alteration or complications affecting skin integrity. Revision on: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> TOPICAL TX: Apply topical treatment to #2 left lateral calf as MD Order. Revision on: 07/25/2025 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: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Practical Nurse RN Registered Practical Nurse Registered Practical Nurse			
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited 	<ul style="list-style-type: none"> Josephine will be supported to 	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Josephine's primary language is Polish. The second 				
Allergies	MSG, Aspartame, Perfume	D.O.B.	05/15/1925	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Bacic, Josephine (922131005647)	Admission Date	07/24/2025	Location	5 505 A	
Last Care Plan Review Completed:		11/03/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
by limitations to (self expression, comprehension, etc.) related to Hard of hearing 10/15/25: Hearing aid broken. New hearing aids to be sent: unknown date/time Revision on: 11/03/2025 Revision by: Maryola Perion (RN)		make basic needs known each day through to the review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	language is English. She is able to speak/understand Polish and English. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • HEARING AID: Apply hearing aids one time a day. In the morning. Remove hearing aids at bedtime. Keep in WHITE Dehumidifier container. (New hearing aids to be sent: unknown date/time) Revision on: 11/03/2025 Revision by: Maryola Perion (RN) • HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored: white dehumidifier container. Revision on: 11/03/2025 Revision by: Maryola Perion (RN) • HARD of HEARING and does not use hearing aids: Strategies to support hearing are speak into her right ear loudly, use physical gestures to demonstrate what you are doing, give simple and clear instructions. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Josephine needs (constant) cueing or demonstrative instruction in tasks and activities. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)			PCA	D/E
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Low Motivation, Rest/Sleep Patterns. ISE score = 6/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		• Team members will support Josephine in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/03/2026	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; (Specify, baking, music programs, movies, tea social.) Revision on: 11/03/2025 Revision by: Nick Carroll (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as (reading newspaper, walking, conversing with peers & colouring) Revision on: 11/03/2025 Revision by: Nick Carroll (Recreation Aide) • HELPFUL HINTS: Identify Helpful Hints to ease communication while providing care & interactions for (Josephine's past - career, family, where she grew up)				
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A	
Last Care Plan Review Completed:		11/03/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		Revision on: 11/03/2025 Revision by: Nick Carroll (Recreation Aide) • ONE to ONE: Provide her with individual visits for (conversation, bedside activity, reading, reminiscing.) Revision on: 11/03/2025 Revision by: Nick Carroll (Recreation Aide) • SOCIAL INTERACTION: Promote opportunity for Josephine to make friendships and sit with friends during activities. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		
• Potential for PAIN and alteration in comfort level. Most Current RAI Pain Score is 0. Revision on: 08/02/2025 Revision by: Maryola Perion (RN)	• Promote RAI Pain Score of 0 through to the next review. Target Date: 02/03/2026	• 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. • NON VERBAL CUES of PAIN for Josephine 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: 07/24/2025 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: 08/02/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse PCA Registered Practical Nurse RN	
• URINARY Incontinence related to Dementia Revision on: 08/02/2025 Revision by: Maryola Perion (RN)	• Josephine will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) 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: 07/24/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is Frequently Incontinent. Report change to level as noted. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses protective underwear large Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC)	PCA PCA	

Allergies	MSG, Aspartame, Perfume	D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)	Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025			

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: 08/02/2025 Revision by: Maryola Perion (RN)	• Josephine will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with (Josephine/SDM) for decision making regarding constipation management. Revision on: 08/02/2025 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. • NUTRITION increased fibre intervention in place. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order	Registered Staff Diet Registered Staff Registered Staff			
• Strength Training Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increased strength of B/L LE from 3+/5 to 4/5 in next 3 months; Revision on: 10/21/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/03/2026	• 2 person side to side assist for transfer training with RW; Ensure pushing from armrest when getting up and hands back to armrest when sitting in the chair. 2-3 x a week; 2:1 assist gait training with RW with w/c follow up, distance as best tolerated, 2-3 x a week; Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA			
• Ambulation/Gait Training Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increased independence in walking from 2 assist to 1 assist in next 6 months; Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/03/2026	• Strengthening exs for B/L UE and LE with 1-2lbs, 10 reps, or as best tolerated, 2-3 x a week; Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA			
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Thin fragile Skin Revision on: 07/30/2025	• To protect and maintain skin integrity each day through to the next review.	• 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	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Shina Wadhwa (Physical Therapist)	Target Date: 02/03/2026					
• Expressed Wishes and Beliefs related to Josephine's Medical Treatment and End of Life Care Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To support and honor Josephine's expressed wishes and beliefs through to the End of Life. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	• CPR: DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • FAMILY at bedside: Expressed wishes that FAMILY to be present at bedside during end of life. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in CARDIAC FUNCTION related to: Coronary Heart Disease, Hypertension Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To treat and minimize signs/symptoms or complications associated with Coronary Heart Disease, Hypertension through to the next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with Josephine/SDM in decision making of Cardiac Care Management for Coronary Heart Disease, Hypertension. Revision on: 11/03/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Heart Disease, Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication as per MD Order and monitor for side effects. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN			
• Potential for Expressive Behaviour of (WANDERING PHYSICAL (Is combative with sons - pushing away and swatting especially with washing, peri care and when experiencing delusions, will throw items, pinch or grab others), SOCIALLY Inappropriate (rummaging), RESISTANCE to care need (refuse medication) related to Dementia, history of delusions and	• To promote safety for Josephine and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026 • To decrease the episodic	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Josephine for indications to change in or for escalating expressive behaviour risk. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to PHYSICAL (swatting, pushing away, throwing, pinching or grabbing, etc.) as expression of behaviour include (anger, frustration, fearfulness, confusion, etc.) Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Josephine is attempting to strikeout; move back from her				
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
hallucinations. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		frequency of Expressive Behaviour by the next review date. ABS score will be less than 2. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 07/24/2025 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, refusing peri care as expressions of behaviour include confusion, misunderstanding care needs, poor judgement, paranoid thought process, Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • RESISTANCE to Care Need: If Josephine is declining to bathe, change clothes, take medications, eat, peri care, explain resident clearly and loudly in right ear what you are doing. If Josephine continues to escalate re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • TRIGGERS leading to SOCIALLY Inappropriate (rummaging through drawers or paperwork, etc.) as expressions of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Josephine is noted to be (rummaging, etc.) gently redirect her (to move to a quieter area, etc., or provide distraction activity). Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • WANDERING: Permit Josephine to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 07/24/2025 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: 07/24/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• Altered VISION related to Macular Degeneration.		• To treat and minimize complications of macular	• EYEGLASSES: Josephine wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping.			PCA	
Allergies	MSG, Aspartame, Perfume			D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)			Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		degeneration through to next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer ophthalmic medication as as per MD Order. Monitor its effectiveness and for side effects. • VISUAL IMPAIRMENT: Resident has macular degeneration resulting in (blurring of vision). Revision on: 07/24/2025 Revision by: Maryola Perion (RN)		Registered Staff	
• Increased risk for FALLS related to unsteady gait, history of falls, Dementia diagnosis. Revision on: 07/30/2025 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. Target Date: 02/03/2026	• COMMUNICATION: Involve/collaborate with Josephine/Stan in decision making in fall prevention Plan of Care. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Josephine. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • TOILETING: Follow individual toileting plan (refer to Continence Plan of Care) to minimize unsafe self attempts to use toilet. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program. LE strengthening- AROM, with minimal weights 5-10 reps/xcise, squats, sit to stands 5-10 reps/xcise, Sitting balance- perturbations to maintain 10s 5-10 reps, 1:1 gait training with 3 wheeled walker 100 feet, with PT- 3-5x week, participates with group exs classes-3x week Revision on: 08/21/2025 Revision by: Courtney Cipparone (PT - Physiotherapist)		PCA PCA PCA PCA PCA	D/E/N
Allergies	MSG, Aspartame, Perfume			D.O.B.	05/15/1925	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)			Admission Date	07/24/2025	Location 5 505 A
Last Care Plan Review Completed:		11/03/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Increased risk for FALLS related to unsteady gait, history of falls, Dementia diagnosis. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)			• ALARM: Requires Bed alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/29/2025 Revision by: Lucy(Xifeng)Lu (RPN)			PCA	D/E/N
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia, Hard of Hearing. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Josephine 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: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026 • Josephine will have ALL ADL care needs met each day through the next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	• BATHING: Josephine prefers (tub bath) on Wednesday and Saturday on Day shift. One staff (EXTENSIVE) assistance for bathing. Requires two staff for transfer. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Josephine is able to assist with cueing and supervision. One staff EXTENSIVE assistance for bed mobility. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • DRESSING: Josephine is able to (lift her arms and legs with cueing and encouragement). One staff to provide EXTENSIVE assistance for dressing UPPER & LOWER body. Revision on: 11/03/2025 Revision by: Maryola Perion (RN) • EATING: Josephine is able to eat Independently with 1 Staff to provide set up and supervision for eating. Eats in the wildflower lane dining room. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Josephine is using a walker as her aid for ambulation and requires one staff member to walk with her for guidance and supervision.			PCA	
Allergies	MSG, Aspartame, Perfume			D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)			Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia, Hard of Hearing.</div> <div>Revision on: 07/30/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>Revision on: 11/03/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• PERSONAL HYGIENE: Josephine is able to (assist with cueing and encouragement). One staff to provide Extensive assistance for hygiene.</div> <div>Revision on: 11/03/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• HAND HYGIENE: 1 staff to provide (LIMITED) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• TOILET USE: Josephine is able to (assist with transfer). One staff to provide (EXTENSIVE) assistance for toileting.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• TRANSFERRING: Josephine is able to transfer with assistance. two staff to provide Extensive assistance for transferring.</div> <div>Revision on: 08/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• ORAL CARE: Josephine has (upper and lower dentures). 1 staff to provide (TOTAL) assistance for oral care, to clean and store her dentures.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div>	PCA			
<div>• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia</div> <div>Revision on: 07/30/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• Josephine will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3.</div> <div>Revision on: 08/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 02/03/2026</div>	<div>• ORIENTATION: Gently reorient to (person, place, time) as needed when Josephine is feeling lost or in confused state.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div>				
<div>• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of MSG, Aspartame, Perfume.</div>	<div>• Josephine will be protected from exposure to allergen each day through next review date.</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications.</div> <div>Revision on: 07/24/2025</div>				
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 02/03/2026	Revision by: Maryola Perion (RN) • ALLERGY ALERT: Josephine has ALLERGY to MSG, Aspartame, Perfume. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Josephine's Allergy to (MSG, Aspartame, Perfume) and minimize risk for exposure to allergen. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)		
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	• Josephine will have bowel incontinence managed every shift through to the next review period. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) 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 Infrequently Incontinent. Report change to level as noted. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: Resident uses a pull up. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	Registered Staff PCA PCA PCA	
• Nutrition Risk Level	• Josephine will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/03/2026 • Will weigh within GWR 55-60 kg through to next review date.	• NUTRITION RISK: Josephine is moderate risk level. Revision on: 10/22/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Josephine will receive regular diet, minced texture Revision on: 07/24/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Josephine drinks REGULAR/THIN Level 0 Fluids. Revision on: 07/24/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID TARGET: Encourage Josephine to drink a minimum of 1200 ml/day Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD))	Dietitian (RD) PCA PCA PCA	
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...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	Bacic, Josephine (922131005647)	Admission Date	07/24/2025	Location 5 505 A
Last Care Plan Review Completed:		11/03/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/03/2026 • Josephine will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (27 ml/kg using 55 kg weight) through to next review date. Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/03/2026	• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 12/09/2025 Revision by: Shereen Khan (Dietitian (RD)) • PORTION SIZE: Prefers small portions at meals. Revision on: 08/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FOOD INTOLERANCE: Aspartame and MSG (reaction: unknown, not life-threatening per POA). Our menu provides negligible aspartame and MSG. Revision on: 08/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 1 bottle chocolate flavor Boost Plus TID Revision on: 07/28/2025 Revision by: Brittany Hyde (Registered Dietitian) • HIGH FIBRE: Offer 100 ml prune juice at breakfast daily Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA PCA PCA Restorative Care Aide PCA	 D/E

Allergies	MSG, Aspartame, Perfume	D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)	Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025			


Care Plan Report

Diagnosis

Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and unspecified symptoms and signs involving cognitive functions and awareness(R41.88), Degeneration of macula and posterior pole(H35.3), Other specified hearing loss(H91.8)

Allergies	MSG, Aspartame, Perfume	D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Bacic, Josephine (922131005647)	Admission Date	07/24/2025	Location	5 505 A
Last Care Plan Review Completed:		11/03/2025			

Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved	
• Alteration in skin integrity related to BRUISE to Left elbow. Revision on: 11/23/2025 Revision by: Shelby McCarthy (Registered Practical Nurse)	• To promote intact skin integrity through healing of BRUISE by (specify date of expected healing or end of treatment and remember to adjust goal target date) Target Date: 02/12/2026	• COMMUNICATION: Involve/collaborate with Arnold/SDM in decision making for treatment of bruise as skin issue. Revision on: 11/23/2025 Revision by: Shelby McCarthy (Registered Practical Nurse) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with bruise to left elbow for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/23/2025 Revision by: Shelby McCarthy (Registered Practical 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: 11/23/2025 Revision by: Shelby McCarthy (Registered Practical Nurse)					
• Transfer Training Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	• Reduce assistance needed for transfers from Sara Lift to 1 person assist in next 6 months. Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 02/12/2026	• 2 person side to side assist, sit to stand at the Walker/standing device. 3-5 reps, 2-3 x a week; Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)			PT - Physiotherapist PTA		
• Strength Training Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	• Increased strength for B/L UE from 3+/5 to 4/5 in next 3 months Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/12/2026	• Strengthening exs weights of 1-2 lbs, 10 reps,1-2 sets;2-3 x a week; Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)			PT - Physiotherapist PTA		
• Alteration in skin integrity related to Moisture associated skin damage (MASD) /intertrigo to the groin/perineum region. Revision on: 11/13/2025 Revision by: Lara Ismail (RN)	• To promote intact skin integrity through healing of (MASD) /intertrigo to the groin/perineum region next review period. Revision on: 11/13/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (MASD)/intertrigo for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/13/2025 Revision by: Lara Ismail (RN)			Registered Practical Nurse RN		
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 501 A	
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision by: Lara Ismail (RN) Target Date: 02/12/2026	<ul style="list-style-type: none"> • TOPICAL TX: Apply topical treatment to the affected region as NP Order. Revision on: 11/13/2025 Revision by: Lara Ismail (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: 11/27/2025 Revision by: Maryola Perion (RN) 	Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 11/12/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • Arnold will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 11/12/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026 • To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 11/12/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026 	<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. • 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	
<ul style="list-style-type: none"> • Potential to experience alteration in fluid volume or episode of DEHYDRATION related to decreased oral and fluid consumption, etc. Revision on: 11/12/2025 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: 11/12/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026 	<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 Arnold to consume fluids; amount as per Nutrition Care Plan. Revision on: 11/12/2025 Revision by: Maryola Perion (RN) 	Registered Staff	

Allergies	No Known Allergies	D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)	Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need, SEXUAL nature related to Dementia, Pain. Revision on: 11/12/2025 Revision by: Maryola Perion (RN)</p>	<p>• Arnold will be supported to adjust to his/her new environment to lower risk of triggering former VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need, SEXUAL) behaviour episodes through to the next review. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/12/2026</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Arnold for indications to change in or for escalating expressive behaviour risk. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (calling names, yelling) as expression of behaviour include (loss of control, frustration, misunderstanding care intention) Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Arnold is heard yelling, or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusing medication) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process) Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Arnold is declining to (bathe, change clothes, take medications, eat) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: If Arnold has sexual expressions gently redirect him (to focus on task at hand, to move to quieter area, private space and give him privacy). Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit Arnold to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 08/07/2025 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. Revision on: 11/12/2025</p>	Registered Practical Nurse		
Allergies	No Known Allergies	D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)	Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need, SEXUAL nature related to Dementia, Pain.</p> <p>Revision on: 11/12/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>Revision by: Maryola Perion (RN)</p> <p>• HALLUCINATION: Will see his old landlord being present where he is in the moment when she is not there. Do not argue with the resident. Offer support and assess for risk, safety and any fear.</p> <p>Revision on: 08/07/2025</p> <p>Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• DELUSION: has a history of delusions believing neighbour is girlfriend and people are trying to steal girlfriend.</p> <p>Do not argue with the resident. Offer support and assess for risk, safety and any fear.</p> <p>Revision on: 08/07/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>RN</p> <p>Registered Practical Nurse RN</p> <p>Registered Practical Nurse RN</p>		
<p>• Potential to experience alteration in MOOD as exhibited by has a history of delusions believing neighbour is girlfriend and people are trying to steal girlfriend. Has anxiety about being at Berkshire and wants to go home, sad, pained, worried facial expression related to Dementia, Pain.</p> <p>Revision on: 11/12/2025</p> <p>Revision by: Maryola Perion (RN)</p>	<p>• Arnold will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</p> <p>Revision on: 08/07/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 02/12/2026</p>	<p>• COMMUNICATION: Involve/collaborate with Arnold/SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed.</p> <p>Revision on: 08/07/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Arnold for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</p> <p>Revision on: 08/07/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESIDENT STRENGTHS: Build on Arnold's effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities.</p> <p>Revision on: 11/12/2025</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: 11/12/2025</p>			
Allergies	No Known Allergies	D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)	Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Potential to experience alteration in MOOD as exhibited by has a history of delusions believing neighbour is girlfriend and people are trying to steal girlfriend. Has anxiety about being at Berkshire and wants to go home, sad, pained, worried facial expression related to Dementia, Pain.</div> <div>Revision on: 11/12/2025</div> <div>Revision by: Maryola Perion (RN)</div>			<div>Revision by: Maryola Perion (RN)</div>				
<div>• Increased risk for FALLS related to (Dementia). Limitation of cognitive function/alterd judgement, impaired balance, pain.</div> <div>Revision on: 11/12/2025</div> <div>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.</div> <div>Target Date: 02/12/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Arnold)/SDM in decision making in fall prevention Plan of Care.</div> <div>Revision on: 11/04/2025</div> <div>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.</div> <div>Revision on: 11/23/2025</div> <div>Revision by: Tola Omolade (ADOC)</div> <div>• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Arnold.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• BED: place bed in lowest position to lower risk for injury.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>PCA</div> <div>PCA</div> <div>PCA</div> <div>Q1H</div>				
Allergies	No Known Allergies			D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)			Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025					

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, impaired balance, pain. Revision on: 11/12/2025 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none">FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">ALARM: Requires bed and chair alarm. Check placement and working order. respond when alarm is heard. Revision on: 11/23/2025 Revision by: Shelby McCarthy (Registered Practical Nurse) <ul style="list-style-type: none">SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 11/04/2025 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 mid/lower back pain. Most Current LTCF Pain Score is 1. Revision on: 11/12/2025 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: 02/12/2026 <ul style="list-style-type: none">Promote RAI Pain Score of 0 through to the next review. Target Date: 02/12/2026	<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. <ul style="list-style-type: none">NON VERBAL CUES of PAIN for Arnold 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: 09/23/2025 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: 09/23/2025 Revision by: Maryola Perion (RN)			RN Registered Practical Nurse PCA Registered Practical Nurse RN	
<ul style="list-style-type: none">Potential for BOWEL INCONTINENCE related to Dementia, Impaired Mobility. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">Arnold will have bowel incontinence managed every shift through to the next review period.	<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. <ul style="list-style-type: none">BOWEL Continence level is Frequently Incontinent. Report change to level as			Registered Staff PCA	
Allergies	No Known Allergies			D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)			Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 11/04/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026	noted. Revision on: 11/12/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. PCA • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list PCA on the floor. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)				
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis, Impaired Mobility. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)		• Arnold will have urinary incontinence managed every shift through to the next review period. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) 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: 10/21/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is Totally Incontinent. Report change to level as noted. PCA Revision on: 11/04/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list PCA on the floor. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed. PCA				
• Risk for Impaired SKIN INTEGRITY related to Frailty, Impaired Mobility, Incontinence. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. 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. PCA				
• Arny DECLINES PARTICIPATION in structured programs related to personal choice.		• Arny participates in Independent/Self-Directed activities monthly through to the	• SELF-DIRECTED ACTIVITIES: Encourage Arny to engage in self-directed activities such as reading, listening to music, iPad games, word searches, colouring, etc.). Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
Allergies	No Known Allergies			D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)			Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
ISE score = 4/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/12/2026	• FRIENDLY VISIT: Provide him one to one visits as tolerated. Touch base to maintain contact and to converse about topics of interest, identify up-coming special events, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • INVITATION: Offer friendly invite to structured programs scheduled in the home. Music programs, reading circles etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Arnold has CKD Revision on: 08/31/2025 Revision by: Maryola Perion (RN)		• To treat and minimize complications associated with CKD through to next review date. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with CKD for changes to health status and alteration or complications affecting renal function. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for CKD as per MD order and monitor for side effects. Revision on: 08/31/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in CARDIAC FUNCTION related to; Coronary Artery Disease, Wellens Syndrome LAD and stents. Query CHF. Revision on: 08/31/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Coronary Artery Disease, Wellens Syndrome LAD and stents, query CHF through to the next review date. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Artery Disease, Wellens Syndrome LAD and stents for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for query CHF as per MD Order and monitor for side effects. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) <div>Registered Practical Nurse RN</div>				
• Nutrition Risk Level		• Arnold will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI	• Labelled Item Breakfast: 200 ml prune juice M/W/F Revision on: 11/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Dinner: ice cream cup daily <div>PCA Registered Practical Nurse RN PCA</div> <div>D E</div>				
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 501 A	
Last Care Plan Review Completed:		11/12/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Coordinator) Target Date: 02/12/2026 • Will weigh within realistic GWR 68-78 kg through to next review date. Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/12/2026 • Arnold will be adequately hydrated aeb drinking at least 83% of total fluid requirement: 1798 ml/day (25 ml/kg using 71.9 kg weight) through to next review date. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/12/2026	Revision on: 11/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Arnold is high risk level. Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Arnold will receive regular diet, minced texture Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Arnold drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID TARGET: Encourage Arnold to drink at least 1500 ml/day Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Likes coffee. Revision on: 11/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: Boost Fruit Beverage once daily with 1200 medpass Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD))	Registered Practical Nurse RN Dietitian (RD)			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia, new home Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Arnold based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/12/2026	• REST PATTERN: Preferred bedtime 2100, usual wake time 0700 and daytime naps at varied times when he wishes. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• Altered COMMUNICATION as exhibited by limitations to (self expression,	• Arnold will be supported to maintain current communication	• COMMUNICATION: Involve/collaborate with Arnold/SDM for decision making about strategies needed to support effective communication. Revision on: 08/07/2025				
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
comprehension) related to Dementia Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	abilities to (express self, comprehend information) each day through to the review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/12/2026	Revision by: Danielle Loreto (RAI Coordinator) • PRIMARY LANGUAGE: Arnold primary language is English. He is able to speak/understand English. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Arnold needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Arnold will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) Target Date: 02/12/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Arnold is feeling lost or in confused state. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Arnold can comprehend and follow. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Altered VISION related to Left eye is is oblogne, need for reading glasses Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Arnold supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/12/2026	• EYEGLASSES: Arnold wears reading eyeglasses. Assist to clean eyeglasses as needed and store (in night table drawer) when sleeping. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• Altered ability to complete Activities of Daily Living (ADLs) related to cognitive loss, decreased understanding and ability to follow direction Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Arnold 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: 08/07/2025	• BATHING: Arnold prefers (shower) on (Monday and Friday evening shift). Arnold requires one staff extensive assistance for bathing. Sit to stand lift for transfer. Nail care to be provided on shower/bath day. Revision on: 12/11/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Arnold requires two staff maximal assistance for bed mobility. Revision on: 11/04/2025	PCA PCA			
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/12/2026	Revision by: Maryola Perion (RN)				
			• DRESSING: Arnold is able to assist by lifting his arms and legs. He requires two staff maximal assistance with dressing his UPPER & LOWER body. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)			PCA	
			• EATING: Arnold is sometimes able to eat independently with set up assistance. Significant change - requiring assistance from 1 staff to eat at times. Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• LOCOMOTION: Arnold is using a wheelchair as his mode of locomotion. He is dependent on one staff to push his wheelchair on the unit. He is able to propel the wheelchair on short distances. Revision on: 11/12/2025 Revision by: Maryola Perion (RN)			PCA	
			• PERSONAL HYGIENE: Arnold requires one staff extensive assistance in washing/drying his face/hands, putting lotions, deodorant, bruising hair. Two staff maximal assistance in providing peri care. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)			PCA	
			• HAND HYGIENE: 1 staff to provide Extensive assistance to use soap/water, apply sanitizer, rub hands together, dry hands for hand hygiene. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)			PCA	
			• TOILET USE: Arnold is Two staff to toilet him by using a SARA lift to transfer him to the toilet. Revision on: 11/05/2025 Revision by: Baljinder Sidhu (RPN)			PCA	
			• TRANSFERRING: Sit to Stand lift for transfers. Revision on: 11/04/2025 Revision by: Lara Ismail (RN)			PCA	
			• ORAL CARE: Arnold has full upper and lower dentures, Needs team to complete denture care. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	D
			• SHAVING - Arnold requires the team to complete shaving on his shower days.			PCA	
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 501 A	
Last Care Plan Review Completed:		11/12/2025					

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 loss, decreased understanding and ability to follow direction Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Arnold Medical Treatment and End of Life Care Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 02/12/2026	<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: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> MEDICAL/TREATMENT: Arnold expressed wishes: NO BLOOD TRANSFUSION. Revision on: 11/04/2025 Revision by: Maryola Perion (RN)		

Allergies	No Known Allergies	D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)	Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report


--	--	--

Diagnosis

Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Chronic kidney disease, unspecified(N18.9)

Allergies	No Known Allergies	D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Berg, Arnold (922131005651)	Admission Date	08/07/2025	Location	5 501 A
Last Care Plan Review Completed:		11/12/2025			

Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved	
• Gait Training Revision on: 12/04/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increased walking distance from 50ft to 100ft in next 3 months Revision on: 12/04/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/02/2026	• 2 person assist side to side assist, hand in hand, gait training. Cue for foot clearance, if resident slides feet and leans back, make resident sit in the wheelchair, give a rest and try again. If residnet continues to drag her feet and leans back, please stop the session. Slowly increase the distance to 100ft; 2-3 x a week; Revision on: 12/04/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA		
• Potential to experience alteration in MOOD (anxiety, sad facial expressions, expressions of lack of joy, withdrawal related to Vascular Dementia, Anxiety. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Carolyn will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• COMMUNICATION: Involve/collaborate with Carolyn/SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Carolyn for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Carolyn effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)					
• ROM Exs and Transfer Training; Revision on: 11/07/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	• Reduce assistance needed for transfers from 2 assist to 1 assist in next 6 months; Increased ability to stand at the bar in next 3 months; Revision on: 11/07/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 02/02/2026	• Sit to stand at the wall bar 1-2 person assist, slowly increase standing time to 30sec. 3-5 reps, 2-3 x a week;B/L UE and LE A-AAROM exs as best tolerated, 10 reps, 1-2 sets; Passive gentle stretching for B/L Quads and Hams, 20 sec hold, 3-5 reps, 2-3 x a week; Revision on: 11/07/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)			PT - Physiotherapist PTA		
• Potential for BOWEL INCONTINENCE related to Cognitive loss. Revision on: 11/04/2025	• Carolyn will have bowel incontinence managed every shift through to the next review	• BOWEL Continence level is (Incontinent). Report change to level as noted. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA		
Allergies	No Known Allergies		D.O.B.	04/10/1946	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Blake, Carolyn (922131005673)		Admission Date	11/04/2025	Location	5 518 A	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		period. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: Resident uses a white brief on all shifts. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA PCA	
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis, functional loss Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Carolyn will have urinary incontinence managed every shift through to the next review period. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• URINARY Contenance level is (Incontinent). Report change to level as noted. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses a white brief on all shifts Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA PCA	
• Nutrition Risk Level		• Carolyn will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026 • Will weigh within realistic GWR 34-44 kg through to next review date. Revision on: 11/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/02/2026 • Carol will be adequately hydrated aeb drinking at least 75% of total fluid requirement:	• Labelled Item Breakfast: 100 ml (half glass) prune juice M/W/F Revision on: 11/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Carolyn (Carol) is high risk level. Revision on: 11/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Carolyn will receive regular diet, pureed texture Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Carolyn drinks REGULAR/Thin Level 0 Fluids. Revision on: 11/06/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID TARGET: Encourage Carol to drink a minimum of 785 ml/day Revision on: 11/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 60 ml Resource 2.0 BID (1200, 1600) Revision on: 11/18/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN Dietitian (RD) PCA PCA PCA	D
Allergies	No Known Allergies			D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)			Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		1047 ml/day (30 ml/kg) through to next review date. Revision on: 11/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/02/2026				
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to New environment, vascular dementia Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Carolyn based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• REST PATTERN: Preferred bedtime 2000-2100, usual wake time 0600-0800 and daytime naps at own discretion. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for muscular dysfunction, contractures and bone deformity related to Arthritis to the bilateral hands and knees Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with Arthritis through to the next review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of arthritis for discomfort/ complications or changes to health status. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • PAIN MANAGEMENT for Arthritis prescribed and in place; refer to Pain Care Plan. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Risk for Impaired SKIN INTEGRITY related to Frailty		• To protect and maintain skin integrity each day through to the next review. Target Date: 02/02/2026	• 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	
Allergies	No Known Allergies		D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)		Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			• TREATMENT Use MetroNidazole 1% cream apply to affected area(face) twice daily when needed Apply as per Physician Order. Revision on: 11/17/2025 Revision by: Lucy(Xifeng)Lu (RPN)			
• Carolyn is at high risk for ELOPEMENT related to New environment, wandering. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote Carolyn safety and minimize risk for episode of elopement each day through next review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• ALERT: Carolyn 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: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • ELOPEMENT ALERT: Redirect Carolyn away from elevator or exit doors as needed. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Vascular Dementia Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety for Carolyn and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026 • To decrease episodic frequency of Carolyn by next review date. ABS score will be less than 3 Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026 • Carolyn will be supported to adjust to his/her new environment to lower risk of	• COMMUNICATION: Involve/collaborate with (Carolyn)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Carolyn for indications to change in or for escalating expressive behaviour risk. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to PHYSICAL Hitting as expression of behaviour include cause; anger, frustration, fearfulness, confusion, invasion of personal space. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • PHYSICAL Behaviour: If Carolyn 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: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL yelling, screaming, calling names, etc.) as expression of behaviour include (cause; loss of control, frustration, limitation in self expression, pain, misunderstanding care intention) Revision on: 11/04/2025		BSO - Internal Social Worker	
Allergies	No Known Allergies		D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)		Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved	
<div>• Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Vascular Dementia</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>triggering former WANDERING, PHYSICAL inappropriate, VERBALLY inappropriate behaviour episodes through to the next review.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 02/02/2026</div>	<div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• VERBAL Behaviour: If Carolyn is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve his/her concern. Report episode to Registered Staff.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• 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 (cause; confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process)</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• RESISTANCE to Care Need: If Carolyn is declining to (Specify: bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRIGGERS leading to Social Expressions (may stop in the middle of the halls and doorways and stand still and now follow direction to move. She may start dancing when this happens) as expression of behaviour include confusion, decreased insight, poor judgement, limitation in communication, over stimulation</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• SOCIALLY Inappropriate Behaviour: If Carolyn is noted to (Standing in others ways, dancing) gently redirect her to move from that area she may be blocking. Allow her to dance in a safe space.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• WANDERING: Permit Carolyn to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 11/04/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>					
• Altered COMMUNICATION as exhibited by limitations to self expression,		• Carolyn will be supported to maintain current communication	• 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.	04/10/1946		Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre						Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)			Admission Date	11/04/2025		Location	5 518 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
comprehension related to Vascular Dementia. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)	abilities to express self, comprehend information each day through to the review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Carolyn needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Vascular Dementia Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Carolyn will be supported to maintain cognitive function through the review date. Current CPS is 6 Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when (Carolyn) is feeling lost or in confused state. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Carolyn can comprehend and follow. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to Limitation of cognitive function/altered judgement Vascular Dementia Revision on: 11/04/2025 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. Target Date: 02/02/2026	• CALL BELL: Place call bell within resident's reach and check that it is in working order and remind/encourage to use it. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment (Specify: reduce clutter) to reduce fall risk for Carolyn Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear for (transfers, ambulation). Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA	D/E/N		
• Potential for PAIN and alteration in comfort level related to arthritis to bilateral hands and knees. Most Current LTCF Pain	• Promote RAI Pain Score of 0 through to the next review. Target Date: 02/02/2026	• 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.	RN Registered Practical Nurse			
Allergies	No Known Allergies		D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Blake, Carolyn (922131005673)		Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Score is (fill in score) Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)						
• Expressed Wishes and Beliefs related to Carolyn Medical Treatment and End of Life Care Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 02/02/2026	• CPR: Carolyn wishes express NO CPR : transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 12/04/2025 Revision by: Chelsea Campbell-Wright (ADOC)		All	
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		• Carolyn will have ALL ADL care needs met each day through the next review date. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/02/2026	• BATHING: Carolyn prefers tub or shower on Tuesday and Fridays during the day. She can minimally participate by moving her upper body but require the team to provide 1 team member extensive to 2 team members maximal assistance to complete care tasks. Nail care to be provided on shower/bath day. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Carolyn is able to move herself in bed. Her care level varies and she can require up to maximal assistance depending on strength and fatigue Monitor for changes. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Carolyn requires 1 to 2 person extensive to maximal assistance. She may struggle at times to follow direction. Care level varies. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Carolyn requires cues and supervision with meals. At times may require total assistance for intake. She eats her meals on the 5th floor dining room. Revision on: 11/04/2025		PCA	
Allergies	No Known Allergies		D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)		Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		<p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Carolyn ambulates. Team to monitor for safety as she will often stop and not move or will walk about and dance at the same time.</p> <p>Off the home areas she requires supervision. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: 1 team member extensive to total assistance with her personal hygiene. She can be set up and give direction but at times due to her cognition she cannot follow. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide (total) assistance to (Specify; use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: Carolyn requires 1-2 team member extensive assistance to maximal assistance with her toileting. 2 team if fatigued, expressive, not able to follow directions. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Carolyn requires 2 person side by side assistance for transferring. Team to monitor for changes. Revision on: 11/04/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• ORAL CARE: Carolyn has Dentures. She requires the team to complete her oral care. Revision on: 11/13/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	PCA	

Allergies	No Known Allergies	D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)	Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

--	--	--


Diagnosis

Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremities(I80.2), After-cataract(H26.4)

Allergies	No Known Allergies	D.O.B.	04/10/1946	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Arthritis, unspecified, multiple sites(M13.90), Anxiety disorder, unspecified(F41.9), Phlebitis and thrombophlebitis of other deep vessels of lower extremit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Blake, Carolyn (922131005673)	Admission Date	11/04/2025	Location	5 518 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		• Marian will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026 • Will weigh within realistic GWR 85-90 kg through to next review date. Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026 • Marian will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2182 ml/day (25 ml/kg) through to next review date. Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026	• NUTRITION RISK: Marian is currently at low risk level. Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)	
			• DIET ORDER: Marian will receive regular diet, regular texture Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• FLUID CONSISTENCY: Marian drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• FLUID TARGET: Encourage Marian to drink a minimum of 1746 ml/day Revision on: 11/04/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
• Ambulation/Gait Training Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Improved posture while walking from current forward flexed posture to straight in next 3 months; Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/21/2026	• 1:1 assist gait training with RW, rest breaks as needed, cue for proper foot clearance and heel toe pattern, posture re-education, Distance as best tolerated; 2-3 x a week; Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)			PT - Physiotherapist PTA	
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Blaz, Marian (922131005670)		Admission Date	10/23/2025	Location	5 511 A	



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Balance Training Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	• Improved foot clearance to prevent shuffling and falls in next 6 months; Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/21/2026	• 1:1 balance training with wall bar/walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	PT - Physiotherapist PTA			
• Strengthening Exs Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)	• Increased strength from 3/5 to 3+/5 for B/L LE in next 3 months; Revision on: 10/31/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/21/2026	• 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			
• Potential for Acute PAIN and alteration in comfort level related to BPH, parkinson's disease, HTN and hip replacement, Left hip. Most Current RAI Pain Score is (fill in score) Revision on: 10/24/2025 Revision by: Maryola Perion (RN)	• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/21/2026	• 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.	RN Registered Practical Nurse			
• BOWEL Continence - Marian is continent and has self recognition of urge to defecate. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	• Marianto remain continent of bowels through next review date Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Marian 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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA PCA			
• Marian is at high risk for ELOPEMENT	• To promote Marian safety and	• DIVERSION ACTIVITY: Resident responds well to (watching TV, etc.) to divert				
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)		Admission Date	10/23/2025	Location	5 511 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
related to Dx with Dementia and resided on the secure unit. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		minimize risk for episode of elopement each day through next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	attention when exit seeking. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • ELOPEMENT ALERT: Redirect Marian away from elevator or exit doors as needed. PCA Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Increased risk for FALLS related to HTN, dementia, Parkinson's disease. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/21/2026	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear at all times. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA PCA	D/E/N
• Expressed Wishes and Beliefs related to Marian Medical Treatment and End of Life Care Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• To support and honor Marian expressed wishes and beliefs through to the End of Life. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• CPR: Marian wishes to have CPR and TRANSFER to hospital. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: hx of multiple TRANSIENT ISCHEMIC ATTACK (TIAs), PARKINSON'S Disease Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with diagnosis) through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• MEDICATION: Administer medication for diagnosis as per MD order. Monitor effectiveness and for side effects. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with TIA and parkinson's disease for changes to health status and alteration or complications affecting neurological function. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • Observe SWALLOWING: Inform Registered staff of changes or any signs of difficulty in swallowing (coughing during eating, drooling, etc.).		PCA Registered	
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)		Admission Date	10/23/2025	Location	5 511 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: hx of multiple TRANSIENT ISCHEMIC ATTACK (TIAs), PARKINSON'S Disease Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			Staff			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia and new environment. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	• To promote adequate rest/sleep for Marian based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• REST PATTERN: Preferred bedtime 20:30, usual wake time 02:00 and take a nap in the middle of day. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • MONITOR: Monitor Marian sleeping patterns. Document when awake or asleep. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA PCA	 Q1H		
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension	• To treat and minimize signs/symptoms or complications associated with Diagnosis through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• 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. • MEDICATION: Administer medication for (specify Etiology/Diagnosis) as per MD Order and monitor for side effects.	Registered Staff Registered Practical Nurse RN			
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 10/23/2025	• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/23/2025	• 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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)	Admission Date	10/23/2025	Location	5 511 A	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Jenny Liu (RAI Coordinator)	Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none">• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.• PHARMACY MEDICATION REVIEW: Request Pharmacy Medication Review when clinically appropriate. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	Registered Staff	
<ul style="list-style-type: none">• URINARY INCONTINENCE related to Benign Prostatic Hyperplasia (BPH), Dementia Diagnosis Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none">• Marian will have urinary incontinence managed every shift through to the next review period. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026• Marian will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)• URINARY Continence level is FREQUENTLY Incontinent, or TOTAL Incontinent). Report change to level as noted. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)• INCONTINENCE PRODUCT: Resident uses pull up every day. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA <	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
flat affect) related to Dx with Dementia. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		range of 0-2 by the review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • RESIDENT STRENGTHS: Build on Marian effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Potential for Expressive Behaviour of (WANDERING, , verbally aggression, delusions, resist care, hallucination) nature related to Symptom Progression of Dementia/Alzheimer , Sundowning Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• To promote safety for Marian and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marian for indications to change in or for escalating expressive behaviour risk. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • TRIGGERS leading to PHYSICAL Hitting, Punching, Slapping, Biting, Kicking, as expression of behaviour include anger, frustration, fearfulness, confusion, other resident entering Marian's room. Revision on: 11/19/2025 Revision by: Chelsea Campbell-Wright (ADOC) • PHYSICAL Behaviour: If Marion is attempting to strikeout when other resident is entering space; remove other residents from area. Calmly speak to Marion indicating he can not strike other resident. Validate Marions feelings of frustration and offering reassurance other resident will be removed. Seek Registered Staff assistance. Revision on: 11/19/2025 Revision by: Chelsea Campbell-Wright (ADOC) • TRIGGERS leading to VERBAL (yelling) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 11/19/2025 Revision by: Chelsea Campbell-Wright (ADOC) • VERBAL Behaviour: If Marian is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, etc.) as expression of behaviour include (confusion,				
Allergies	No Known Allergies			D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)			Admission Date	10/23/2025	Location	5 511 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Potential for Expressive Behaviour of (WANDERING, , verbally aggression, delusions, resist care, hallucination) nature related to Symptom Progression of Dementia/Alzheimer , Sundowning Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
			<ul style="list-style-type: none">• RESISTANCE to Care Need: If Marian is declining to (bathe, change clothes, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
			<ul style="list-style-type: none">• SOCIALLY Inappropriate Behaviour: If Marion is noted to barricade his door with the bathroom door in his room. Due to the way the door opens when he is in the washroom it stops the main entrance door from opening. This has happened and safety is of concern of not being able to access room if emergency arises. Resident and family have agreed to have the washroom door removed. Revision on: 12/02/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none">• WANDERING: Permit Marian to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
			<ul style="list-style-type: none">• HALLUCINATION: see propel partying, a blurred faced person in the kitchen, big leaves, a doll. The team to monitor him each shift, document on PCC when present. Use redirection, distraction techniques as needed. Refer to MD as needed. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
<ul style="list-style-type: none">• Altered VISION related to Blindness to right eyes Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none">• Marian supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI	Registered Practical Nurse RN				
			<ul style="list-style-type: none">• DELUSION: Believe he is going back to live at home in Mississauga with spouse. Believes family has stolen his items.Use redirection, distraction techniques as needed. Refer to MD as needed Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
			Registered Practical Nurse RN				
<ul style="list-style-type: none">• EYEGLASSES: Marian wears non prescription eyeglasses. Assist to clean eyeglasses as needed and store (on night table, in night table drawer, etc.) when sleeping. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA					
Allergies	No Known Allergies			D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)			Admission Date	10/23/2025	Location	5 511 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered VISION related to Blindness to right eyes Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	Coordinator) Target Date: 01/21/2026			
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, slurred speech, mumbled speech, etc.) related to Weak or absent voice Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> Marian will be supported to maintain current communication abilities to (SPECIFY: express self, comprehend information, etc.) each day through to the review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Marian primary language is Polish. But he is able or unable to speak/understand most English . Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		
	<ul style="list-style-type: none"> Marian will be supported to make basic needs known each day through to the review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (specify; memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia 	<ul style="list-style-type: none"> Marian will be supported to maintain cognitive function through the review date. Current CPS is (SPECIFY; 1, 2, 3, or 4) Revision on: 12/04/2025 Revision by: Chelsea Campbell-Wright (ADOC) Target Date: 01/21/2026	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Marian is feeling lost or in confused state. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		

Allergies	No Known Allergies	D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)	Admission Date	10/23/2025	Location	5 511 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		• Marian will have ALL ADL care needs met each day through the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026 • Marian 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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• BATHING: Marian prefers showers on Wednesday and Sunday day shift. He requires one team member wash his lower body. He is able to wash upper body. Nail care to be provided on shower/bath day. Revision on: 11/26/2025 Revision by: Lara Ismail (RN)			PCA	
			• BED MOBILITY: Marian requires limited assistance from the team to help him to turn and reposition in bed. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• DRESSING: Marian is able to dress/undress herself from head to toe with minimum assistance from the team. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• EATING: Marian is able to eat by himself on the floor dining room. Supervision required from the team. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• LOCOMOTION: Marian is using a cane for locomotion on the unit. He requires supervision/reminder to ensure he uses his cane all the time for ambulation. Walker is available for long distances. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• PERSONAL HYGIENE: Marian requires limited assistance from the team to help him with wash his hands, face, comb his hair and peri-care. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• 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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• TOILET USE: Marian requires one staff member to help him transfer on/off the toilet. He is able to cleanse, and pull up his pull up and clothes after. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			• TRANSFERRING: Marian requires limited assistance from the team to help him			PCA	
			Allergies	No Known Allergies			D.O.B.
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)			Admission Date	10/23/2025	Location	5 511 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		<p>transfer between surfaces. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• ORAL CARE: Marian has his own teeth, he is able to provide oral care onset set up PCA done by the team. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• FOOT CARE: PSW to complete toenail care on his bath days and as needed. PCA Report long toe nails or other abnormalities as noted. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• SHAVING - Marian prefers (beard, mustache, face) shaved on his bath days. PCA Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• RESIDENT PREFERENCE with ADL activities as follow: will accept care from PCA MALE PSWs per ART tool. Revision on: 10/24/2025 Revision by: Jenny Liu (RAI Coordinator)</p>		D

Allergies	No Known Allergies	D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)	Admission Date	10/23/2025	Location	5 511 A

Care Plan Report


Diagnosis

Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificial hip(Z96.60)

Allergies	No Known Allergies	D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Blaz, Marian (922131005670)	Admission Date	10/23/2025	Location	5 511 A

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: 11/25/2025 Revision by: Suzanne Azar (RN)	<ul style="list-style-type: none">• Erna 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: 11/25/2025 Revision by: Suzanne Azar (RN) Target Date: 01/14/2026	<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: 11/25/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none">• 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: 11/25/2025 Revision by: Suzanne Azar (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.	PCA	D/E/N
<ul style="list-style-type: none">• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to insomnia Revision on: 11/14/2025 Revision by: Jiss Mathew (RN)	<ul style="list-style-type: none">• To promote adequate rest/sleep for Erna based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/14/2025 Revision by: Jiss Mathew (RN) Target Date: 01/23/2026	<ul style="list-style-type: none">• MONITOR: Monitor Erna sleeping patterns. Document when awake or asleep for 3 days . Revision on: 11/14/2025 Revision by: Jiss Mathew (RN)	PCA	Q1H
<ul style="list-style-type: none">• Potential for Persistent PAIN and alteration in comfort level related to dementia, reports of severe, constant, lower back pain, Leg pain. Most Current MDS Pain Score is 0. Revision on: 11/08/2025 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: 01/14/2026 <ul style="list-style-type: none">• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/14/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Erna)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 10/26/2025 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. <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: 10/16/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse Registered Practical Nurse RN	

Allergies	No Known Allergies	D.O.B.	04/12/1949	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Balance Exs Revision on: 11/06/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Reduce fall risk from high to low in next 6 months; Revision on: 11/06/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/14/2026	• 1:1 balance training with wall bar/walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week; Revision on: 11/06/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		PT - Physiotherapist PTA	
• Strengthening exs Revision on: 11/06/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Increased strength from 3+/5 to 4/5 for B/L LE in next 3 months; Revision on: 11/06/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/14/2026	• 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: 11/06/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		PT - Physiotherapist PTA	
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: Restless Leg Syndrome Revision on: 10/26/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Restless Leg Syndrome through to the next review date. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• COMMUNICATION: Involve/ collaborate with (Erna)/ SDM in decision making of neurological care management for Restless Leg Syndrome. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Restless Leg Syndrome as per MD order. Monitor effectiveness and for side effects. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Restless Leg Syndrome for changes to health status and alteration or complications affecting neurological function. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)		PCA	
• Potential to experience alteration in CARDIAC FUNCTION related to: Dyslipidemia Revision on: 10/26/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Dyslipidemia through to the next review date. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• COMMUNICATION: Involve/collaborate with (Erna)/SDM in decision making of Cardiac Care Management for Dyslipidemia. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • 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	
Allergies	No Known Allergies		D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	5 521 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> • Risk for Impaired SKIN INTEGRITY related to Incontinence, Dementia other than Alzheimer's disease Major Neurocognitive Disorder Revision on: 10/26/2025 Revision by: Maryola Perion (RN) 		<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. Target Date: 01/14/2026 	<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 MOOD as exhibited by repetitive anxious complaints/concerns non health related to Bipolar Disorder, Dementia, Anxiety Revision on: 10/26/2025 Revision by: Maryola Perion (RN) 		<ul style="list-style-type: none"> • Erna will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026 	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Erna for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Erna's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • FAMILY SUPPORT: Erna enjoys visits from the husband. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) 			
<ul style="list-style-type: none"> • Increased risk for FALLS related to history of falls, Dementia other than Alzheimer's disease, Major Neurocognitive Disorder. 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: 01/14/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Erna/SDM in decision making in fall prevention Plan of Care. Revision on: 10/26/2025 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: 10/16/2025 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker. Revision on: 10/26/2025 		PCA	D/E/N
Allergies	No Known Allergies		D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	5 521 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
			Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Erna. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 10/16/2025 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		
• Potential for URINARY INCONTINENCE related to Dementia Revision on: 10/25/2025 Revision by: Maryola Perion (RN)		• Erna will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is Usually Continent. Report change to level as noted. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses a pull up. Revision on: 10/25/2025 Revision by: Maryola Perion (RN)		Registered Staff PCA PCA		
• Altered VISION related to history of cataract removal, Astigmatism to Left eye as per papers Revision on: 10/25/2025 Revision by: Maryola Perion (RN)		• Erna will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• EYEGLASSES: Erna wears eyeglasses. Assist to clean eyeglasses as needed and store in night table drawer when sleeping. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)		PCA		
• Nutrition Risk Level		• Erna will be adequately nourished and consuming >75% at meals and snacks through to next review date. Revision on: 10/28/2025	• NUTRITION RISK: Erna is low risk level. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Erna will receive Gluten restricted diet, Regular texture (Erna is provided gluten-free menu substitutions at meals/snacks)		Dietitian (RD) PCA		
Allergies	No Known Allergies			D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Broom, Erna (922131005668)			Admission Date	10/16/2025	Location	5 521 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/14/2026</p> <p>• Will weigh within realistic GWR 58-68 kg through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/14/2026</p> <p>• Erna will be adequately hydrated aeb drinking 100% of total fluid requirement: 1500 ml/day (26 ml/kg using 58 kg weight) through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/14/2026</p>	<p>Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID CONSISTENCY: Erna drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</p> <p>• FLUID TARGET: Encourage Erna to drink a minimum of 1500 ml/day Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FOOD ALLERGY/INTOLERANCE: Gluten intolerance (reaction: diarrhea) - resident states she can eat small amounts of gluten without symptoms. She will choose to eat per her discretion. Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FOOD PREFERENCES: Do not serve sour cream - she dislikes. Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	PCA <	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
worse on the Left ear than the Right ear. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	comprehend information, etc.) each day through to the review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • HEARING AID: Apply/Remove to/from Both ear/s. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored: in the bed side drawer Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • HARD of HEARING: Strategies to support hearing: Approach Erna on her Left ear. Right ear is worse than the Left ear. Revision on: 10/16/2025 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: 10/16/2025 Revision by: Maryola Perion (RN)	PCA	D/E		
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	• Erna 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: 01/14/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Erna is feeling lost or in confused state. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.	Registered Staff			
• Potential for Expressive Behaviour of (History of WANDERING, VERBAL, Rummaging, hoarding, RESISTANCE to care need, history of delusion related to Dementia, Bipolar, Anxiety, Major Neurocognitive Disorder Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	• Erna will be supported to adjust to her new environment to lower risk of triggering former (WANDERING, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 10/16/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Erna for indications to change in or for escalating expressive behaviour risk. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (yelling, screaming, calling names, etc.) as expressions of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 10/16/2025				
Allergies	No Known Allergies		D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	5 521 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision by: Maryola Perion (RN) Target Date: 01/14/2026	<p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • VERBAL Behaviour: If Erna 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>Revision on: 10/16/2025 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 bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) <p>Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Erna is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. <p>Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to SOCIALLY Inappropriate (hoarding, rummaging, etc.) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.) <p>Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • SOCIALLY Inappropriate Behaviour: If Erna is seen rummaging and hoarding, staff remove items in her room. Provide redirection, reassurance and health teachings. <p>Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • WANDERING: Permit Erna to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. <p>Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. <p>Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p>	Registered Practical Nurse RN	

Allergies	No Known Allergies	D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Broom, Erna (922131005668)	Admission Date	10/16/2025	Location	5 521 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved	
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Major Neurocognitive Disorder Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>		<div>• Erna 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: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026</div>	<div>• BATHING: (showers and baths Tuesday and Saturday Day shift). Resident is able to do her shower/bath but requires SUPERVISION, - oversight/cueing for bathing. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN)</div>			PCA		
			<div>• BED MOBILITY: Erna is able to turn and reposition self in bed. One staff member provides set up help/assistance for bed mobility. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			<div>• DRESSING: Erna is able to lift her arms and legs with cueing. One staff to provide Extensive assistance for dressing UPPER & LOWER body. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			<div>• EATING: Erna is Independent with set up from staff. Eats in the unit dining room - wildflower lane. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			<div>• LOCOMOTION: Erna uses a walker as her aid for ambulation and is able to walk Independently on the unit. Supervision due to being in a locked unit. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			<div>• PERSONAL HYGIENE: Erna is independent with supervision and cueing from staff to wash/dry her face, comb her hair, peri care. May require one staff extensive assistance at times. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			<div>• 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: 10/16/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			<div>• TOILET USE: Erna is able to transfer to the toilet. She requires supervision, cueing from staff for her toileting needs. May require one staff Extensive assistance at times. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</div>			PCA		
			Allergies		No Known Allergies			D.O.B.
Diagnosis		Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses						
Facility		Berkshire Care Centre				Print Date	12/11/2025	
Resident		Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	5 521 A	

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, Major Neurocognitive Disorder Revision on: 10/16/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> TRANSFERRING: Erna is Independent with Supervision from a staff member. Walker as her aid for transfer. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) ORAL CARE: Erna has her own teeth and requires supervision, cueing and set up from staff. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Erna Medical Treatment and End of Life Care Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 01/14/2026	<ul style="list-style-type: none"> CPR: Erna wishes to Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) 		

Allergies	No Known Allergies	D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Broom, Erna (922131005668)	Admission Date	10/16/2025	Location	5 521 A


Care Plan Report

Diagnosis

Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified extrapyramidal and movement disorders(G25.8), COVID-19, virus identified(U07.1)

Allergies	No Known Allergies	D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Broom, Erna (922131005668)	Admission Date	10/16/2025	Location	5 521 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension, HypercholesterolaemiaRevision on: 11/28/2025Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To treat and minimize signs/symptoms or complications associated with Hypertension, Hypercholesterolaemia through to the next review date.Revision on: 11/28/2025Revision by: Maryola Perion (RN)Target Date: 02/28/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making of Cardiac Care Management for Hypertension, Hypercholesterolaemia.Revision on: 11/28/2025Revision by: Maryola Perion (RN)• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension, Hypercholesterolaemia for changes to health status and alteration or complications affecting cardiac function.Revision on: 11/28/2025Revision by: Maryola Perion (RN)• MEDICATION: Administer medication as per MD Order and monitor for side effects.Revision on: 11/28/2025Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
<ul style="list-style-type: none">• Potential for Expressive Behaviour of verbal, paranoid, physical, delusions, hallucinations and resistive to care in nature related to Acquired Brain Injury, Dementia, Panic Attacks.Revision on: 11/28/2025Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To promote safety for Donald and/or others during each episode of (verbal, paranoid, physical, delusions, hallucinations and resistive to care) through to the next review date.Revision on: 05/28/2025Revision by: Danielle Loreto (RAI Coordinator)Target Date: 02/28/2026• To decrease episodic frequency of (verbal, paranoid, physical, delusions, hallucinations and resistive to care) by next review date. ABS score will be less than 1.Revision on: 09/04/2025Revision by: Maryola Perion (RN)Target Date: 02/28/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Donald and Brenda about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of careRevision on: 06/20/2025Revision by: Chelsea Campbell-Wright (ADOC)• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Donald for indications to change in or for escalating expressive behaviour risk.Revision on: 05/28/2025Revision by: Danielle Loreto (RAI Coordinator)• TRIGGERS leading to PHYSICAL (Hitting, grabbing) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space)Revision on: 05/28/2025Revision by: Danielle Loreto (RAI Coordinator)• PHYSICAL Behaviour: If Donald 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: 05/28/2025Revision by: Danielle Loreto (RAI Coordinator)• TRIGGERS leading to VERBAL (yelling, raising his voice) as expression of behaviour include (loss of control, frustration, misunderstanding care intention, believes his wife is cheating on him)Revision on: 05/28/2025			BSO - Internal Social Worker	
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A	
Last Care Plan Review Completed:		11/28/2025					

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
<p>• Potential for Expressive Behaviour of verbal, paranoid, physical, delusions, hallucinations and resistive to care in nature related to Acquired Brain Injury, Dementia, Panic Attacks. Revision on: 11/28/2025 Revision by: Maryola Perion (RN)</p>			<p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Donald is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process.) Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Donald is declining to (bathe, change clothes, take medications, eating) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DE-ESCALATION: Donalds calms with redirection, explain to donald what you are doing. Donald enjoys playing Yatzee and uno. Donald enjoys watching movies. If Donald is asking to go home validate his feelings, explain to Donald that he is here for safety. Revision on: 06/20/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• ENVIRONMENT: Donald is most calm with quiet area in his room watching TV such as CNN, ABC and Movies in room. Revision on: 05/28/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 11/28/2025 Revision by: Maryola Perion (RN)</p> <p>• DELUSION: frequently will focus on events that have no occurred and this can lead to frustration.</p>				PCA	
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre				Print Date	12/11/2025		
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A		
Last Care Plan Review Completed:		11/28/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential for Expressive Behaviour of verbal, paranoid, physical, delusions, hallucinations and resistive to care in nature related to Acquired Brain Injury, Dementia, Panic Attacks. Revision on: 11/28/2025 Revision by: Maryola Perion (RN)		Will wake up from dreaming and will think the events have taken place Team to monitor for safety. Do not argue with resident. Offer support and reassurance. Try to redirect into an activity. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation ISE score = 5/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	<ul style="list-style-type: none"> Team members will support Donald in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date. Revision on: 06/06/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/28/2026	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite Don to programs of personal interest; movies, music programs, card games, (Yahtzee & Uno), scrabble and food related programs, outdoor walks/programs. Revision on: 08/26/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage Don to engage in self-directed activities such as reading paper, telephone conversations, watching TV in own room, walking, conversing with team members and other residents. Revision on: 08/26/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> HELPFUL HINTS: Don worked at Chrysler for 30+ years and is happy to talk about that. He is social, but does not seek engagement. Revision on: 09/21/2025			
Allergies	Ceclor, Cipro	D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)	Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			Revision by: Kameron Stewart (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation, bedside activity, reading, reminiscing, sports updates, movie talk and trivia. Revision on: 08/26/2025 Revision by: Nick Carroll (Recreation Aide) • FAMILY INVOLVEMENT: Wife is highly involved/visits often. Revision on: 11/18/2025 Revision by: Nick Carroll (Recreation Aide) • SOCIAL INTERACTION: Promote opportunity for Donald to make friendships and sit with friends during activities Revision on: 06/06/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Donald is at high risk for ELOPEMENT related to the home. Stated "I am getting out of here I am not staying here anymore. I want to go home. (6/20/25) Revision on: 06/21/2025 Revision by: Maryola Perion (RN)		• To promote DONALD safety and minimize risk for episode of elopement each day through next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• ALARM: Resident wears safety alarm on right wrist to alert of attempted elopement. PCA Respond immediately to alarm and inform Registered Staff. Revision on: 11/28/2025 Revision by: Maryola Perion (RN) • ALERT: Donald 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: 06/17/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect DONALD away from elevator or exit doors as needed. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential for PAIN and alteration in comfort level related to OSTEOARTHRITIS. Most Current LTCF Pain Score is 0. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Donald)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 06/17/2025 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. • NON VERBAL CUES of PAIN for Donald include - facial grimacing, tight fists,				
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A	
Last Care Plan Review Completed:		11/28/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 06/17/2025 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: 06/17/2025 Revision by: Maryola Perion (RN)		Registered Practical Nurse RN	
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	• COMMUNICATION: Involve/ collaborate with (Donald/SDM in decision making of musculoskeletal care management. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects. Revision on: 06/17/2025 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: 06/17/2025 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)			
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of Ceclor, Cipro. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		• Donald will be protected from exposure to allergen each day through next review date. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making and health teaching about ALLERGY to Ceclor, Cipro. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • ALLERGY ALERT: Donald has ALLERGY to Ceclor, Cipro. Prevent contact with			
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Donald's Allergy to Ceclor, Cipro and minimize risk for exposure to allergen. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 06/17/2025 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: 06/17/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 06/17/2025 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: 06/17/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff	
• Strength Training Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increase strength of B/L LE from 4/5 to 4+/5 in next 3 months: Revision on: 11/25/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/28/2026	• Strengthening exs using 1-3lbs. wt., 1 set, 10rps., 2-3/wk as tolerated, per rehab treatment. Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Balance Training Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increase balance scores from 21 to 23 in next 3 months; Revision on: 11/25/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/28/2026	• 1:1 balance training with wall bar/walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	

Allergies	Ceclor, Cipro	D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)	Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
• BOWEL Continence - Donald is continent and has self recognition of urge to defecate. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Donald to remain continent of bowels through next review date Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted.		PCA		
			• SELF TOILETING: Donald 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: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA		
• URINARY Continence - Donald is continent and has self recognition of urge to void. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Donald will maintain continence level through next review date Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• URINARY Continence Level is: CONTINENT		PCA		
			• SELF TOILETING: Donald toilets self. Each shift ask if he/she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA		
• Nutrition Risk Level		• Donald will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026 • Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/28/2026	• SNACK HS: serve 1 bowl of cereal with milk from floor 5 kitchenette at HS snack daily per POA request Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA Registered Practical Nurse RN Dietitian (RD)	E	
			• NUTRITION RISK: Brunelle Donald is Moderate risk level. Revision on: 11/18/2025 Revision by: Shereen Khan (Dietitian (RD))				
			• DIET ORDER: Brunelle Donald will receive regular diet, regular texture Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA		
			• FLUID CONSISTENCY: Brunelle Donald drinks REGULAR/THIN Level 0 Fluids. Revision on: 05/28/2025 Revision by: Niharika Chopra (Food Service Supervisor)		PCA		
			• FLUID TARGET: Encourage Donald to drink a minimum of 1754 ml/day. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA		
Allergies		Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis		Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses					
Facility		Berkshire Care Centre				Print Date	12/11/2025
Resident		Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		• Donald will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2193 ml/day (30 ml/kg using 73.1 kg weight) through to next review date. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/28/2026	• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • DIABETIC CARE: Serve diet juice instead of regular juice. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))		Dietary aide PCA PCA	
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Donald based on identified sleep patterns/preferences each night through to the next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• PREFERENCE: Donadl likes to have a snack if hungry before bed and to watch TV. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • REST PATTERN: Preferred bedtime 1900, usual wake time 0800 and daytime naps as he desires. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Type 2. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Target Date: 02/28/2026	• COMMUNICATION: Involve/ collaborate with (Donald)/SDM in decision making of diabetes care management. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. • CBG MONITORING: Monitor CAPILLARY BLOOD GLUCOSE (CBG) as per MD order. • MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		Registered Staff Registered Staff	
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Type 2. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• 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: 06/17/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none">• Risk for Impaired SKIN INTEGRITY related to Frailty	<ul style="list-style-type: none">• To protect and maintain skin integrity each day through to the next review. 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 MOOD related to Depression, Dementia, anxiety Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• Donald will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Donald for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• RESIDENT STRENGTHS: Build on Donald effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• DISTRACTION ACTIVITIES: Donald can be calmed doing activities of interest including (driving the car, listening to music, doing puzzles, watching movies, etc.) Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none">• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension) related to Traumatic Brain Injury and Dementia Revision on: 05/28/2025	<ul style="list-style-type: none">• Donald will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date.	<ul style="list-style-type: none">• PRIMARY LANGUAGE: Donald primary language is English and he speaks and understands English. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• INSTRUCTION GUIDANCE: Donald needs (intermittent) cueing or demonstrative				
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)	Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	instruction in tasks and activities. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Donald will be supported to maintain cognitive function through the review date. Current CPS is 2. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Donald is feeling lost or in confused state. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Donald can comprehend and follow. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.	Registered Staff	
• Increased risk for FALLS related to Cognitive loss and change in location. Revision on: 05/28/2025 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. Target Date: 02/28/2026	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making in fall prevention Plan of Care. Revision on: 06/17/2025 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: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Donald. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)	PCA PCA	D/E/N

Allergies	Ceclor, Cipro	D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)	Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		• Donald will be supported to maintain current self participation in ADL care through to the next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/28/2026	• BATHING: Donald is independent with his showering. He prefers to shower without PCA assistance. The team will check in for safety. Shower days are Monday and Thursday evening shift. Continue to provide encouragement as Donald will refuse.				
			Nail care to be provided on shower/bath day. Revision on: 11/28/2025 Revision by: Maryola Perion (RN)				
			• BED MOBILITY: Donald is independent with his movement in bed. He does not PCA require assistance. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			• DRESSING: Donald is independent with dressing of his upper and lower body. PCA Donald needs encouragement and supervision to ensure his clothes are changed. Revision on: 06/12/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
			• EATING: Donald is independent with set up from staff. He eats on home area PCA wildflower for all meals. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
			• LOCOMOTION: Donald is independent with his walking. Requires supervision when PCA off the home area Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			• PERSONAL HYGIENE: Donald is independent with his personal hygiene. He PCA requires cues and reminders. When confused please provide set up assistance. Revision on: 06/12/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
			• HAND HYGIENE: 1 staff to provide (REMINDER) assistance to (use soap/water, PCA apply sanitizer, rub hands together, dry hands) for hand hygiene. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			• TOILET USE: Donald is independent with his toileting. Monitor for changes in PCA status.				
			Allergies	Ceclor, Cipro			D.O.B.
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)			Admission Date	05/28/2025	Location	5 508 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 Cognitive Limitation 		<p>If resident gets confused he may require cues and intermittent 1 team member limited assistance. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> TRANSFERRING: Donald is independent with his transferring. Monitor for changes in status. Report to the nurse for further assessment if required. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) ORAL CARE: Donald has his own teeth and is able to complete his own oral care. Donald requires reminders to brush teeth. Revision on: 06/12/2025 Revision by: Chelsea Campbell-Wright (ADOC) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Donald Medical Treatment and End of Life Care Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 02/28/2026 	<ul style="list-style-type: none"> CPR: Donald wishes to have CPR. TRANSFER to hospital to be made at the time. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) 		

Allergies	Ceclor, Cipro	D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)	Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025			


Care Plan Report

Diagnosis

Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Other specified diabetes mellitus without (mention of) complication(E13.9), Primary generalized (osteo)arthrosis(M15.0)

Allergies	Ceclor, Cipro	D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Brunelle, Donald (922131005634)	Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• janette is experiencing episode of INFECTION of Cellulitis, noted on .dec 8/2025</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Betsi Tony (RN)</p>	<p>• To have infection adequately managed and treated without further complications by December 15th 2025.</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>Target Date: 12/15/2025</p>	<p>• COMMUNICATION: Involve/collaborate with Jenette with decision making for infection treatment plan and update accordingly.</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Betsi Tony (RN)</p> <p>• HEALTH EDUCATION: Engage with resident/SDM to enhance their knowledge of infection control practices</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Betsi Tony (RN)</p> <p>• MONITORING: Utilize holistic perspective of monitoring resident for until its stable</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Betsi Tony (RN)</p> <p>• VITAL SIGNS: Monitor VITAL SIGNS</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Betsi Tony (RN)</p> <p>• monitoring for any changes</p> <p>Revision on: 12/08/2025</p> <p>Revision by: Betsi Tony (RN)</p>				
<p>• Alteration in skin integrity with risk for infection or complications related to WOUND open area on Left shin.</p> <p>Revision on: 12/01/2025</p> <p>Revision by: Ravinder Kaur (Registered Nurse)</p>	<p>• 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).</p> <p>Target Date: 02/28/2026</p>	<p>• TREATMENT PLAN: Administer treatment for Stage (specify #) Wound to (specify body area) as per MD Order.</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Stage (Specify #) Wound to (Specify body area of wound) for changes to health status, wound infection and alteration or complications affecting skin integrity.</p> <p>• 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.</p>	Registered Staff			
<p>• Increased risk for FALLS related to wandering, unsteady gait, limping leaning more favourable to the weak leg, swelling on the left knee, history of falls.</p> <p>Revision on: 11/28/2025</p> <p>Revision by: Maryola Perion (RN)</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: 02/28/2026</p>	<p>• Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls.</p> <p>• PURPOSEFUL ROUNDING: Conduct purposeful rounding to assess residents needs; for pain, positioning, peri-needs or possessions for safety (self-transferring</p>	PCA Registered Practical Nurse RN PCA Registered			
Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications(E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date		12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location		5 525 B
Last Care Plan Review Completed:		11/28/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<p>and ambulating without walker).</p> <p>• COMMUNICATION: Involve/collaborate with Jeanette/SDM in decision making in fall prevention Plan of Care.</p> <p>Encouraged resident to use the call bell and ask for the assistance. Revision on: 10/17/2025 Revision by: Simran Patel (Registered Nurse)</p> <p>• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/17/2025 Revision by: Simran Patel (Registered Nurse)</p> <p>• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker (continue to encourage Jeanette to use it). Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</p> <p>• ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Jeanette. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</p> <p>• FOOTWEAR: Ensure resident wears appropriate footwear for (transfers, ambulation). Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</p> <p>• ALARM: Requires Bed alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/22/2025 Revision by: Gurjit Kaur (RN)</p> <p>• SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</p>	<p>Practical Nurse RN</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p>	<p></p> <p></p> <p>D/E/N</p> <p></p> <p></p> <p>D/E/N</p>
• Alteration in skin integrity related to RASH Scabies (?). Onset date: 11/25/25	• To promote intact skin integrity through healing of scabies by	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with scabies for changes to health status and alteration or complications affecting skin	Registered Practical	
Allergies	No Known Allergies		D.O.B.	07/07/1940
Physician			Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location 5 525 B
Last Care Plan Review Completed:		11/28/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 11/27/2025 Revision by: Maryola Perion (RN)	the target date. Revision on: 11/27/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	integrity. Revision on: 11/27/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for scabies as per MD Order. Monitor effectiveness and for side effects. Revision on: 11/27/2025 Revision by: Maryola Perion (RN)	Nurse RN Registered Practical Nurse RN	
• Alteration in skin integrity related to scratch marks to abdomen. Revision on: 11/23/2025 Revision by: Lucy(Xifeng)Lu (RPN)	• To promote intact skin integrity through healing of scratch marks by next review date. Revision on: 11/23/2025 Revision by: Lucy(Xifeng)Lu (RPN) Target Date: 02/28/2026	• MEDICATION: Administer medication for scratch marks as per MD Order. Monitor effectiveness and for side effects. Revision on: 11/23/2025 Revision by: Lucy(Xifeng)Lu (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: 11/27/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN	
• Alteration in skin integrity related: Irritation/rash: scratch marks and scabs: middle chest area/ underneath left and right breast. Revision on: 11/17/2025 Revision by: Lara Ismail (RN)	• To promote intact skin integrity through healing of skin Irritation/rash: by end of treatment and goal target date) Revision on: 11/17/2025 Revision by: Lara Ismail (RN) Target Date: 02/28/2026	• MONITORING: Utilize holistic perspective of continuous monitoring for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/17/2025 Revision by: Lara Ismail (RN) • TOPICAL TX: Apply topical treatment as MD Order. To be applied once new orders obtained. Revision on: 11/27/2025 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: 11/18/2025 Revision by: Shereen Khan (Dietitian (RD)) • ALTERNATIVE Therapy: offer relieve measures for irritation such as cool compress if requested. Revision on: 11/17/2025 Revision by: Lara Ismail (RN)	Registered Practical Nurse RN Registered Practical Nurse Registered Practical Nurse RN Registered Practical Nurse	

Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

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 report intermittent pain in hands and joints, pain Left eye (minimal), Right and left knee/leg pain. Most Current RAI Pain Score is 0. Revision on: 10/17/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • Promote RAI Pain Score of 0 through to the next review. Target Date: 02/28/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Jeanette)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 09/23/2025 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: 09/23/2025 Revision by: Maryola Perion (RN) 	RN Registered Practical Nurse Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Risk for Impaired SKIN INTEGRITY related to Incontinence, Diagnosis of diabetes mellitus, peripheral edema, swelling on the left knee. Revision on: 09/23/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. 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"> • At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation, Missing Family/Friends 	<ul style="list-style-type: none"> • Team members will support Jeanette in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/28/2026 	<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite her to programs of personal interest; food programs, baking, concerts, cards, movies, parties, tea social, snoezelen cart and music. Revision on: 11/18/2025 Revision by: Nick Carroll (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, walking. Revision on: 11/18/2025 Revision by: Nick Carroll (Recreation Aide) • ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, walking groups, hand massages. Revision on: 11/18/2025 Revision by: Nick Carroll (Recreation Aide) 		

Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Balance Training Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increase Tinetti scores from 14 to 17 in next 3 months Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/28/2026	• 1:1 balance training with 2WW walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week Revision on: 11/25/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Gait Training Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Improved foot clearance while walking from current shuffling gait in next 3 months; Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/28/2026	• 1:1 assist gait training with 2WW, rest breaks as needed, cue for proper foot clearance and heel toe pattern, Distance as best tolerated; 2-3 x a week; Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Strength Training Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increased strength of B/L LE from 3/5 to 3+/5 per MMT in next 3 months. Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 02/28/2026	• Strengthening exs for B/L UE and LE, within pain limits, 1lbs to 2lbs, 10 reps, 1-2 sets, 2-3 x a week; Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Nutrition Risk Level	• Jeanette will be adequately nourished aeb consuming >75% at meals and snacks through to next review date Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 02/28/2026 • Will weigh within GWR of 50-60kg through to next review date. Revision on: 09/03/2025	• NUTRITION RISK: Jeanette is moderate risk level. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Jeanette will receive regular diet, regular texture Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • FLUID CONSISTENCY: Jeanette drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • FLUID TARGET: Encourage Jeanette to drink a minimum of 1050 ml per day. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian)	Dietitian (RD) PCA PCA PCA	
Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre			Print Date 12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location 5 525 B
Last Care Plan Review Completed:		11/28/2025		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		Revision by: Brittany Hyde (Registered Dietitian) Target Date: 02/28/2026 • Jeanette will be adequately hydrated aeb drinking at least 80% of total fluid requirement @25-30ml/kg, through to next review date. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 02/28/2026 • Will meet estimated nutritional requirements of kcal @ 25-30 kcal/kg, protein @ 0.8-1g/kg through to next review date. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 02/28/2026					
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, etc.) Revision on: 08/25/2025 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: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	• 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: 08/25/2025 Revision by: Maryola Perion (RN)				
• Potential for bruising, bleeding, clotting or other complications related to use of (ANTICOAGULANT) medication. Revision on: 08/25/2025		• To monitor for bleeding and minimize complications related to use of anticoagulant through the review date.	• 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: 08/25/2025 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies			D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)			Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Maryola Perion (RN)		Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	<ul style="list-style-type: none"> • BLEEDING ALERT: Notify nurse immediately if Jeanette is bleeding (noted blood in PCA urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 08/25/2025 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. 		Registered Staff	
<ul style="list-style-type: none"> • Potential to experience alteration in MOOD as exhibited by history of low/depressed mood, will become tearful/crying throughout the day and unable to answer why she is crying, tearful when seeing a picture of her husband who passed away last year, history of persistent anger with self or others, repetitive anxious complaints/concerns non health related, sad, pained, worried facial expressions, reduced social interactions related to inability to cope with change, Dementia, new environment. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) 		<ul style="list-style-type: none"> • Jeanette will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 09/19/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Jeanette for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Jeanette effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) 			
<ul style="list-style-type: none"> • Potential for gastric discomfort/complications related to diagnosis of Acid Reflux Revision on: 08/25/2025 Revision by: Maryola Perion (RN) 		<ul style="list-style-type: none"> • To treat and/or minimize complications associated with acid reflux each day through to the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of acid reflux for discomfort/ complications or changes to health status. Revision on: 08/25/2025 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 as per MD order. Monitor effectiveness and 		PCA Registered Staff	
Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		for side effects. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	<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. Target Date: 02/28/2026	<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. 	Registered Staff		
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to: Coronary Heart Disease, Hyperlipidaemia, Hypertension, Atrial Fibrillation Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with Coronary Heart Disease, Hyperlipidaemia, Hypertension, Atrial Fibrillation through to the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	<ul style="list-style-type: none"> 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. MEDICATION: Administer medication for Coronary Heart Disease, Hyperlipidaemia, Hypertension, Atrial Fibrillation as per MD Order and monitor for side effects. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	Registered Staff Registered Practical Nurse RN		
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new admission, Dementia. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote adequate rest/sleep for Jeanette based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/30/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime: Likes to go to bed at 8pm. Don't go to bed any earlier or she may stay up all night, usual wake time: early riser - no specific time and naps during the day. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA		
<ul style="list-style-type: none"> Potential for BOWEL INCONTINENCE related to Dementia Diagnosis Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Jeanette will have bowel incontinence managed every shift through to the next review period. Revision on: 08/25/2025	<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. BOWEL Continence level is FREQUENTLY Incontinent. Report change to level as Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA		
Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Maryola Perion (RN) Target Date: 02/28/2026	noted. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list on the floor. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA		
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	• Jeanette will have urinary incontinence managed every shift through to the next review period. Revision on: 08/30/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is FREQUENTLY Incontinent. Report change to level as noted. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list on the floor. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA		
• Potential for Expressive Behaviour of (WANDERING, VERBAL (shouting at family when enforcing a routine), SOCIALLY Inappropriate, RESISTANCE to care (will become agitated when care is given, will refuse to dress self, bath/shower), rummaging behaviors (rummaging through drawers, garbage & rummages her own belongings and not others) hoarding behavior (household items such as tissues, batteries and items	• To promote safety for Jeanette and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 • To decrease episodic frequency of Expressive Behaviour by next review date.	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Jeanette for indications to change in or for escalating expressive behaviour risk. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (shouting, yelling, screaming, etc.) as expression of behaviour include (frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Jeanette 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.			
Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
of importance, soiled clothing in her closet), related to Inability to COPE, Dementia, Anxiety Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	ABS score will be less than 2. Revision on: 11/28/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	Revision on: 08/25/2025 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 expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Jeanette is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY Inappropriate (hoarding, rummaging, etc.) as expressions of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Jeanette is rummaging and hoarding, staff provide redirection. Offer alternative, meaningful activities to keep the individual occupied and stimulated. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • WANDERING: Permit Jeanette to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • SPECIAL CONSIDERATIONS: Responsive behavior will escalate when sundowning - usually around 2pm per admission paper. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)				
• Altered VISION related to minimal difficulty with vision (see large print). Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	• Jeanette will be safe and to prevent decline with vision through to the next review date. Revision on: 08/25/2025	• READING: Jeanette uses large print material to aid with reading. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA			
Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Maryola Perion (RN) Target Date: 02/28/2026				
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Hard of hearing to Right Ear and Deaf to Left Ear. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> Jeanette will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 Jeanette will be supported to make basic needs known each day through to the review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Jeanette's primary language is English. She is able or unable to speak/understand English. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) COMMUNICATION DEVICE: Jeanette is using a white board that can assist with communication writing down simple questions. Jeanette can at times read lips. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) HEARING AID; Apply/Remove to/from Right ear. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored: inside the medication room. Revision on: 08/25/2025 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: 08/25/2025 Revision by: Maryola Perion (RN) INSTRUCTION GUIDANCE: Jeanette needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) 	PCA	D/E	
<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: 08/25/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> Jeanette will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 09/19/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Jeanette is feeling lost or in confused state. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) 			
<ul style="list-style-type: none"> Altered ability to complete Activities of 	<ul style="list-style-type: none"> Jeanette will have ALL ADL 	<ul style="list-style-type: none"> BATHING: Jeanette prefers (shower) on Mondays and Fridays Day shifts. One staff 	PCA		
Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Daily Living (ADLs) related to Dementia, Diabetes Mellitus, Hard of hearing. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		care needs met each day through the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026 • Jeanette 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: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	LIMITED assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • BED MOBILITY: Jeanette is able to turn and reposition in bed for bed Independently. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • DRESSING: Jeanette is able to assist by lifting her arms and legs with staff cueing. One staff Extensive assistance in dressing UPPER & LOWER body. Revision on: 11/28/2025 Revision by: Maryola Perion (RN) • EATING: Jeanette is Independent with staff set up and supervision during meal time. Eats in the unit dining room - wildflower lane. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Jeanette is Independent with Supervision from staff with her ambulation. She may require one staff Limited assistance at times. She has a walker but refusing to use it, requires staff to remind and encourage Jeanette to use it. Two-wheeled walker. Revision on: 09/06/2025 Revision by: Heidhy Dumincil (Registered Practical Nurse) • PERSONAL HYGIENE: Jeanette is able to assist with cueing from staff. One staff to provide LIMITED assistance for hygiene. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • 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: 08/25/2025 Revision by: Maryola Perion (RN) • TOILET USE: Jeanette is able to transfer to the toilet with one staff guidance and assistance. One staff to provide Extensive assistance for toileting needs. Revision on: 11/28/2025 Revision by: Maryola Perion (RN) • TRANSFERRING: Jeanette requires one staff Limited assistance for transferring.			PCA	
Allergies	No Known Allergies			D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)			Admission Date	08/25/2025	Location	5 525 B
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 Dementia, Diabetes Mellitus, Hard of hearing. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		Revision on: 08/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ORAL CARE: Anna has her own teeth and requires staff to set up and provide cueing and guidance with oral hygiene. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Jeanette Medical Treatment and End of Life Care Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To support and honor Jeanette expressed wishes and beliefs through to the End of Life. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/28/2026	<ul style="list-style-type: none"> CPR: Jeanette wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		

Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Diagnosis

Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications(E11.9), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Hearing loss, unspecified(H91.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Oedema, unspecified(R60.9)

Allergies	No Known Allergies	D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B
Last Care Plan Review Completed:		11/28/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, RESISTANCE to care need, Verbally expressive, vulgar language used, Socially inappropriate, Physical aggression (hitting a resident on the chest, hit her rt. arm on the dresser and punched the wall, hitting things eg. walls, tearing down papers from walls), sexual (licking her hand and was showing other staff members her breast 1/28/24), throwing things on the floor, punching the wall and yelling that she wants money to go home and that she needs her address (2/7/24), trying to hit a resident & climbed over the kitchen (4/13/24), Punched a resident (5/19/24), tried hitting staff and throwing her shoe to other resident, pushing another resident, kissing with another resident and putting the resident hand to her private part, (10/16/24) related to Acquired Brain Injury, Inability to COPE, Anxiety, Hearing Impairment, Physical (11/24/25), hi</p> <p>Revision on: 11/27/2025 Revision by: Alyssa Egan (ADOC)</p>	<p>• To promote safety for Robyn and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) Target Date: 03/09/2026</p> <p>• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 3. Revision on: 10/10/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026</p>	<p>• COMMUNICATION: Involve/collaborate with SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Robyn for indications to change in or for escalating expressive behaviour risk. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to PHYSICAL (Hitting, Punching, Throwing things on the floor, throwing her shoe, etc.) as expression of behaviour include (confusion, Sundowning, pushing, etc.) Revision on: 10/17/2024 Revision by: Maryola Perion (RN)</p> <p>• PHYSICAL Behaviour: If Robyn 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. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)</p> <p>• VERBAL Behaviour: If Robyn 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: 10/17/2024 Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusing medication, etc.) as expression of behaviour include confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 10/17/2024 Revision by: Maryola Perion (RN)</p> <p>• RESISTANCE to Care Need: If Robyn is refusing to bathe, change clothes, take medications, etc., re-approach when the resident is calm. Report episode to Registered Staff. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)</p>	<p>Registered Staff BSO - Internal BSO - External Social Worker Registered Staff</p>	<p></p>	
Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025			



Care Plan Report

[illegible]

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of WANDERING, RESISTANCE to care need, Verbally expressive, vulgar language used, Socially inappropriate, Physical aggression (hitting a resident on the chest, hit her rt. arm on the dresser and punched the wall, hitting things eg. walls, tearing down papers from walls), sexual (licking her hand and was showing other staff members her breast 1/28/24), throwing things on the floor, punching the wall and yelling that she wants money to go home and that she needs her address (2/7/24), trying to hit a resident & climbed over the kitchen (4/13/24), Punched a resident (5/19/24), tried hitting staff and throwing her shoe to other resident, pushing another resident, kissing with another resident and putting the resident hand to her private part, (10/16/24) related to Acquired Brain Injury, Inability to COPE, Anxiety, Hearing Impairment, Physical (11/24/25), hi</p> <p>Revision on: 11/27/2025 Revision by: Alyssa Egan (ADOC)</p>		<p>kissing other residents, putting her hand on private parts, calmly assist to her room. Triggers: Cognitive impairment, anxiety, decreased insight, poor judgement, long History of drug abuse, severe hearing impairment, History of family trauma (drug overdoses) and was in an abusive relationship.</p> <ol style="list-style-type: none"> 1. Allow Robyn to wake up on her own 2. Use stop and go. Reapproach when the resident is calm 3. Due to Robyn's hearing impairment write down on the white board and show it to her. Robyn can also read lips, ensure you have her full attention. 4. Ensure background noise has been minimized to improve communication. If she appears puzzled, ensure the environment is quiet and try to repeat or write down questions. 5. If there are no residents in a room she is wandering into and the level of risk is low, please avoid touching Robyn for re-direction unless safety concern has been identified. 6. Continue to ensure positive body language such as waving, smiling and open non-threatening hands are utilized in situations to avoid escalation. 7. The resident likes toast with jam, coffee, milk, cookies and bananas. Offer her toast and coffee when she wakes up. <p>Robyn likes to watch cartoons, colour, birds, is very social and likes funny animal videos</p> <p>Revision on: 10/20/2025 Revision by: Leslie Meloche (Recreation Aide)</p>			
Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025			

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 disinterest. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	<ul style="list-style-type: none"> To support Robyn's Psycho-Social well being through to the next review. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite Robyn for friendly/1:1 visits, arts & crafts, discussion group, puzzles, manicures & hand massages, montessori sensory stimulation, music programs, reminiscing groups, tovertafel games, special events & movie nights on her floor in the lounge. Revision on: 12/10/2025 Revision by: Nick Carroll (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, team members, colouring, painting & newspaper readings. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"> ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music & colouring materials. Revision on: 12/10/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> SOCIAL INTERACTION: Continue to encourage Robyn to make friendships and sit with friends during group activities. Revision on: 07/07/2025 Revision by: Nick Carroll (Recreation Aide)		
<ul style="list-style-type: none"> Potential for Persistent PAIN and alteration in comfort level related to chronic pain, ABI, L/Ankle R/O pain and swelling, HX right hip fracture. Most Current RAI Pain Score is 0 Revision on: 07/11/2025 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. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026 <ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Revision on: 07/11/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	<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: 07/11/2025 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. <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: 04/11/2022 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse Registered Practical Nurse RN	

Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44.....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report

[illegible]

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Increased risk for FALLS related to Wandering, ABI, Dementia, Seizure, Epilepsy, Hx of falls, Fall with hip fracture Revision on: 05/05/2025 Revision by: Chelsea Campbell-Wright (ADOC)			• SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 02/18/2025 Revision by: Maryola Perion (RN)			
• Gait Training: Revision on: 04/29/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increased walking independence from 2 person assist to 1 person assist in next 3 months; Revision on: 04/29/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 03/09/2026	• 2:1 assist gait training with walker, follow with wheelchair behind. Distance as best tolerated. 2-3 x a week; Revision on: 10/07/2025 Revision by: Shina Wadhwa (Physical Therapist)		PT - Physiotherapist PTA	
• Transfers Training Revision on: 04/11/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Reduced assistance needed for transfers from 1 person assist to Sup assist in next 3 months. Revision on: 10/07/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 03/09/2026	• 1:1 assist sit to stand at the parallel bar/walker, Cue for proper use of walker; 3-5 reps; 2-3 x a week; Revision on: 10/07/2025 Revision by: Shina Wadhwa (Physical Therapist)		PT - Physiotherapist PTA	
• Potential to experience alteration in		• To decrease the episodic frequency of negative Mood	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Robyn for indications to change in MOOD including labile mood or increase of symptoms			
Allergies	No Known Allergies		D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
MOOD as exhibited by repetitive questions, persistent anger with self or others, unpleasant mood in the morning, repetitive anxious complaints, insomnia/change in usual sleep pattern, sad, pained, worried facial expressions, repetitive physical movements related to Loss of Independence, Inability to cope with change, Anxiety Disorder, ABI (MVA - 1987), Dementia, Hearing loss. Revision on: 02/18/2025 Revision by: Maryola Perion (RN)		symptoms by the next review date. DRS score will be maintained to 0. Revision on: 07/11/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	that negatively impact residents quality of life. Revision on: 05/17/2022 Revision by: Maryola Perion (RN) • DISTRACTION ACTIVITIES: Robyn can be calmed doing activities of interest including (enjoys coloring, looking at her book of animal pictures, funny animal videos and music on the iPad.) Revision on: 07/12/2022 Revision by: Maryola Perion (RN) • SLEEP/REST: Promote adequate sleep and rest to stability of Robin's mood. Report changes in sleeping habits to Registered Staff as noted. Revision on: 05/17/2022 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 05/17/2022 Revision by: Maryola Perion (RN)			ACT	
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Use of incontinent product, Dementia, Swelling on left ankle. Revision on: 08/02/2024 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	• 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	
• Robyn is at high risk for ELOPEMENT related to she wants money to go home and that she needs her address (2/7/24) Revision on: 02/08/2024 Revision by: Maryola Perion (RN)		• To promote Robyn's safety and minimize risk for episode of elopement each day through next review date. Revision on: 02/08/2024 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	• ALERT: Robyn 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: 02/08/2024 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Robyn away from elevator or exit doors as needed. Revision on: 02/08/2024 Revision by: Maryola Perion (RN)			PCA	
Allergies	No Known Allergies		D.O.B.	01/18/1968	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location	5 507 A	
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
<ul style="list-style-type: none">• Potential for CONSTIPATION related to daily use of medication with binding effect, decreased mobility, etc. Revision on: 03/21/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none">• Robyn will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with SDM for decision making regarding constipation management. Revision on: 02/18/2025 Revision by: Maryola Perion (RN)• MONITORING: Utilize holistic perspective of continuous monitoring of Robyn for constipation management and changes to health status and symptoms/ complications of constipation. Revision on: 03/21/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.• BOWEL PROTOCOL: In place as per MD order				Registered Staff	
<ul style="list-style-type: none">• Sleep Patterns; Potential for alteration in sleep patterns related to sleeping in the morning Revision on: 12/27/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To promote adequate rest/sleep for Robyn based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/19/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none">• REST PATTERN: Preferred bedtime: No specific time, usual wake time: No specific time. Staff to let Robyn sleep in and wake on her own time. Revision on: 12/14/2023 Revision by: Maryola Perion (RN)• SLEEPWEAR: Robyn prefers to wear her own clothes. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)				PCA	
<ul style="list-style-type: none">• Expressed Wishes and Beliefs related to Robyn Medical Treatment and End of Life Care Revision on: 07/12/2022 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To support and honor Robyn's expressed wishes and beliefs through to the End of Life. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	<ul style="list-style-type: none">• CPR: Robyn wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 04/12/2025 Revision by: Maryola Perion (RN)					
<ul style="list-style-type: none">• URINARY (Mixed) INCONTINENCE		<ul style="list-style-type: none">• Robyn will have urinary	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident for					
Allergies	No Known Allergies		D.O.B.	01/18/1968		Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022		Location	5 507 A	
Last Care Plan Review Completed:		10/15/2025						

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
related to Dementia Diagnosis Revision on: 04/25/2022 Revision by: Maryola Perion (RN)		incontinence managed every shift through to the next review period. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	toileting needs, changes to health status and alteration of continence level. Revision on: 04/11/2022 Revision by: Maryola Perion (RN) • URINARY Continence level is usually incontinent. Report change to level as noted. Revision on: 10/10/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Robyn uses a MEDIUM Pull up on Days, Afternoon and Night shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN)			PCA	
• SPIRITUAL BELIEFS: Robyn is Non-Religious. Revision on: 04/21/2022 Revision by: Mitchell Atkinson (Recreation Aide)		• To provide Robyn spiritual support as interested through to the next review date. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	• PERSONAL CHOICE: Respect Robyn's right to decline participation in Spiritual Program. Revision on: 04/21/2022 Revision by: Mitchell Atkinson (Recreation Aide)			ACT	
• Potential to experience alteration in RESPIRATORY FUNCTION related to: Chronic Obstructive Pulmonary Disorder (COPD) Revision on: 04/11/2022 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Chronic Obstructive Pulmonary Disorder (COPD) each day through to next review date. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	• 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: 04/11/2022 Revision by: Maryola Perion (RN) • POSITIONING: To manage shortness of breath (SOB) elevate head of the bed to improve breathing. • OXYGEN: Administer Oxygen as per MD order. Revision on: 04/11/2022 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication inhalers, etc. for Chronic Obstructive Pulmonary Disorder (COPD) as per MD order and monitor for side effects. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)			Registered Staff PCA	
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to:		• To treat and minimize signs/symptoms or complications	• COMMUNICATION: Involve/ collaborate with SDM in decision making of neurological care management for SEIZURE Disorder, MVA, ABI, Epilepsy.			PCA	
Allergies	No Known Allergies		D.O.B.	01/18/1968		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022		Location	5 507 A
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
SEIZURE Disorder, MVA, ABI, Epilepsy Revision on: 04/11/2022 Revision by: Maryola Perion (RN)	associated with SEIZURE Disorder, MVA, ABI, Epilepsy through to the next review date. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	Revision on: 12/14/2023 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication as per MD order. Monitor effectiveness and for side effects. Revision on: 04/11/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with SEIZURE Disorder, MVA, ABI, Epilepsy for changes to health status and alteration or complications affecting neurological function. Revision on: 04/11/2022 Revision by: Maryola Perion (RN) • Observe SWALLOWING: Inform Registered staff of changes or any signs of difficulty in swallowing (coughing during eating, drooling, etc.). Revision on: 04/11/2022 Revision by: Maryola Perion (RN) • SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway. • SEIZURE Disorder: Robyn has potential for seizure activity, injury related to seizure disorder. Inform MD as it occurs. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)	PCA PCA Registered Staff All	
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 04/11/2022 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: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 04/11/2022 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: 04/11/2022 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff	

Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 04/11/2022 Revision by: Maryola Perion (RN)	• Robyn will have bowel incontinence managed every shift through to the next review period. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (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.	Registered Staff			
		• BOWEL Continence level is Continent. Report change to level as noted. Revision on: 07/11/2025 Revision by: Maryola Perion (RN)	PCA			
		• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.	PCA			
		• INCONTINENCE PRODUCT: Robyn uses a MEDIUM Pull up on Days, Afternoon and Night shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN)	PCA			
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, slurred speech, mumbled speech, etc.) related to Hard of hearing, Dementia, sometimes understood and sometimes understand. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)	• Robyn is unable to express self and will be supported to have needs interpreted each day through the next review. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with SDM for decision making about strategies needed to support effective communication. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)				
		• PRIMARY LANGUAGE: Robyn's primary language is English. She is able to speak/understand English. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)				
		• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, use simple words/phrases, etc.. To use paper and pen for communication Revision on: 10/09/2024 Revision by: Maryola Perion (RN)				
		• INSTRUCTION GUIDANCE: Robyn needs constant cueing or demonstrative instruction in tasks and activities. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)	ACT			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Dementia, Traumatic Brain Injury	• Robyn will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 07/11/2025	• COMMUNICATION: Involve/collaborate with SDM in decision making of Cognitive Loss for Dementia, ABI. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies		D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025				

Care Plan Report

[illegible]

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, ABI, HOH, History of drug abuse. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)</p>		<p>care. Revision on: 07/11/2025 Revision by: Maryola Perion (RN)</p> <p>• HAND HYGIENE: 1 staff to provide Limited assistance to apply sanitizer or use wipes for hand hygiene. Revision on: 07/11/2025 Revision by: Maryola Perion (RN)</p> <p>• TOILET USE: Robyn requires one team member extensive assistance with transferring on and off the toilet. One staff Extensive assistance to adjust her clothing, changes pad, cleansing her after toilet use. Robyn will toilet herself at times. Encourage to ask for assistance for toileting needs. Revision on: 09/28/2025 Revision by: Maryola Perion (RN)</p> <p>• TRANSFERRING: Robyn requires one person staff assist with transfers to and from bed to wheelchair. Staff to monitor as Robyn will self transfer. Revision on: 09/05/2025 Revision by: Lara Ismail (RN)</p> <p>• ORAL CARE: Robyn has some teeth missing, carious. She requires one staff to provide reminders, encouragement and set up for oral hygiene needs. Revision on: 07/11/2025 Revision by: Maryola Perion (RN)</p> <p>• FOOT CARE: PSW to complete toenail care every bath/shower days. Report long toe nails or other abnormalities as noted. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)</p>	PCA	
<p>• Nutrition Risk Level</p>	<p>• Robyn will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>• Labelled Item Lunch: ice cream cup daily Revision on: 11/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Robyn is moderate risk level. Revision on: 04/11/2025</p>	PCA Registered Practical Nurse RN Dietitian (RD)	D
Allergies	No Known Allergies		D.O.B.	01/18/1968
Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location 5 507 A
Last Care Plan Review Completed:		10/15/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>Target Date: 03/09/2026</p> <ul style="list-style-type: none"> Will weigh within GWR/IBW/Realistic weight range of 60-65 kg/BMI 17-19 through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 03/09/2026 Robyn will be adequately hydrated aeb drinking at least 75% of total fluid requirement @ 25 ml/kg, 62.3kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 03/09/2026 Will meet estimated nutritional requirements of 1668kcal @ 30kcal/kg, 56g protein @ 1.0 g/kg through to next review date. Revision on: 09/03/2024 Revision by: Rachelle Ly (Dietitian (RD)) Target Date: 03/09/2026 	<p>Revision by: Brittany Hyde (Registered Dietitian)</p> <ul style="list-style-type: none"> DIET ORDER: Robyn will receive regular diet, regular texture (encourage softer options, cut food into small pieces) Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) FLUID CONSISTENCY: Robyn drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/11/2022 Revision by: Anna Slack (Registered Dietitian) FLUID TARGET: Encourage Robyn to drink a minimum of 1168ml per day. Revision on: 02/10/2025 Revision by: Brittany Hyde DINING INSTRUCTIONS: Encourage softer options, cut food into small pieces Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) LABELLED SNACK AM: Soft cookie daily Banana Mon/Wed/Fri Greek yogurt Tues/Thurs/Sat/Sun Revision on: 11/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) 	<p>PCA</p> <p>Diet PCA</p> <p>PCA</p> <p>Registered Practical Nurse</p> <p>PCA</p>	<p></p> <p></p> <p></p> <p></p> <p>D/E</p>

Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44.....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report


--	--	--

Diagnosis

Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44.3), Personal history of drug abuse(Z86.41), Anxiety disorder, unspecified(F41.9), Diffuse brain injury with open intracranial wound(S06.26), Chronic obstructive pulmonary disease, unspecified(J44.9), Unspecified fracture of neck of femur, closed(S72.090)

Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Hearing loss, unspecified(H91.9), Epilepsy, unspecified, not stated as intractable(G40.90), Seizure disorder, so described(R56.80), Chronic post-traumatic headache(G44....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	5 507 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Potential to experience alteration in CARDIAC FUNCTION related to; Arteriosclerotic Heart Disease, Coronary Artery Disease, Myocardial Infarction History, hypertension Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• To treat and minimize signs/symptoms or complications associated with Arteriosclerotic Heart Disease, Coronary Artery Disease, Myocardial Infarction History through to the next review date. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Arteriosclerotic Heart Disease, Coronary Artery Disease, Myocardial Infarction History for changes to health status and alteration or complications affecting cardiac function. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• MEDICATION: Administer medication for Arteriosclerotic Heart Disease, Coronary Artery Disease, Myocardial Infarction History as per MD Order and monitor for side effects. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)			Registered Practical Nurse RN	
<ul style="list-style-type: none">• Potential to experience alteration in MOOD as evidence by sad mood, cries after visits, tearfulness, scarred to be alone related to Dementia Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• Dellas will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Dellas for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• RESIDENT STRENGTHS: Build on Dellas effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none">• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, decision making related to Dementia, Hard of hearing, family report tinnitus (resident will ask what is that noise) Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• Dellas will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	<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: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• INSTRUCTION GUIDANCE: Dellas needs (SPECIFY; minimal, intermittent, or constant) cueing or demonstrative instruction in tasks and activities. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Nutrition Risk Level		• Dellas will be adequately	• DIET ORDER: Dellas will receive Regular diet, Regular texture			PCA	
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	10/31/1928	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Halley, Dellas (922131005680)		Admission Date	12/10/2025	Location	5 510 A	

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID CONSISTENCY: Dellas drinks REGULAR/THIN Level 0 Fluids. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Dellas based on identified sleep patterns/preferences each night through to the next review date. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	• REST PATTERN: Preferred bedtime 2200, usual wake time 0700 and daytime naps at her discretion. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for CONSTIPATION related to daily use of medication that may have binding effect Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Dellas will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order		Registered Staff Registered Staff	
• Potential for BOWEL INCONTINENCE related to cognitive loss Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Dellas will have bowel incontinence managed every shift through to the next review period. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	• 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: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses (Medium Brief) during all shifts.		Registered Staff PCA PCA	
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	10/31/1928	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Halley, Dellas (922131005680)		Admission Date	12/10/2025	Location	5 510 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for BOWEL INCONTINENCE related to cognitive loss Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> Dellas will have urinary incontinence managed every shift through to the next review period. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	<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: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> URINARY Continence level is (FREQUENTLY Incontinent). Report change to level PCA as noted. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> INCONTINENCE PRODUCT: Resident uses (Medium Brief) during all shifts. PCA Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> Risk for Impaired SKIN INTEGRITY related to Frailty, Incontinence, pitting edema Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To protect and maintain skin integrity each day through to the next review. Target Date: 03/10/2026	<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"> Dellas is at high risk for ELOPEMENT related to Dementia Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To promote Dellas safety and minimize risk for episode of elopement each day through next review date. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	<ul style="list-style-type: none"> ELOPEMENT ALERT: Redirect Dellas away from elevator or exit doors as needed. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	

Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	10/31/1928	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Halley, Dellas (922131005680)	Admission Date	12/10/2025	Location	5 510 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Cognitive loss</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>• To decrease episodic frequency of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need) by next review date. ABS score will be less than (state current ABS score).</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 03/10/2026</div>	<div>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Dellas for indications to change in or for escalating expressive behaviour risk.</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRIGGERS leading to VERBAL (yelling, curse, calling names, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.)</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• VERBAL Behaviour: If Dellas 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.</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRIGGERS leading to RESISTANCE to Care Needs (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication may occur) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• RESISTANCE to Care Need: If Dellas is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• WANDERING: Permit Dellas to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• HALLUCINATION: May occur as a sign of UTI being present related to history of seeing bugs when a UTI was present.</div> <div>Revision on: 12/10/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>					Registered Practical Nurse RN	
<div>• Altered VISION</div> <div>Revision on: 12/10/2025</div>		<div>• To minimize complications through to next review date.</div>	<div>• READING: Dellas uses large print material to aid with reading.</div> <div>Revision on: 12/10/2025</div> <div>PCA</div>						
Allergies	Penicillin, Sulfa Antibiotics			D.O.B.	10/31/1928	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre					Print Date	12/11/2025		
Resident	Halley, Dellas (922131005680)			Admission Date	12/10/2025	Location	5 510 A		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Danielle Loreto (RAI Coordinator)	Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	Revision by: Danielle Loreto (RAI Coordinator)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Dellas will be supported to maintain cognitive function through the review date. Current CPS is (SPECIFY; 1, 2, 3, or 4) Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Dellas is feeling lost or in confused state. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Dellas can comprehend and follow. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to Dementia. Limitation of cognitive function/altered judgement Revision on: 12/10/2025 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. Target Date: 03/10/2026	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	D/E/N		
• Potential for PAIN and alteration in comfort level Most Current LTCF Pain Score is (fill in score) Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Promote RAI Pain Score of 0 through to the next review. Target Date: 03/10/2026	• 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. • NON VERBAL CUES of PAIN for Dellas may be (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: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	RN Registered Practical Nurse PCA			
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation	• Dellas will have ALL ADL care needs met each day through the next review date.	• BATHING: Dellas prefers (tub bath) on (Monday and Friday during the day shift). Resident can participate when willing in washing her upper body. 1 team member	PCA			
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	10/31/1928	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Halley, Dellas (922131005680)		Admission Date	12/10/2025	Location	5 510 A

Care Plan Report

[illegible]

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 		<p>the toilet and assisting with continence care. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> TRANSFERRING: Dellas requires 1 team member assistance with transferring, monitor for changes. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) ORAL CARE: Dellas has own teeth with some missing. She can complete oral care with reminders and set up. May require 1 team member to complete as needed. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) FOOT CARE: PSW to complete toenail care . Report long toe nails or other abnormalities as noted. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Dellas Medical Treatment and End of Life Care Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To support and honor Dellas expressed wishes and beliefs through to the End of Life. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/10/2026 	<ul style="list-style-type: none"> CPR: Dellas wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 12/10/2025 Revision by: Danielle Loreto (RAI Coordinator) 		

Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	10/31/1928	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Halley, Dellas (922131005680)	Admission Date	12/10/2025	Location	5 510 A


Care Plan Report

Diagnosis

Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiovascular disease, so described(I25.0), Hyperlipidaemia, unspecified(E78.5), Old myocardial infarction(I25.2), Other lipid storage disorders(E75.5)

Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	10/31/1928	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Urinary tract infection, site not specified(N39.0), Benign hypertension(I10.0), Atherosclerotic cardiov...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Halley, Dellas (922131005680)	Admission Date	12/10/2025	Location	5 510 A

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: 12/10/2025 Revision by: Suzanne Azar (RN)	<ul style="list-style-type: none">• Patricia will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility and self transfer) each day through to the next review date. Revision on: 12/10/2025 Revision by: Suzanne Azar (RN) Target Date: 02/09/2026	<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: 12/10/2025 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: 12/10/2025 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: 12/10/2025 Revision by: Suzanne Azar (RN)	PCA	D/E/N		
<ul style="list-style-type: none">• Nutrition Risk Level	<ul style="list-style-type: none">• Patricia will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026• Will weigh within realistic GWR 80-90 kg through to next review date. Question accuracy of admission weight. Revision on: 11/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/09/2026• Patricia will be adequately hydrated aeb drinking at least 80% of total fluid requirement 1875 ml/day through to next	<ul style="list-style-type: none">• NUTRITION RISK: Patricia is at moderate risk. Revision on: 11/22/2025 Revision by: Holly Laasanen (Dietitian (RD))• DIET ORDER: Patricia will receive regular diet, regular texture Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)• FLUID CONSISTENCY: Patricia drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)• FLUID TARGET: Encourage Patricia to drink at least 1500 ml/day Revision on: 11/22/2025 Revision by: Holly Laasanen (Dietitian (RD))• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 11/22/2025 Revision by: Holly Laasanen (Dietitian (RD))	Dietitian (RD) PCA PCA PCA PCA			
Allergies	Penicillin, Bee venom	D.O.B.	07/21/1956	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Killaire, Patricia (922131005674)	Admission Date	11/11/2025	Location	5 518 C	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	review date. Revision on: 11/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/09/2026			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to cognitive loss and new home Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Patricia based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	• PREFERENCE: Patricia likes to watch TV before bed. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) • REST PATTERN: Preferred bedtime 2100, usual wake time (0800) Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITOR: Monitor Patricia sleeping patterns. Document when awake or asleep. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA	 Q1H
• Potential for CONSTIPATION related to (daily use of medication with binding effect, chronic constipation) Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Patricia will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026 • To minimize the potential for episodes/ complications of constipation through to the next review date Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	• 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	
Allergies	Penicillin, Bee venom	D.O.B.	07/21/1956	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre	Print Date	12/11/2025	
Resident	Killaire, Patricia (922131005674)	Admission Date	11/11/2025	Location 5 518 C

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential for CONSTIPATION related to (daily use of medication with binding effect, chronic constipation) Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)						
• Potential for BOWEL INCONTINENCE related to cognitive loss Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Patricia will receive support to (use toilet) and promote optimal bowel continence each day through to the next review. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	• BOWEL Continence level is (infrequently). Report change to level as noted. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.	PCA PCA			
• URINARY Mix INCONTINENCE related to Dementia Diagnosis Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Patricia will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) • URINARY Continence level is (infrequently). Report change to level as noted. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• Risk for Impaired SKIN INTEGRITY related to Frailty	• To protect and maintain skin integrity each day through to the next review. Target Date: 02/09/2026	• 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			
• Patricia is at high risk for ELOPEMENT related to Revision on: 11/11/2025	• To promote Patricia safety and minimize risk for episode of	• ALERT: Patricia has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor				
Allergies	Penicillin, Bee venom		D.O.B.	07/21/1956	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Killaire, Patricia (922131005674)		Admission Date	11/11/2025	Location	5 518 C

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
Revision by: Danielle Loreto (RAI Coordinator)		elopement each day through next review date. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	immediately. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)						
<ul style="list-style-type: none">• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, RESISTANCE to care need, Suspicious) nature related to Dementia, Organic Brain Syndrome. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• To promote safety for Patricia and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Patricia/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (Patricia) for indications to change in or for escalating expressive behaviour risk. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• TRIGGERS leading to PHYSICAL (Hitting) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning, constipation, startling from sleep, etc.) Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• PHYSICAL Behaviour: If Patricia is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• TRIGGERS leading to VERBAL (may include yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• VERBAL Behaviour: If Patricia 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: 11/11/2025					BSO - Internal Social Worker	
Allergies	Penicillin, Bee venom			D.O.B.	07/21/1956	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre					Print Date	12/11/2025		
Resident	Killaire, Patricia (922131005674)			Admission Date	11/11/2025	Location	5 518 C		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, RESISTANCE to care need, Suspicious) nature related to Dementia, Organic Brain Syndrome.</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>			<div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRIGGERS leading to RESISTANCE to Care Needs of may include refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, as expression of behaviour include confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid suspicious thought process</div> <div>Revision on: 12/04/2025</div> <div>Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• RESISTANCE to Care Need: If Patricia is declining to (may include bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• WANDERING: Permit Patricia to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• DE-ESCALATION: Patricia calms with quiet time in room, distraction, re-direction, watching tv, having conversation, providing belongings</div> <div>Revision on: 12/04/2025</div> <div>Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• DELUSION: Patricia has delusions that family members such as brother or sister are here to pick her up to bring her home. Delusions that team members and other residents hate her.</div> <div>Revision on: 12/04/2025</div> <div>Revision by: Chelsea Campbell-Wright (ADOC)</div>			PCA	Registered Practical Nurse RN
<div>• Potential to experience alteration in MOOD as exhibited by periods of depression and anxiety. History of repetitive complaints of wanting to die</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>• Patricia will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 02/09/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Patricia/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed.</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• HEALTH EDUCATION: Provide education and support to Patricia/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed.</div> <div>Revision on: 11/11/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>			RN Registered Practical Nurse	
Allergies	Penicillin, Bee venom			D.O.B.	07/21/1956	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Killaire, Patricia (922131005674)			Admission Date	11/11/2025	Location	5 518 C

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Patricia for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)• RESIDENT STRENGTHS: Build on Patricia effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none">• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension related to cognitive loss and minimal hearing loss when in loud areas. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• Patricia will be supported to maintain current communication abilities to express self, comprehend information, etc each day through to the review date. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	<ul style="list-style-type: none">• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases when needed. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)• INSTRUCTION GUIDANCE: Patricia needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none">• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia, Organic Brain syndrome Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• Patricia will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is (SPECIFY; 2, 3, or 4). Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	<ul style="list-style-type: none">• HEALTH TEACHING: Engage with Resident/SDM to enhance their knowledge on the importance of a geriatric health including progressive cognitive loss of (Dementia and organic brain syndrome). Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)• CUE TASKS: Break tasks into manageable subtasks, Patricia can comprehend and follow. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	Social Worker			
<ul style="list-style-type: none">• Increased risk for FALLS related to (cognitive loss). Limitation of cognitive function/altered judgement	<ul style="list-style-type: none">• To promote safety, minimize risk for falls and/or fall related injury each day through to the	<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: 11/11/2025	PCA	D/E/N		
Allergies	Penicillin, Bee venom		D.O.B.	07/21/1956	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Killaire, Patricia (922131005674)		Admission Date	11/11/2025	Location	5 518 C

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)		next review period. Target Date: 02/09/2026	Revision by: Danielle Loreto (RAI Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers and ambulation. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for PAIN and alteration in comfort level. Most Current MDS Pain Score is (fill in score) Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 02/09/2026	• 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.		RN Registered Practical Nurse	
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		• Patricia will have ALL ADL care needs met each day through the next review date. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026	• BATHING: Patricia prefers (tub bath) on (Tuesday and Fridays in the afternoon). Resident participates by assisting with washing face and upper body. 1 team member extensive assistance for bathing. Resident will refuse her bath, offer partial or full bed bath assistance. Nail care to be provided on shower/bath day. Revision on: 11/20/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Patricia is independent with her bed mobility. Monitor for changes. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Patricia is able to dress herself upper and lower body. She may require intermittent 1 team member limited assistance. Monitor for changes. Revision on: 11/20/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Patricia independent for meals. She eats in on the Wildflower dining room. Revision on: 11/20/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Patricia is independent with her locomotion on the home area. May need redirection.		PCA <	

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 		<p>Supervision when off the home area. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> PERSONAL HYGIENE: Patricia requires 1 team member to set her up for her personal hygiene. She can assist with brushing hair, teeth, hair etc. Team to assist with completion. Monitor for changes. Revision on: 11/20/2025 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: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) TOILET USE: Patricia is independent with her toileting. Revision on: 11/20/2025 Revision by: Danielle Loreto (RAI Coordinator) TRANSFERRING: Patricia is independent for her transferring. Monitor for change. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) ORAL CARE: Patricia has their own teeth and completes her own oral care with reminders. She may refuse to complete oral care. Revision on: 11/20/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Patricia Medical Treatment and End of Life Care Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To support and honor Patricia expressed wishes and beliefs through to the End of Life. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/09/2026 	<ul style="list-style-type: none"> CPR: Patricia wishes to have CPR and TRANSFER to hospital. Revision on: 11/11/2025 Revision by: Danielle Loreto (RAI Coordinator) 		

Allergies	Penicillin, Bee venom	D.O.B.	07/21/1956	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Killaire, Patricia (922131005674)	Admission Date	11/11/2025	Location	5 518 C

Care Plan Report


--	--	--

Diagnosis

Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension (I10.0), Constipation(K59.0), Hyperlipidaemia, unspecified(E78.5), Gout, unspecified, other site(M10.98), Benign paroxysmal vertigo(H81.1), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Migraine, unspecified(G43.9), Sciatica(M54.3), Acquired absence of genital organ(s)(Z90.7), Other specified postsurgical states(Z98.8), Depressive episode, unspecified(F32.9)

Allergies	Penicillin, Bee venom	D.O.B.	07/21/1956	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Other organic personality and behavioural disorders due to brain disease, damage and dysfunction(F07.8), Benign hypertension(I10.0), Constipation(K59.0), Hyperlipidaemi...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Killaire, Patricia (922131005674)	Admission Date	11/11/2025	Location	5 518 C

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: PARKINSON'S Disease</p>	<p>• To treat and minimize signs/symptoms or complications associated with PARKINSON'S Disease through to the next review date. Revision on: 10/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026</p>	<p>• COMMUNICATION: Involve/ collaborate with (Haifa)/ SDM in decision making of neurological care management for PARKINSON'S Disease. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p> <p>• MEDICATION: Administer medication for PARKINSON'S Disease as per MD order. Monitor effectiveness and for side effects. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with PARKINSON'S Disease for changes to health status and alteration or complications affecting neurological function. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p> <p>• Observe SWALLOWING: Inform Registered staff of changes or any signs of difficulty in swallowing (coughing during eating, drooling, etc.).</p>	PCA			
<p>• Sleep Patterns; Potential for alteration in sleep patterns related to change in environment, insomnia. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p>	<p>• To promote adequate rest/sleep for Haifa based on identified sleep patterns/preferences each night through to the next review date. Revision on: 06/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026</p>	<p>• REST PATTERN: Preferred bedtime 2000, usual wake time 0530 Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	PCA			
<p>• Potential for PAIN and alteration in comfort level related to (osteoarthritis), lower back pain, Right shoulder pain. Most Current RAI Pain Score is 0. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p>	<p>• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/29/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Haifa)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 04/30/2025 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. Revision on: 04/30/2025 Revision by: Maryola Perion (RN)</p>	RN Registered Practical Nurse			
Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A	
Last Care Plan Review Completed:		10/29/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		<p>• NON VERBAL CUES of PAIN for Haifa include - (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: 04/30/2025 Revision by: Maryola Perion (RN)</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: 04/30/2025 Revision by: Maryola Perion (RN)</p>	PCA Registered Practical Nurse RN			
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Alzheimer's disease, Parkinson's Disease. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p>	<p>• Haifa 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: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026</p>	<p>• BATHING: Haifa prefers (shower) on (Tuesdays and Fridays on Day shift). Two staff MAXIMAL assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p> <p>• BED MOBILITY: Haifa is independent with bed mobility. She is able to move up and down and side to side in bed on her own. Haifa may require limited to extensive assistance from one staff at times. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p> <p>• DRESSING: Haifa requires 1 team member extensive assistance to dress upper and lower body. She is able to move her arms and legs to assist. She is able at times to dress herself independently with cues. She will refuse to change her clothing. See Expressed behaviours care plan. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Haifa is independent with set up and supervision for eating. She eats in the Wildflower Lane dining room Revision on: 10/24/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: Haifa is independent with ambulation with supervision from staff due to being in a locked unit. Revision on: 04/30/2025</p>	PCA PCA PCA PCA			
Allergies	No Known Allergies		D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Lawrence, Haifa (922131005628)		Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Alzheimer's disease, Parkinson's Disease.</p> <p>Revision on: 10/24/2025</p> <p>Revision by: Maryola Perion (RN)</p>		Revision by: Maryola Perion (RN)			
		• PERSONAL HYGIENE: Haifa requires 1 team member to provide extensive assistance to finish hygiene tasks. She is able to be cued to participate in oral care, brushing hair, washing face.	PCA		
		Revision on: 04/22/2025			
		Revision by: Danielle Loreto (RAI Coordinator)			
		• HAND HYGIENE: 1 staff to provide (REMINDER,) assistance to (Specify; use soap/water, apply sanitizer, rub hands together, dry hands) for hand hygiene.	PCA		
		Revision on: 04/22/2025			
		Revision by: Danielle Loreto (RAI Coordinator)			
		• TOILET USE: Haifa will toilet herself however may not perform good peri-care.	PCA		
		She benefits from 1 team member to provide extensive assistance with toileted-Team to offer and encourage her to accept the support.			
		She may require two staff assistance at times.			
Revision on: 10/24/2025					
Revision by: Maryola Perion (RN)					
• TRANSFERRING: Haifa is independent with transferring	PCA				
Revision on: 04/22/2025					
Revision by: Danielle Loreto (RAI Coordinator)					
• ORAL CARE: Haifa has her own teeth. Team to provide assistance with oral care.	PCA				
Revision on: 04/22/2025					
Revision by: Danielle Loreto (RAI Coordinator)					
• SPECIFIC RESIDENT Request: Haifa's bathroom door has been removed due to safety concerns as Haifa has a history of barricading herself by opening the bathroom door.	PCA				
Revision on: 08/08/2025					
Revision by: Chelsea Campbell-Wright (ADOC)					
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation, Language Barrier (Arabic)	• Team members will support Haifa in decreasing social isolation by participating in activities of personal choice for 15-25 times per month by the next review date.	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; coffee socials, walking groups, movies, Tovertafel etc.			
ISE score = 6/6		Revision on: 06/09/2025			
		Revision by: Kameron Stewart (Recreation Aide)			
		• HELPFUL HINTS: Haifa speaks and understands Arabic, using Google translate may be effective. Haifa in the past was a hairdresser and enjoyed exercising. Enjoys			
Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 01/29/2026	hand massages and back scratches. Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) • ONE to ONE: Provide her/him with individual visits for Arabic music, hand massages, walking, socializing, etc. Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) • SENSORY STIMULATION: Provide her/him with Sensory Stimulation for Massage, Tactile Books, Snoezelen Activity, Reading Aloud, Sensory Pictures, etc Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Strength Exs Revision on: 08/22/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increased strength for B/L LE from 3/5 to 3+/5 in next 3 months. Revision on: 08/22/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/29/2026	• Neck AROM exs x 10 reps, as best tolerated, within pain limits, looking at ceiling, following pen point; 2-3 x a week; Revision on: 10/18/2025 Revision by: Shina Wadhwa (Physical Therapist) • Strengthening exs for B/L UE and LE, 10 res, 1-2lbs, 2-3 x a week; Revision on: 08/22/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA PT - Physiotherapist PTA	
• Increased risk for FALLS related to cognitive loss and new environment, she will lower herself to the floor and will clean the floor. Revision on: 06/22/2025 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. Target Date: 01/29/2026	• COMMUNICATION: Involve/collaborate with (Haifa)/SDM in decision making in fall prevention Plan of Care. Revision on: 04/30/2025 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: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Haifa. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for (transfers, ambulation). Revision on: 04/30/2025 Revision by: Maryola Perion (RN)			PCA PCA	D/E/N
Allergies	No Known Allergies			D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)			Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Increased risk for FALLS related to cognitive loss and new environment, she will lower herself to the floor and will clean the floor.</div> <div>Revision on: 06/22/2025</div> <div>Revision by: Maryola Perion (RN)</div>			<div>• SPECIAL CONSIDERATION to PREVENT FALLS: AROM and LE strengthening exercises 5-10 reps 1 lb; Sitting balance with perturbations 10 reps maintained unsupported, reaching 10 reps; Standing balance- tandem and static 10 reps, 10 seconds</div> <div>Revision on: 08/26/2025</div> <div>Revision by: Courtney Cipparone (PT - Physiotherapist)</div> <div>• SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries.</div> <div>Revision on: 04/30/2025</div> <div>Revision by: Maryola Perion (RN)</div>			PCA	
<div>• Potential for BOWEL INCONTINENCE related to Alzheimer's Disease</div> <div>Revision on: 06/12/2025</div> <div>Revision by: Maryola Perion (RN)</div>		<div>• Haifa will have bowel incontinence managed every shift through to the next review period.</div> <div>Revision on: 06/12/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 01/29/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.</div> <div>• BOWEL Continence level is Total Incontinence. Report change to level as noted.</div> <div>Revision on: 07/25/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</div> <div>• INCONTINENCE PRODUCT: Haifa is using a BLUE brief for Days, Evening and Night shifts.</div> <div>Revision on: 06/12/2025</div> <div>Revision by: Maryola Perion (RN)</div>			Registered Staff	
<div>• Potential for CONSTIPATION related to Alzheimer's disease.</div> <div>Revision on: 06/03/2025</div> <div>Revision by: Maryola Perion (RN)</div>		<div>• Haifa will have regular soft formed bowel movements every 1-2 days through to the next review.</div> <div>Revision on: 06/03/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 01/29/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Haifa/SDM) for decision making regarding constipation management.</div> <div>Revision on: 06/03/2025</div> <div>Revision by: Maryola Perion (RN)</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>			Registered Staff	
Allergies	No Known Allergies			D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)			Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025					

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: 06/03/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026 	<ul style="list-style-type: none"> FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. NUTRITION increased fibre intervention in place. See Nutrition Care Plan. BOWEL PROTOCOL: In place as per MD order 	Registered Staff Diet Registered Staff Registered Staff			
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to Alzheimer's Disease Revision on: 04/30/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> Haifa will have urinary incontinence managed every shift through to the next review period. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026 Haifa will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026 	<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: 04/30/2025 Revision by: Maryola Perion (RN) URINARY Continence level is Total Incontinence. Report change to level as noted. Revision on: 07/25/2025 Revision by: Maryola Perion (RN) INCONTINENCE PRODUCT: Haifa is using a BLUE brief for Days, Evening and Night shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN) TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed. 	PCA PCA PCA			
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension, Pure hypercholesterolaemia Revision on: 04/30/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with Hypertension, Pure hypercholesterolaemia through to the next review date. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026 	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Haifa)/SDM in decision making of Cardiac Care Management for Hypertension, Pure hypercholesterolaemia. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension, Pure hypercholesterolaemia for changes to health status and alteration or complications affecting cardiac function. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) MEDICATION: Administer medication as per MD Order and monitor for side effects. Revision on: 04/30/2025 	Registered Practical			
Allergies	No Known Allergies		D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Lawrence, Haifa (922131005628)		Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension, Pure hypercholesterolaemia Revision on: 04/30/2025 Revision by: Maryola Perion (RN)		Revision by: Maryola Perion (RN)	Nurse RN			
<ul style="list-style-type: none"> Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 04/30/2025 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: 04/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Haifa)/SDM in decision making of musculoskeletal care management. Revision on: 04/30/2025 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: 04/30/2025 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: 04/30/2025 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: 04/30/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by persistent anger, rep. health complaints, sad, pained, worried facial expressions related to Alzheimer's Dementia Revision on: 04/30/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Haifa will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Haifa)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Haifa for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Lawrence, Haifa (922131005628)		Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		<ul style="list-style-type: none"> To support Haifa with their identified coping strategies for mood/emotional stability each day through to the review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026 To decrease episodic Mood symptoms by the next review date. DRS score will be maintained to 0. Revision on: 10/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026 	<ul style="list-style-type: none"> RESIDENT STRENGTHS: Build on Haifa effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) 				
• Altered VISION related to unable to see regular print Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Haifa supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026	<ul style="list-style-type: none"> EYEGLASSES: Haifa wears eyeglasses. Assist to clean eyeglasses as needed and store (on night table) when sleeping. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) READING: Haifa uses (large print material) to aid with reading. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <div style="text-align: right;">PCA PCA</div>				
• Altered COMMUNICATION as exhibited by limitations to (self expression, hearing loss, unclear speech, comprehension) related to Alzheimer's Dementia Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Haifa will be supported to maintain current communication abilities each day through to the review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Haifa's primary language is Arabic. She is able to speak/understand English. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) INTERPRETER Required: Lara RN can be used as an interpreter and other staff that speaks Arabic. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask 				
Allergies	No Known Allergies		D.O.B.	11/17/1943		Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)		Admission Date	04/22/2025		Location	5 503 A
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		yes/no questions, uses simple words/phrases). Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Haifa needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Nutrition Risk Level	<p>• Haifa will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026</p> <p>• Will weigh within realistic weight range of 55-65 kg through to next review date. Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026</p> <p>• Haifa will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (27 ml/kg using 55.6 kg weight) through to next review date. Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026</p>	<p>• Honor religious rituals related to diet/eating: NO PORK Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Haifa is moderate risk level. Revision on: 05/02/2025 Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• DIET ORDER: Haifa will receive regular diet, regular texture Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID CONSISTENCY: Haifa drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID TARGET: Encourage Haifa to drink a minimum of 1200 ml/day Revision on: 10/21/2025 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: prune juice at breakfast M-W-F Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Dietitian (RD)</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>Dietary aide PCA</p> <p>PCA</p>	<p></p> <p></p> <p></p> <p></p> <p></p> <p>D/E</p>

Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (WANDERING RESISTANCE, Hoarding, Verbal with care/redirection, physical with care to care need) nature related to Alzheimer's Dementia Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote safety for Haifa and/or others during each episode of (WANDERING RESISTANCE, Hoarding, Verbal with care/redirection, physical with care to care need) through to the next review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026</p> <p>• To decrease the episodic frequency of Expressive behavior by the next review date. ABS score will be less than 2. Revision on: 10/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Haifa)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 04/30/2025 Revision by: Maryola Perion (RN)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Haifa for indications to change in or for escalating expressive behaviour risk. Revision on: 04/30/2025 Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to PHYSICAL (Hitting, pushing, frustration) as expression of behaviour include (frustration, fearfulness, confusion, invasion of personal space) Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Haifa 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: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (swearing, yelling) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention) Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Haifa 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: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to shower, refusing medication) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process) Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Haifa is declining to (Shower, change clothes, take</p>	BSO - Internal Social Worker		
Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Potential for Expressive Behaviour of (WANDERING RESISTANCE, Hoarding, Verbal with care/redirection, physical with care to care need) nature related to Alzheimer's Dementia Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)			<p>medications) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none">• TRIGGERS leading to SOCIALLY Inappropriate hoarding/ collecting of items Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• SOCIALLY Inappropriate Behaviour: Team to monitor for items being taken and hidden or collected in her room If noted please remove items when she is not present. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• WANDERING: Permit Haifa to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 10/24/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
<ul style="list-style-type: none">• Risk for Impaired SKIN INTEGRITY related to Frailty		<ul style="list-style-type: none">• To protect and maintain skin integrity each day through to the next review. Target Date: 01/29/2026	<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">• Haifa is at high risk for ELOPEMENT related to New location Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• To promote Haifa safety and minimize risk for episode of elopement each day through next review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• ALERT: Haifa 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: 10/24/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• ELOPEMENT ALERT: Redirect Haifa away from elevator or exit doors as needed. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
Allergies	No Known Allergies		D.O.B.	11/17/1943	Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Lawrence, Haifa (922131005628)		Admission Date	04/22/2025	Location	5 503 A	
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> • Haifa is at high risk for ELOPEMENT related to New location Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) 				
<ul style="list-style-type: none"> • COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Alzheimer's Dementia Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> • Haifa will be supported to maintain cognitive function through the review date. Current CPS is 4. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026 	<ul style="list-style-type: none"> • ORIENTATION: Gently reorient to (person, place, time) as needed when Haifa is feeling lost or in confused state. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Haifa can comprehend and follow. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) 		
<ul style="list-style-type: none"> • Expressed Wishes and Beliefs related to Haifa Medical Treatment and End of Life Care Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> • To support and honor Haifa expressed wishes and beliefs through to the End of Life. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026 	<ul style="list-style-type: none"> • CPR: Haifa Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) 		

Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025			


Care Plan Report

Diagnosis

Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep [insomnias](G47.0), Parkinson's disease(G20)

Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<ul style="list-style-type: none"> Potential for Acute PAIN and alteration in comfort level related to Recurrent UTIs, TIA, lower back pain. Most Current RAI Pain Score is 0. Revision on: 09/23/2025 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. Target Date: 01/15/2026 <ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Target Date: 01/15/2026	<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. NON VERBAL CUES of PAIN for Bonnie 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: 10/06/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse PCA Registered Practical Nurse RN				
<ul style="list-style-type: none"> STRONG PARTICIPATION in Activities. ISE score = 5/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	<ul style="list-style-type: none"> Bonnie will be supported to maintain participation in activities 30-40 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 01/15/2026	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite Bonnie to programs of personal interest; baking, arts & crafts, colouring, concerts, cards, movies, parties, tea social, walking programs, reading/reminiscing groups, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
		<ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage Bonnie to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
		<ul style="list-style-type: none"> HELPFUL HINTS: Bonnie is a retired high school art teacher, she loves to converse and tell stories. She participates in programs of all domains but prefers art programs and walking. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
		<ul style="list-style-type: none"> ONE to ONE: Provide her with individual visits for conversation, bedside activity, reading, conversing/reminiscing, colouring, etc Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
		<ul style="list-style-type: none"> SENSORY STIMULATION: Provide her with Sensory Stimulation for Hand 					
Allergies	Sulfa Antibiotics	D.O.B.	08/25/1952	Physician	Albert Patrick Ng		
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre			Print Date	12/11/2025		
Resident	Levac, Bonnie (922131005640)	Admission Date	06/27/2025	Location	5 506 A		
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE score = 5/6</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p>			<p>Massage, Tactile Books, Snoezelen Activity, Reading Aloud, Sensory Pictures, etc.</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p> <p>• FAMILY INVOLVEMENT: Family is highly involved and visits often; Husband visits and takes her for walks/outings regularly.</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Bonnie interacts positively with most residents and staff.</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p>			Recreation Aide	
<p>• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.)</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>• To monitor effectiveness and for side effects of medication used each day through to the next review date.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>Target Date: 01/15/2026</p>	<p>• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about medicinal regime and appropriate medication use.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• 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.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.</p>			Registered Staff	
<p>• Potential for Expressive Behaviour of WANDERING, RESISTANCE to care, Verbal, Physical, Socially Inappropriate related to Amnesic Dementia, Hx of Hallucinations/delusion, Depression, Anxiety.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>• To promote safety for Bonnie /or others during each episode of Expressive Behaviour through to the next review date.</p> <p>Revision on: 06/27/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>Target Date: 01/15/2026</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Bonnie for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</p> <p>Revision on: 06/27/2025</p>				
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng	
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A	
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	<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: 07/09/2025 Revision by: Maryola Perion (RN) Target Date: 01/15/2026	Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• RESISTANCE to Care Need: If Bonnie is declining to (bathe, change clothes, take medications, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• TRIGGERS leading to SOCIALLY Inappropriate (collects used toilet paper and put in pocket or dresser, hide toilet paper, flush briefs down the toilet; rummage through owen drawers, etc.) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.) Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• SOCIALLY Inappropriate Behaviour: If Bonnie is noted to (hoarding/rummaging.) gently redirect her. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• WANDERING: Permit Bonnie to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• HALLUCINATION: hearing/seeing people in her home who are not there. Do try to distract the person by involving them in something they find interesting. like watching TV Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none">• DELUSION: Believes there are other people in her house and someone else owns the home she lives in. Do try to distract the person by involving them in something they find interesting (watching TV ect.) Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)	Registered Practical Nurse RN Registered Practical Nurse RN Registered Practical Nurse RN			
<ul style="list-style-type: none">• Potential to experience alteration in	<ul style="list-style-type: none">• Bonnie will be supported to	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of for				
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
MOOD related to Depression, Anxiety, Amnesic Dementia. Revision on: 07/09/2025 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: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • RESIDENT STRENGTHS: Build on Bonnie effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • DISTRACTION ACTIVITIES: Bonnie can be calmed doing activities of interest including (Specify; listening to music, doing puzzles, watching movies, etc.) Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Potential for altered hematologic symptoms or complications related to diagnosis of Vit B12 ANEMIA. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)	• To treat and/or minimize complications associated with Vit B12 ANEMIA each day through to the next review date. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) Target Date: 01/15/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making of hematologic care management for Vit B12 ANEMIA. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Vit B12 ANEMIA for complications or changes to health status. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated. • MEDICATION: Administer medication for Vit B12 ANEMIA as per MD Order. Monitor effectiveness and for side effects. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)	Registered Staff		
• Altered COMMUNICATION as exhibited by limitations to (self expression) related to Amnesic Dementia. Revision on: 07/09/2025	• Bonnie will be supported to maintain current communication abilities to (express self, comprehend information, etc.)	• PRIMARY LANGUAGE: Bonnie primary language is English. She is able to speak/understand English. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Sulfa Antibiotics	D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)	Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Maryola Perion (RN)		each day through to the review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026 • Bonnie will be supported to make basic needs known each day through to the review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • INSTRUCTION GUIDANCE: Bonnie needs constant cueing or demonstrative instruction in tasks and activities. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)			
• Increased risk for FALLS related to history of fall at home. Limitation of cognitive function/altered judgement, dementia, wandering. Revision on: 07/09/2025 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. Target Date: 01/15/2026	• PURPOSEFUL ROUNDING: Conduct purposeful rounding to assess residents needs; for pain, positioning, peri-needs or possessions for safety (self-transferring and ambulating without walker). • COMMUNICATION: Involve/collaborate with Bonnie/Paul in decision making in fall prevention Plan of Care. Revision on: 06/27/2025 Revision by: Chelsea Campbell-Wright (ADOC) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment reduce clutter, night light, to reduce fall risk for Bonnie Revision on: 06/27/2025 Revision by: Chelsea Campbell-Wright (ADOC) • BED: place bed in lowest position to lower risk for injury. Revision on: 10/13/2025 Revision by: Tola Omolade (ADOC) • ACTIVITY: Engage Bonnie in meaningful activity to decrease boredom and or		PCA <	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Increased risk for FALLS related to history of fall at home. Limitation of cognitive function/altered judgement, dementia, wandering. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)			<p>restlessness. Offer Bonnie a change to rest. Resident likes to: fold towels, look at pictures in picture books and family pictures, sorting activities</p> Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC)			PCA	
			<ul style="list-style-type: none">FOOTWEAR: Ensure resident wears appropriate footwear such as shoes for ambulation. Revision on: 06/27/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
			<ul style="list-style-type: none">SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/06/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none">Balance Training Revision on: 07/01/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none">Increase Tinetti scores from 19 to 21 in next 3 months; Revision on: 07/01/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/15/2026	<ul style="list-style-type: none">1:1 balance training with wall bar/walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week Revision on: 07/01/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
<ul style="list-style-type: none">Strength Training Revision on: 07/01/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none">Reduce risk of falls from moderate to low in next 6 months; Revision on: 07/01/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/15/2026	<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/Peddlers for 10-15 mins or as best tolerated; 2-3 x a week; Revision on: 07/01/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
<ul style="list-style-type: none">Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of Sulfa drugs. Revision on: 06/27/2025		<ul style="list-style-type: none">Bonnie will be protected from exposure to allergen each day through next review date. Revision on: 06/27/2025	<ul style="list-style-type: none">MONITORING: Utilize holistic perspective of continuous monitoring of resident with Sulfa drugs for changes to health status and complications. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)				
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng	
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A	
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Jenny Liu (RAI Coordinator)	Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• MD/PHARMACY ALERT: Notify the MD and Pharmacy of Bonnie Allergy to Sulfa drugs and minimize risk for exposure to allergen. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia, Anxiety, Depression Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)	• To promote adequate rest/sleep for Bonnie on identified sleep patterns/preferences each night through to the next review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• REST PATTERN: Preferred bedtime 21:00, usual wake time; early riser, may get restlessness when waking up too early. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA			
• Potential for BOWEL INCONTINENCE related to Dementia diagnosis. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)	• Bonnie will have bowel incontinence managed every shift through to the next review period. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026 • Bonnie will receive support to (use toilet) and promote optimal bowel continence each day through to the next review. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• 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 change to level as noted. Revision on: 10/06/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses white color brief. Revision on: 06/28/2025 Revision by: Jenny Liu (RAI Coordinator)	Registered Staff PCA PCA PCA			
• Bonnie at high risk for ELOPEMENT related to wandering.	• To promote Bonnie safety and minimize risk for episode of	• ALERT: Bonnie has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor				
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		elopement each day through next review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	immediately. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • 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: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • ELOPEMENT ALERT: Redirect Bonnie away from elevator or exit doors as needed. PCA Revision on: 07/09/2025 Revision by: Maryola Perion (RN)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dx with Amnestic dementia. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• Bonnie 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: 07/09/2025 Revision by: Maryola Perion (RN) Target Date: 01/15/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Bonnie is feeling lost or in confused state. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.			PCA	Registered Staff
• Expressed Wishes and Beliefs related to Bonnie Medical Treatment and End of Life Care Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• To support and honor Bonnie expressed wishes and beliefs through to the End of Life. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• CPR: Bonnie wishes to have CPR and transfer to hospital decisions to be made as needed Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Altered ability to complete Activities of Daily Living (ADLs) related to dx with Amnestic Dementia, Depression. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• Bonnie will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date.	• BATHING: Bonnie prefers showers and her shower days are Thursday and Monday in the day shift. Resident participates by washing her front. Two staff members to provide extensive assistance to wash her back and lower extremities. Nail care to be provided on shower/bath day. Revision on: 10/26/2025				
Allergies	Sulfa Antibiotics			D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)			Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	Revision by: Lara Ismail (RN) • BED MOBILITY: Bonnie is able to turn and reposition in bed without any assistance from the staff. She may require one staff limited assistance at times. Revision on: 10/06/2025 Revision by: Maryola Perion (RN) • DRESSING: Bonnie is able to assist in lifting her arms and limbs with cueing and guidance from staff. One staff member to provide Extensive assistance for dressing UPPER & LOWER body. Revision on: 10/06/2025 Revision by: Maryola Perion (RN) • EATING: Bonnie is able to eat by herself once set up by the team. May require cueing and reminders from staff. Revision on: 10/06/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Bonnie is Independent with Supervision from staff when ambulating on and off the unit. Revision on: 10/06/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Bonnie is able to wash her face, hands and comb her hair. but requires one team member to provide peri-care due to incontinence. Revision on: 06/27/2025 Revision by: Jenny Liu (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: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • TOILET USE: Bonnie is able to transfer on/off the toilet with cueing and guidance from staff. However she is mostly incontinent and requires one staff extensive assistance with toilet use. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • TRANSFERRING: Bonnie is independent with transferring. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • ORAL CARE: Bonnie has her own teeth. Team member to provide reminders,				
			PCA				
			PCA				
			PCA				
			PCA				
			PCA				
			PCA				
			PCA				
			PCA				
			PCA				
Allergies	Sulfa Antibiotics			D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)			Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025					

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 dx with Amnestic Dementia, Depression. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			cueing and guidance to complete her oral care. Revision on: 07/09/2025 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 PCA or other abnormalities as noted. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
<ul style="list-style-type: none"> Potential to experience alteration in NEUROLOGICAL FUNCTION related to: TRANSIENT ISCHEMIC ATTACK (TIAs) 		<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with TIA through to the next review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with TIA for changes to health status and alteration or complications affecting neurological function. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
<ul style="list-style-type: none"> URINARY INCONTINENCE related to Dementia Diagnosis Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> Bonnie will have urinary incontinence managed every shift through to the next review period. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	<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: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
			<ul style="list-style-type: none"> URINARY Continence level is FREQUENTLY Incontinent. Report change to level PCA as noted. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• URINARY INCONTINENCE related to Dementia Diagnosis Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• Bonnie will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• INCONTINENCE PRODUCT: Resident uses white color brief. Revision on: 06/28/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Thin fragile Skin		• To protect and maintain skin integrity each day through to the next review. Target Date: 01/15/2026	• 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		• Bonnie will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 07/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/15/2026 • Will weigh within GWR 50-60 kg through to next review date. Revision on: 07/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/15/2026 • Bonnie will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1605 ml/day (30 ml/kg using 53.5 kg weight) through to next	• NUTRITION RISK: Bonnie is low risk level. Revision on: 07/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Bonnie will receive regular diet, regular texture Revision on: 06/27/2025 Revision by: Ronnie Fung (FSM - Food Services Manager) • FLUID CONSISTENCY: Bonnie drinks REGULAR/THIN Level 0 Fluids. Revision on: 06/27/2025 Revision by: Ronnie Fung (FSM - Food Services Manager) • FLUID TARGET: Encourage Bonnie to drink a minimum of 1284 ml/day Revision on: 07/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 1 scoop protein powder in 200ml beverage of choice once daily to promote wound healing Revision on: 10/08/2025 Revision by: Brittany Hyde (Registered Dietitian)			Dietitian (RD) PCA PCA PCA	
Allergies	Sulfa Antibiotics			D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)			Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	review date. Revision on: 07/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/15/2026			

Diagnosis

Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tract infection, site not specified(N39.0), Malignant neoplasm of central portion of breast, unspecified side(C50.19), Cataract, unspecified(H26.9), Unspecified dementia(F03), Malignant neoplasm of ovary, not specified whether unilateral or bilateral(C56.9), Other and unspecified intestinal obstruction(K56.6), Transient cerebral ischaemic attack, unspecified(G45.9), Vitamin B12 deficiency anaemia, unspecified(D51.9)

Allergies	Sulfa Antibiotics	D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Levac, Bonnie (922131005640)	Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025			

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 Degenerative Disk Disease, back pain present, arthralgia/myalgia, sharp pain in back of neck. Most Current LTCF Pain Score is 1. Revision on: 11/09/2025 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. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026 <ul style="list-style-type: none">• Promote RAI Pain Score of 0 through to the next review. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Yvonne)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 07/16/2025 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. <ul style="list-style-type: none">• NON VERBAL CUES of PAIN for Yvonne include - (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: 07/16/2025 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: 07/16/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse PCA Registered Practical Nurse 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). Revision on: 09/01/2025 Revision by: Suzanne Azar (RN)	<ul style="list-style-type: none">• Yvonne 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: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<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: 09/01/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none">• 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: 09/01/2025 Revision by: Suzanne Azar (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: 09/01/2025 Revision by: Suzanne Azar (RN)	PCA	D/E/N		
<ul style="list-style-type: none">• Risk for Impaired SKIN INTEGRITY related to Incontinence, Dementia and dry skin to bil. legs. Edema on both ankles. Revision on: 08/03/2025	<ul style="list-style-type: none">• To protect and maintain skin integrity each day through to the next review. Revision on: 09/29/2025	<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			
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified (E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	
Last Care Plan Review Completed:		10/14/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Maryola Perion (RN)	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• HEALTH EDUCATION: Engage Yvonne in health education regarding prevention of skin impairment and management of her edema on both ankles. Encourage to elevate her leg when in bed. Revision on: 08/03/2025 Revision by: Maryola Perion (RN)				
• SPIRITUAL BELIEFS: Yvonne is Jehovah's witness Revision on: 07/16/2025 Revision by: Nick Carroll (Recreation Aide)		• SPIRITUAL PROGRAMS: Encourage Yvonne to continue reading her book of religious scriptures independently. Engage Yvonne in conversation about her past being a Jehovah's witness Revision on: 07/16/2025 Revision by: Nick Carroll (Recreation Aide) • SELF-DIRECTED ACTIVITIES Provide Yvonne with colouring materials & montessori materials. Revision on: 07/16/2025 Revision by: Nick Carroll (Recreation Aide)				
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY to Penicillin. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)	• Yvonne will be protected from exposure to allergen each day through next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• COMMUNICATION: Involve/collaborate with (Yvonne)/SDM in decision making and health teaching about ALLERGY to Penicillin. Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • ALLERGY ALERT: Yvonne has ALLERGY to Penicillin. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Yvonne's Allergy to Penicillin and minimize risk for exposure to allergen. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, arthralgia/myalgia, Dementia. Revision on: 07/16/2025	• Yvonne will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care	• BATHING: Yvonne prefers shower on Tuesday and Friday in the evening shift. She PCA requires one staff physically help in part of the bath activities. She is able to wash her front. However she has been refusing her shower for the last six months according to the granddaughter.				
Allergies	Penicillin		D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Maryola Perion (RN)	needs are met each day through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<p>Staff will continue to encourage Yvonne as she is refusing. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN)</p> <p>• BED MOBILITY: Yvonne is able to turn and reposition in bed independently. PCA</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• DRESSING: Yvonne is independent and able to remove and change her clothing. PCA</p> <p>Staff will continue to remind Yvonne. She may require one staff limited assistance at times. Revision on: 10/14/2025 Revision by: Maryola Perion (RN)</p> <p>• EATING: Supervision- Yvonne requires cueing, reminder when eating. she eats on the floor dining room PCA</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• LOCOMOTION: Supervision- Yvonne walks independently on the unit, requires supervision from the team due to wandering. PCA</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Yvonne is Independent and requires supervision from the team to ensure she completed her personal hygiene properly. PCA</p> <p>Revision on: 10/14/2025 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: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• TOILET USE: Supervision-Yvonne is able to go on/off the toilet; able to pull her pants up after. Staff to help her locate the toilet when needed. PCA</p> <p>Revision on: 10/14/2025 Revision by: Maryola Perion (RN)</p> <p>• TRANSFERRING: Yvonne is able to transfer herself between surfaces without any assistive device or staff. PCA</p> <p>Revision on: 07/02/2025</p>			
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, arthralgia/myalgia, Dementia. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)			Revision by: Jenny Liu (RAI Coordinator) • ORAL CARE: Own teeth, Yvonne requires team member to provide setup/supervision with oral care. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
• Balance Training Revision on: 07/07/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Decrease Pain VAS from 5 to 3 in next 3 months; Increased foot clearance from poor to good in next 3 months; Revision on: 10/07/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/14/2026	• Dynamic balance training as Sup Assist; Include marching/mini squats/Heel raise/Toe raise/Hip Abd/Hip Ext; All exs 10 reps, 1-2 sets or as best tolerated. 2-3 x a week; Hot pack with 6-8 layers of towels for 15-20 mins for lower back and upper Rt back; 2-3 x a week; Check every 2-3 minutes for redness/heat; Strengthening exs for B/L LE with 1-2 lbs; as best tolerated; 10 reps, 2-3 x a week; Strengthening exs for B/L LE with 1-2lbs, 10 reps or as best tolerated;2-3 x a week; Revision on: 10/07/2025 Revision by: Shina Wadhwa (Physical Therapist)		PT - Physiotherapist PTA	
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation		• Team members will support Yvonne in decreasing social isolation by participating in activities of personal choice for 30-35 times per month by the next review period. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI	• STRUCTURED ACTIVITIES: Invite Yvonne to group activities, (music,remiscing, book club, crafts, movies & happy hour on the main floor) Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as (reading, telephone conversations, watching TV in own room, walking, conversing with peers, etc.). Revision on: 09/21/2025			
Allergies	Penicillin		D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation		Coordinator) Target Date: 01/14/2026	Revision by: Kameron Stewart (Recreation Aide) • SOCIAL INTERACTION: Promote opportunity for Yvonne to make friendships and sit with friends during activities. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
• BOWEL Continence - Yvonne is continent and has self recognition of urge to defecate. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)		• Yvonne to remain continent of bowels through next review date Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. PCA • SELF TOILETING: Yvonne 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 Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Nutrition Risk Level		• Yvonne will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026 • Will weigh within GWR/IBW/Realistic weight range of 50-55 kg through to next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• NUTRITION RISK: Yvonne is moderate risk level. Dietitian (RD) Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Yvonne will receive regular diet, regular texture PCA Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Yvonne drinks REGULAR/THIN Level 0 Fluids. PCA Revision on: 07/02/2025 Revision by: Brittany Hyde (Registered Dietitian) • FLUID TARGET: Encourage Yvonne to drink a minimum of 1480 ml per day. PCA Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)				
Allergies	Penicillin		D.O.B.	11/27/1948		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025		Location	5 502 B
Last Care Plan Review Completed:		10/14/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
• Nutrition Risk Level	• Yvonne will be adequately hydrated aeb drinking at least 80% of total fluid requirement @ 25ml/kg through to next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026				
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD) Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 07/16/2025 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.	PCA Registered Staff		
• Altered VISION related to Glaucoma Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	• Yvonne to use eyeglasses for vision correction daily through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• EYEGLASSES:Yvonne wears eyeglasses. Assist to clean eyeglasses as needed and store (on night table, in night table drawer, etc.) when sleeping. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
• Potential for Expressive Behaviour of (WANDERING, refuse care, verbally/physically abusive) nature related to dx with Dementia, Delusions, Hallucinations, Anxiety and chronic depression Revision on: 07/02/2025	• To promote safety for Yvonne and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk. • TRIGGERS leading to PHYSICAL (swat, push) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning, hunger, constipation, startling from sleep, etc.)	Registered Staff		
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Jenny Liu (RAI Coordinator)	Coordinator) Target Date: 01/14/2026 • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 1. Revision on: 10/14/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Yvonne 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: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • TRIGGERS leading to VERBAL (yelling, curse) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • VERBAL Behaviour: If Yvonne 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: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to bathe, as expression of behaviour include misunderstanding care needs, poor judgement, fearfulness, paranoid thought process Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC) • RESISTANCE to Care Need: If Yvonne is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • WANDERING: Permit Yvonne to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • HALLUCINATION: Report seeing people coming in and out of her home who are not here. Staff to monitor and redirect care as needed. Report the the registered staff when happens. Revision on: 07/02/2025	Registered Practical Nurse RN		
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (WANDERING, refuse care, verbally/physically abusive) nature related to dx with Dementia, Delusions, Hallucinations, Anxiety and chronic depression</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p>		<p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>• DELUSION: removing the sheets from the bed because they are poisoned/acidic and burning her skin and having a fungal infection in feet/hands from dog that used her shower, believes that passport is being stolen, ect. Staff to monitor resident, and report to register staff when behaviors occur. Staff report that delusions occur in the evening around 6 to 7 pm</p> <p>Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• BSO RECOMMENDATIONS: Try to remove yvonne from stressful environments. If she is reporting delusions such as passport being missing that are distressing, offer reassurance and assist yvonne in looking for passport. Offer redirection activities like combing hair, painting nails, listening to music, offering a juice and snack.</p> <p>Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p>	Registered Practical Nurse RN		
<p>• Potential to experience alteration in MOOD as exhibited by (repetitive questions, rummaging own belongings), agitated related to dx with depression, Dementia, Hallucinations, Delusions, Anxiety.</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• Yvonne will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</p> <p>Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Yvonne for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• RESIDENT STRENGTHS: Build on Yvonne effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities.</p> <p>Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)</p>			
<p>• Sleep Patterns; Potential for alteration in</p>	<p>• To promote adequate rest/sleep for Yvonne based on</p>	<p>• REST PATTERN: Preferred bedtime 21:00, usual wake time between 9-10am daytime naps (sometimes).</p>	PCA		
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
quality of sleep or sleep pattern related to Dementia and new environment. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	identified sleep patterns/preferences each night through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	Revision on: 07/02/2025 Revision by: Jenny Liu (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: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• 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: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)		
• URINARY INCONTINENCE related to Dementia Diagnosis Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	• Yvonne will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026 • Yvonne will have urinary incontinence managed every shift through to the next review period. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • URINARY Continence level is USUALLY continent. Report change to level as PCA noted. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list PCA on the floor. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)		

Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, slurred speech, mumbled speech related to Dementia Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> Yvonne will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<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: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> INSTRUCTION GUIDANCE: Yvonne needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> Yvonne will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Yvonne is feeling lost or in confused state. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> CUE TASKS: Break tasks into manageable subtasks, Yvonne can comprehend and follow. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> Increased risk for FALLS related to Dementia, DDD, history of delusions and hallucinations. Limitation of cognitive function/altered judgement Revision on: 06/26/2025 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: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Yvonne)/SDM in decision making in fall prevention Plan of Care. Revision on: 07/16/2025 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: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> ENVIRONMENT: Secure environment: reduce clutter in room, etc. to reduce fall risk for Yvonne. Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"> FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 07/16/2025	PCA	D/E/N
Allergies	Penicillin		D.O.B.	11/27/1948
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...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	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025
			Location	5 502 B
Last Care Plan Review Completed:		10/14/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Increased risk for FALLS related to Dementia, DDD, history of delusions and hallucinations. Limitation of cognitive function/altered judgement Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Yvonne Medical Treatment and End of Life Care Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor Yvonne expressed wishes and beliefs through to the End of Life. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<ul style="list-style-type: none"> CPR:Yvonne wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)		

Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

Care Plan Report

Diagnosis

Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified(H40.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Myalgia, other site(M79.18)

Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

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 SKIN TEAR to Right elbow. Revision on: 12/11/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To promote optimal healing of SKIN TEAR within the next review date Revision on: 12/11/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to (SKIN TEAR to Right elbow) for changes to health status and alteration or complications affecting skin integrity. Revision on: 12/11/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> TREATMENT PLAN: Administer treatment for SKIN TEAR to (SKIN TEAR to Right elbow) as per MD Order. Revision on: 12/11/2025 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: 12/11/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Increased risk for FALLS related to wandering, cognitive loss and relocation, history of falls, impaired mobility and balance, self transferring, walking without assistance, non compliant with the use of wheelchair. Revision on: 10/21/2025 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: 01/21/2026	<ul style="list-style-type: none"> 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. <ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Marion)/SDM in decision making in fall prevention Plan of Care. Revision on: 04/29/2025 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: 11/15/2025 Revision by: Tola Omolade (ADOC) <ul style="list-style-type: none"> ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ENVIRONMENT: Secure environment: reduce clutter, to reduce fall risk for Marion. Revision on: 05/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"> BED: (place bed in lowest position with the brakes on) to lower risk for injury. Revision on: 04/21/2025	PCA Registered Practical Nurse RN	Q2h	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin... See last page for a complete listing of the Resident's allergies	D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)	Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025			



Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			Revision by: Lara Ismail (RN) • ACTIVITY: Engage Teresa in meaningful activity to decrease boredom and or restlessness. Resident likes to listen to celtic music, country music like dolly Parton, enjoys playing uno and solitaire, crosswords, sorting money Revision on: 06/03/2025 Revision by: Chelsea Campbell-Wright (ADOC) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation). Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • HIP PROTECTORS: Marion wears hip protectors at all times to safeguard against injury. Report to Registered Staff if not wearing. Revision on: 05/19/2025 Revision by: Shabnam Mustary (RPN) • SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program. LE strengthening- AAROM, Sitting balance- unsupported 10s, reaching and perturbations 5x, AAROM bilateral upper and lower extremities 5-10 reps/xcise, hamstring and calf stretches 30s, 3 reps bilateral Revision on: 10/10/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) • ALARMS: Requires small clip alarm when in Bed/Chair, Padded wheelchair alarm: Check placement and working order every shift. Marion will often remove alarm. Staff respond when alarm is heard. Revision on: 11/17/2025 Revision by: Tola Omolade (ADOC) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)				Practical Nurse 	

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Onset date: Oct. 11, 2025 Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		Target Date: 01/21/2026	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for SKIN TEAR as per MD Order. Revision on: 10/15/2025 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: 10/15/2025 Revision by: Maryola Perion (RN) 			
<ul style="list-style-type: none"> • Gait Training Revision on: 10/01/2025 Revision by: Shina Wadhwa (Physical Therapist) 		<ul style="list-style-type: none"> • Maintain walking endurance and capability in next 3 months; Revision on: 10/01/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/21/2026 	<ul style="list-style-type: none"> • 2:1 assist hand in hand ambulation 20-40ft; increase walking endurance as best tolerated; 2-3 x a week; Revision on: 10/01/2025 Revision by: Shina Wadhwa (Physical Therapist) 		PT - Physiotherapist PTA	
<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: 07/25/2025 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: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Marion)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 04/29/2025 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: 07/25/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. 		Registered Staff	
<ul style="list-style-type: none"> • STRONG PARTICIPATION in Activities Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) 		<ul style="list-style-type: none"> • Marion will be supported to maintain participation in activities 25-35 times per month by the next review date. Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 01/21/2026 	<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite Marion to programs of personal interest, Montessori, sensory stimulation, movies, music programs, social events, card games, walking groups, trivia sessions and math quizzing. Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) • ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - to promote her participation in programs of personal interest. Revision on: 10/21/2025 			
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		Revision by: Nick Carroll (Recreation Aide) • HELPFUL HINTS: Marion enjoys playing card games on her own, or with a staff/resident. Enjoys singing especially 50s-70s classics, Marion also enjoys engaging in doll therapy. Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) • SENSORY STIMULATION: Provide Marion with sensory stimulation for hand massage, tactile books, Snoezelen happiness projector and the Tovertafel. Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) • FAMILY INVOLVEMENT: Husband visits a few times per week Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Incontinence, Right ankle with mild swelling. Revision on: 05/19/2025 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Target Date: 01/21/2026	• 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 swelling to bil. ankle. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator)	• To promote intact skin integrity through healing of swelling by target date. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with swelling for changes to health status and alteration or complications affecting skin integrity. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI 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: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Potential for PAIN and alteration in comfort level related to Osteoarthritis, Impaired Mobility, Marion is able to removes the alarm: gets up from	• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/21/2026	• 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.	RN Registered Practical Nurse			
Allergies	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
bed/wheelchair/ambulate. Most Current RAI Pain Score is 0. Revision on: 05/01/2025 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none"> • NON VERBAL CUES of PAIN for Marion include - (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: 04/29/2025 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: 04/29/2025 Revision by: Maryola Perion (RN) 		PCA	
<ul style="list-style-type: none"> • Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension, Dyslipidemia Revision on: 04/29/2025 Revision by: Maryola Perion (RN) 		<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with Hypertension, Dyslipidemia through to the next review date. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Marion)/SDM in decision making of Cardiac Care Management for Hypertension. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension, Dyslipidemia for changes to health status and alteration or complications affecting cardiac function. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hypertension, Dyslipidemia as per MD Order and monitor for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) 		Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 04/29/2025 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: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/ collaborate with (Marion)/SDM in decision making of musculoskeletal care management. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of Osteoarthritis as per MD order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 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: 04/29/2025 		Registered Practical Nurse RN	
Allergies	Barium Sulfate, HYDROMORPHONE, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

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: 04/29/2025 Revision by: Maryola Perion (RN)		Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential to experience alteration in NEUROLOGICAL FUNCTION related to: Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia SEIZURE Disorder Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with (Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia, seizure) through to the next review date. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Marion)/ SDM in decision making of neurological care management for Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia SEIZURE Disorder Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for Seizure disorder as per MD order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia for changes to health status and alteration or complications affecting neurological function. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> Potential for Expressive Behaviour of (WANDERING, VERBAL, RESISTANCE to care need) nature related to Alzheimer's Dementia Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote safety for Marion and/or others during each episode of (verbal, resistiveness, wandering) through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<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: 07/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRIGGERS leading to VERBAL (yelling, calling names) as expression of behaviour include (possible feeling of loss of control, frustration, limitation in self expression, misunderstanding care intention) Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC)			
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)	Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025			

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		<ul style="list-style-type: none">• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS will be less than 4. Revision on: 07/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	<ul style="list-style-type: none">• VERBAL Behaviour: If Marion 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: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to shower, eat, etc as expression of behaviour include confusion, misunderstanding care needs, poor judgement, invading personal space Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none">• RESISTANCE to Care Need: If Marion is declining to have care such as change clothing, refusal to shower, refusal of continence care, 2 Staff members to assist with providing personal care. Staff members use stop and go approach. One staff member to offer encouragement and reassurance. Team to talk Marion about mother for example saying what mother is doing today, mother wants you to have care, etc. Other staff member provides care. Report episode to Registered Staff. Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none">• WANDERING: Permit Marion to safely roam in common area with 1 staff member. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none">• MEDICATION: Administer medication for therapeutic treatment of (Expressed Behaviour) as per MD Order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• BSO RECOMMENDATIONS: Marion enjoys activities such as cards, sorting, looking through picture books, cat therapy and celtic music Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC)				Registered Practical Nurse RN	
<ul style="list-style-type: none">• ROM Exs Revision on: 04/23/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none">• Increased B/L shoulder strength for flexion from 3/5 to 3+/5 in next 3 months; Revision on: 10/14/2025 Revision by: Shina Wadhwa	<ul style="list-style-type: none">• Passive gentle stretching for B/L Hams and Calf; 3-5 reps, 20sec hold, 2-3 x a week; Strengthening exs with B/L UE and LE with 1-2lbs, 10 reps or as best tolerated-2-3 x a week;				PT - Physiotherapist PTA	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng	
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(110.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	MacDonald, Marion (922131005626)			Admission Date	04/17/2025		Location	5 525 A
Last Care Plan Review Completed:		10/21/2025						

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
• ROM Exs Revision on: 04/23/2025 Revision by: Shina Wadhwa (Physical Therapist)		(Physical Therapist) Target Date: 01/21/2026	Revision by: Shina Wadhwa (Physical Therapist)					
• Nutrition Risk Level		• Marion will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026 • Will weigh within realistic GWR 60-70 kg through to next review date. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026 • "Teresa" will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1670 ml/day (25 ml/kg using 66.8 kg weight) through to next review date. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026	• NUTRITION RISK: "Teresa" is moderate risk level. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Marion will receive Regular diet, Regular texture Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Marion drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID TARGET: Encourage Marion (Teresa) to drink a minimum of 1336 ml/day Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.				Dietitian (RD)	
• Altered VISION Revision on: 04/17/2025		• Marion supported to use eyeglasses for vision correction	• EYEGLASSES: Marion wears eyeglasses. Ensure clean eyeglasses before putting it on her. Eyeglasses put on in the morning and get off at bedtime: Secured in the				PCA	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng	
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025		Location	5 525 A	
Last Care Plan Review Completed:		10/21/2025						

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		daily through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	med-cart. Revision on: 07/25/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in sleep patterns related to relocation, confusion, cognitive loss. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> To promote adequate rest/sleep for Marion based on identified sleep patterns/preferences each night through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime 2100, usual wake time 0700 and daytime naps PCA at varied times. Monitor for fatigue. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM 		<ul style="list-style-type: none"> To treat and/or minimize signs/symptoms of (HYPOTHYROIDISM) through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Marion)/SDM in decision making of thyroid care management. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> 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: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential for BOWEL INCONTINENCE 		<ul style="list-style-type: none"> Marion will have bowel 	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for 		Registered	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
related to Limited mobility and cognitive loss. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	incontinence managed every shift through to the next review period. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	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: 04/17/2025 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: Marion uses a Blue Brief on Days, Evening and night shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN)	Staff PCA PCA PCA	
• URINARY (Mixed) INCONTINENCE related to altered mobility Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Marion will have urinary incontinence managed every shift through to the next review period. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is (TOTAL Incontinent). Report change to level as noted. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Marion uses a Blue Brief on Days, Evening and night shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed.	 PCA PCA PCA	
• Marion is at high risk for ELOPEMENT related to change in environment Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote Marion safety and minimize risk for episode of elopement each day through next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	• ALERT: Marion 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: 10/21/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Marion away from elevator or exit doors as needed. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	 PCA	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...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	MacDonald, Marion (922131005626)	Admission Date	04/17/2025	Location 5 525 A
Last Care Plan Review Completed:		10/21/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by (restlessness, looking for husband) related to Alzheimer's Dementia Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> Marion will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> 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: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension,) related to Alzheimer's Dementia Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> Marion will be supported to make basic needs known each day through to the review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<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: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Alzheimer's Dementia Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> Marion is severely impaired in cognition and will have needs interpreted and met each day through to the review date. CPS score is 5. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Marion is feeling lost or in a confused state. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)		PCA	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive 		<ul style="list-style-type: none"> Marion will have ALL ADL care needs met each day through the 	<ul style="list-style-type: none"> BATHING: Marion prefers shower on Tuesday and Friday afternoons. Resident participates by moving arms when cues and cues to use face cloth. 		PCA	
Allergies	Barium Sulfate, HYDROMORPHONE, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved	
Limitation, Limited Mobility		next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	2 team maximal assistance.					
			Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Marion is able to reposition self in bed without support.					PCA
			She may require 1 to 2 team members extensive to maximal assistance when fatigued or confused. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • DRESSING: Marion is able to move arms and legs when cued 2 staff to provide MAXIMAL assistance upper and lower body. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Marion requires cueing and supervision from staff. May require one staff to feed her at times. Eats in the unit dining room - wildflower Lane. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Marion requires 2 person assistance arm and arm with ambulation. Wheelchair as mode of locomotion and requires one staff to propel her on the unit. Marion will try to get up and walk by herself. Staff to monitor. Revision on: 05/01/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Marion is able to (move arms and assist to wash when cued if not confused in the moment).					PCA
			Two staff to provide MAXIMAL assistance for hygiene. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • HAND HYGIENE: 1 staff to provide TOTAL assistance to (use soap/water, apply sanitizer, rub hands together, dry hands) for hand hygiene. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)					PCA
Allergies	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng	
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025		Location	5 525 A	
Last Care Plan Review Completed:		10/21/2025						

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, Limited Mobility 		<ul style="list-style-type: none"> TOILET USE: Marion requires 2 team members maximal assistance with toileting and continence care. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) TRANSFERRING: Marion requires 2 team member maximal assistance for transferring. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) ORAL CARE: Marion has her own teeth intact. Team to brush teeth and provide oral care. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Marion Medical Treatment and End of Life Care Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 01/21/2026 	<ul style="list-style-type: none"> CPR: Marion Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) 		

Allergies	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)	Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025			

Care Plan Report

Diagnosis


Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other intracranial injuries without open intracranial wound(S06.85), Chronic kidney disease, unspecified(N18.9), Seizure disorder, so described(R56.80), Other hyperlipidaemia(E78.4)

Allergies

Barium Sulfate, HYDROmorphine, Naproxen, Nitrofurantoin

Allergies	Barium Sulfate, HYDROmorphine, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	MacDonald, Marion (922131005626)	Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025			

Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved
• David is experiencing episode of UTI. Onset date Dec 09. Revision on: 12/09/2025 Revision by: Suman Aryal (Registered Nurse)	• To have infection adequately managed and treated without further complications by the target date. Revision on: 12/11/2025 Revision by: Maryola Perion (RN) Target Date: 12/16/2025	• COMMUNICATION: Involve/collaborate with (David/SDM) with decision making for infection treatment plan and update accordingly. Revision on: 12/11/2025 Revision by: Maryola Perion (RN) • HEALTH EDUCATION: Engage with resident/SDM to enhance their knowledge of infection control practices (Specify; hand hygiene, visitation, PPEs, isolation, transmission, etc.). Revision on: 12/11/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of monitoring resident for signs/symptoms, hydration status, overall health condition, process of healing, secondary infections, exacerbation of their chronic condition such as Diabetes/COPD, etc. until stable. Revision on: 12/11/2025 Revision by: Maryola Perion (RN) • VITAL SIGNS: Monitor VITAL SIGNS as per order. Revision on: 12/11/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to decreased fluid consumption, food intake, risk for constipation. decreased voiding and concentrated urine Revision on: 12/09/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote fluid consumption and minimize risk for dehydration each day for 72 hrs Revision on: 12/11/2025 Revision by: Maryola Perion (RN) Target Date: 12/12/2025	• 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 (Resident's Name) to consume fluids; amount as per Nutrition Care Plan Revision on: 12/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • HYPODERMOCLYSIS: Fluid infused via hypodermoclysis as per MD order Monitor entry site for swelling, infection or other complications. Revision on: 12/09/2025 Revision by: Danielle Loreto (RAI Coordinator)			Registered Staff	
• Potential to experience alteration in CARDIAC FUNCTION related to: High Cholesterol Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with High cholesterol through to the next review date.	• COMMUNICATION: Involve/collaborate with (David)/SDM in decision making of Cardiac Care Management for High cholesterol. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with			Registered Staff	
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	(Specify cardiac condition) for changes to health status and alteration or complications affecting cardiac function. • MEDICATION: Administer medication for (specify Etiology/Diagnosis) as per MD Order and monitor for side effects.			Registered Practical Nurse RN	
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment and dx with Alzheimer Disease, Insomnia. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• To promote adequate rest/sleep for David based on identified sleep patterns/preferences each night through to the next review date. Revision on: 12/08/2025 Revision by: Chelsea Campbell-Wright (ADOC) Target Date: 12/13/2025	• REST PATTERN: Preferred bedtime 11-12PM, usual wake time 8-9AM, no nap. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • MONITOR: Monitor Davids sleeping patterns for 5 days. Document when awake or asleep. Revision on: 12/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)			PCA PCA	 Q1H
• Nutrition Risk Level		• David will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/07/2026 • Will weigh within realistic GWR 95-105 kg through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/07/2026 • Dave will be adequately hydrated aeb drinking at least	• Labelled Item Dinner: soft cookie Tues/Thurs/Sat/Sun Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Lunch: ice cream cup M/W/F Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Dave is moderate risk level. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: David will receive regular diet, minced texture (When his wife Linda is visiting, she is allowed to request regular texture at risk for Dave and assist with feeding him. She is aware of choking risk.) Revision on: 10/30/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN PCA Registered Practical Nurse RN Dietitian (RD) PCA	E D
Allergies	Shingrix		D.O.B.	01/21/1953		Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025		Location	5 519 C

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		80% of total fluid requirement 2475 ml/day (25 ml/kg using 99 kg weight) through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/07/2026	• FLUID CONSISTENCY: David drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			PCA	
			• FLUID TARGET: Encourage Dave to drink at least 1980 ml/day Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))			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	
			• MEDPASS SUPPLEMENTS: 60 ml Resource 2.0 four times daily Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD))				
• David is at high risk for ELOPEMENT related to wandering and on locked unit. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• To promote David safety and minimize risk for episode of elopement each day through next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• ALERT: David 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: 10/22/2025 Revision by: Maryola Perion (RN)				
			• ELOPEMENT ALERT: Redirect David away from elevator or exit doors as needed. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, Hoarding and rummaging, RESISTANCE to care need) nature related to Sundowning. Alzheimer's disease. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of (Expressive Behaviour) by the next review date. ABS score will be less than 3. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk.			Registered Staff	
			• TRIGGERS leading to PHYSICAL (Hitting, swung his arms to staff, etc.) as expressions of behaviour include (anger, confusion, invasion of personal space, Sundowning, etc.) Revision on: 11/18/2025 Revision by: Maryola Perion (RN)				
			• PHYSICAL Behaviour: If David 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: 11/18/2025				
Allergies	Shingrix		D.O.B.	01/21/1953		Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025		Location	5 519 C

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			<div>Revision by: Maryola Perion (RN)</div> <div>• TRIGGERS leading to VERBAL (yelling, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.)</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• VERBAL Behaviour: If David is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing/brief, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• RESISTANCE to Care Need: If David is declining to (change clothes/brief, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• TRIGGERS leading to SOCIALLY Inappropriate (hoarding papers and rummage through drawers) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• SOCIALLY Inappropriate Behaviour: If David is noted to (rummaging and hoarding.) gently redirect him. Staff to check and remove it when needed.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• WANDERING: Permit David to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• HALLUCINATION: Will speak and ask questions to people who he thinks are living</div> <div>Registered Practical</div>					
Allergies	Shingrix		D.O.B.	01/21/1953		Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Martin, David (922131005666)		Admission Date	10/09/2025		Location	5 519 C	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, Hoarding and rummaging, RESISTANCE to care need) nature related to Sundowning. Alzheimer's disease.</div> <div>Revision on: 10/22/2025</div> <div>Revision by: Maryola Perion (RN)</div>		<div>in the bathroom mirror. Report to registered staff when present, consult with MD and ensure safely for David and other resident/staff.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• DELUSION: Believes there are people who live in the bathroom mirror and will often not want to go into the bathroom as he doesn't want to disturb them. Will often urinate in other areas as result of that.</div> <div>Approach David calmly, reduce stimuli, and use simple language to establish a connection to reality.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div>	<div>Nurse RN</div> <div>Registered Practical Nurse RN</div>				
<div>• Potential to experience alteration in MOOD related to Alzheimer's Disease</div> <div>Revision on: 10/22/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• David will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>Target Date: 01/07/2026</div>	<div>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of David for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</div> <div>Revision on: 10/09/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• RESIDENT STRENGTHS: Build on David's effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities.</div> <div>Revision on: 10/22/2025</div> <div>Revision by: Maryola Perion (RN)</div>					
<div>• Potential for Acute PAIN and alteration in comfort level related to Acid reflux. Most Current RAI Pain Score is 0.</div>	<div>• Promote RAI Pain Score of 0 through to the next review.</div> <div>Target Date: 01/07/2026</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>	<div>RN</div> <div>Registered Practical</div>				
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> • NON VERBAL CUES of PAIN for David 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) <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: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	Nurse PCA Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Risk for Impaired SKIN INTEGRITY related to Incontinence and cognitive impairment, Feet have pitting edema 2+ and legs.. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. Target Date: 01/07/2026	<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. • HEALTH EDUCATION: Encourage David to elevate his legs when in bed due to edema. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	PCA	
<ul style="list-style-type: none"> • Potential to experience (Specify; rash, hives, anaphylaxis, etc.) related to ALLERGY of Shingrix. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> • David will be protected from exposure to allergen each day through next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status and complications. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> • ALLERGY ALERT: David has ALLERGY to Shingrix Prevent contact with and report if noted to experience symptoms (Specify; rash, hives, swelling, difficulty breathing, etc.). Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> • MD/PHARMACY ALERT: Notify the MD and Pharmacy of David Allergy to Shingrix and minimize risk for exposure to allergen. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		

Allergies	Shingrix	D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Martin, David (922131005666)	Admission Date	10/09/2025	Location	5 519 C

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• BOWEL Continence -David is continent and has self recognition of urge to defecate. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		• David to remain continent of bowels through next review date Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• BOWEL Continence level is Usually CONTINENT. Report change to level as noted. PCA Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • SELF TOILETING:David 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: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
• URINARY INCONTINENCE related to Alzheimer's disease. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		• David will have urinary incontinence managed every shift through to the next review period. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026 • David will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) 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: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • URINARY Continence level is (FREQUENTLY Incontinent). Report change to level as noted. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses medium size brief every shift per wife request. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Alzheimer's disease. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		• David will be supported to make basic needs known each day through to the review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• PRIMARY LANGUAGE: David primary language is English. He is able to speak/understand English. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to David Medical Treatment and End of Life Care Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> To support and honor David expressed wishes and beliefs through to the End of Life. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 10/09/2025 Revision by: Gurjit Kaur (RN)			
<ul style="list-style-type: none"> Increased risk for FALLS related to wandering and alzheimer's disease. Revision on: 10/09/2025 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: 01/07/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (David)/SDM in decision making in fall prevention Plan of Care. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	D/E/N
			<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: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)			
			<ul style="list-style-type: none"> ENVIRONMENT: Secure environment : reduce clutter, etc. to reduce fall risk for David. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> FOOTWEAR: Ensure resident wears appropriate footwear at all times. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential to experience alteration in ENDOCRINE FUNCTION related to low thyroid. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (David)/SDM in decision making of thyroid care management. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with HYPOTHYROIDISM for changes to health status and alteration or complications affecting endocrine function. 			
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Target Date: 01/07/2026	Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Potential for gastric discomfort/complications related to diagnosis of Acid reflux. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with (David)/SDM in decision making for GERD Management. Revision on: 10/22/2025 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. • 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			
• Altered VISION related to aging and wear glasses. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	• David supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• EYEGLASSES: David wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • READING: David uses large print material to aid with reading. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	PCA PCA			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Alzheimer's Disease	• David will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	• ORIENTATION: Gently reorient to (person, place, time) as needed when is David is feeling lost or in confused state. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 10/09/2025	PCA			
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		Target Date: 01/07/2026	Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.		Registered Staff	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Alzheimer's disease, Acid reflux, high cholesterol and low thyroid. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> David will have ALL ADL care needs met each day through the next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026 <ul style="list-style-type: none"> David 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: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> BATHING: David prefers shower Evening shift Tuesday and Saturday. Need assistance from one person during shower. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) <ul style="list-style-type: none"> BED MOBILITY: David is Independent but may require Extensive assistance from one team member to help him to turn and reposition in bed. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> DRESSING: David is able to assist minimally by lifting his arms and legs with cueing from staff. Requires two staff Maximal assistance to dress his upper and lower body. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> EATING: David is distracted at meals. He requires frequent cueing and redirection to eat/drink independently. There are times he requires feeding assistance from 1 staff. Revision on: 12/02/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> LOCOMOTION: David is independent with supervision from staff. He is not using any assistive device at this time. He may require one staff Limited assistance when walking if he is getting unsteady or weak. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PERSONAL HYGIENE: David is able to wash hands, face and comb his hair; But he requires extensive assistance from one team member to provide peri-care. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, 		PCA	
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

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 disease, Acid reflux, high cholesterol and low thyroid. <p>Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)</p>		apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> TOILET USE: David requires Extensive assistance from one team member to transfer him on and off the toilet, change his incontinent products and to provide peri care. PCA Revision on: 10/22/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRANSFERRING: David is independent with transferring between surfaces. PCA Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> ORAL CARE:David requires supervision/set up help with oral care. No teeth/dentures PCA Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> FOOT CARE: PSW to complete toenail care on his bath days. Report long toe nails or other abnormalities as noted. PCA Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> SHAVING - David prefers (specify, beard, mustache, face) shaved on his bath days. PCA Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		D

Allergies	Shingrix	D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Martin, David (922131005666)	Admission Date	10/09/2025	Location	5 519 C


Care Plan Report

Diagnosis Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm of prostate(C61)

Allergies	Shingrix	D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Martin, David (922131005666)	Admission Date	10/09/2025	Location	5 519 C

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Lillian is at high risk for ELOPEMENT related to exit seeking, insisting that she is supposed to be discharged. Revision on: 11/09/2025 Revision by: Maryola Perion (RN)		• To promote Lillian's safety and minimize risk for episode of elopement each day through next review date. Revision on: 11/09/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	• ALERT: Lillian 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: 11/09/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Lillian away from elevator or exit doors as needed. PCA Revision on: 11/09/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in CARDIAC FUNCTION related to: Hyperlipidaemia Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Hyperlipidaemia through to the next review date. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	• COMMUNICATION: Involve/collaborate with (Lillian)/SDM in decision making of Cardiac Care Management for Hyperlipidaemia. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hyperlipidaemia for changes to health status and alteration or complications affecting cardiac function. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hyperlipidaemia as per MD Order and monitor for side effects. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <div>Registered Practical Nurse RN</div>				
• Potential for Expressive Behaviour of (WANDERING, SOCIALLY Inappropriate, hoarding), verbal, resisting care nature related to Vascular Dementia, Severe Anxiety and Bipolar Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 5. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026 • Lillian will be supported to adjust to his/her new environment to lower risk of	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lillian for indications to change in or for escalating expressive behaviour risk. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL (yelling, screaming, calling names, etc.) as expressions of behaviour include (frustration, misunderstanding care intention, etc.) Revision on: 10/07/2025 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Lillian 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: 10/07/2025 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng	
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A	



Care Plan Report

Focus		Goal	Interventions	Position	Freq/Resolved
		triggering former (WANDERING, socially inappropriate behaviour, hoarding) behaviour episodes through to the next review. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	<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, etc.) as expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process, etc.) Revision on: 10/07/2025 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Lillian is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY Inappropriate (hoarding briefs new and used ones, placing toilet p[aper in her brief, wandering) as expression of behaviour include (Specify cause; confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.) Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • SOCIALLY Inappropriate Behaviour: If Lillian is noted to (placing toilet paper in her brief, hoarding briefs or other items) gently redirect her and try to assist her to removing the paper towel as well to enter her room when she is not present and check for hoarded items and remove. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • WANDERING: Permit Lillian to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 09/18/2025 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: 10/07/2025 Revision by: Maryola Perion (RN) 	Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Potential to experience alteration in MOOD as exhibited by persistent anger with self or others related to Vascular 		<ul style="list-style-type: none"> • Lillian will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. 	<ul style="list-style-type: none"> • HEALTH EDUCATION: Provide education and support to (Lillian)/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed. Revision on: 10/07/2025 	RN Registered Practical Nurse	
Allergies	No Known Allergies			D.O.B.	02/20/1952
Physician				Albert Patrick Ng	
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)			Admission Date	09/18/2025
				Location	5 522 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Dementia, Bipolar, Severe Anxiety. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026	Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lillian for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Lillian effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)				
• Potential for PAIN and alteration in comfort level related to history of femur fracture and possible migraine disorder. Most Current Ltcf Pain Score is 0. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 03/09/2026	• 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: 10/07/2025 Revision by: Maryola Perion (RN)			RN Registered Practical Nurse Registered Practical Nurse RN	
• Potential for CONSTIPATION Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		• Lillian will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026 • To minimize the potential for episodes/ complications of	• 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	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng	
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A	

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for CONSTIPATION Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		constipation through to the next review date. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026				
<ul style="list-style-type: none"> Use of PASD (one right side 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility). Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)		<ul style="list-style-type: none"> Lillian will be effectively supported with use of (bed rails) to optimize Activity of Daily Living (bed mobility) each day through to the next review date. Revision on: 10/02/2025 Revision by: Suzanne Azar (RN) Target Date: 03/09/2026	<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 bed rails. Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)		Registered Staff	
			<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL). 			
			<ul style="list-style-type: none"> BED RAIL (One PARTIAL): 1/4 Rail to RIGHT side in USE as a PASD to assist resident with (specify; bed mobility, transfer in/out of bed). Monitor every shift. Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)		PCA	D/E/N
<ul style="list-style-type: none"> Temporary-Activities related to Move In Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		<ul style="list-style-type: none"> Lillian will be engaged and invited to participate in all spheres of activities offered during the first days/weeks upon move in. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 03/09/2026	<ul style="list-style-type: none"> INVITATION: Invite and Encourage resident to attend scheduled programs. Also extend invite to Spiritual focused programs. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)			
			<ul style="list-style-type: none"> CALENDAR: Provide program calendar(verbally review if needed). Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)			
			<ul style="list-style-type: none"> SOCIAL Introduction: Introduce her to other residents of similar age, interest, language, etc. as she can tolerate. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)			
<ul style="list-style-type: none"> Lillian has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> Lillian will be safe when choosing to smoke through to the next review Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> COMMUNICATION: Involve (Lillian/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: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		Social Worker	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 03/09/2026	• CHECK: Room and personal belongings to be checked for smoking materials every shift. • STORAGE: Smoking materials to be appropriately stored by (Nurse) and (Lillian) to return cigarettes/lighter/matches after each smoke break. Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	D/E/N
• Risk for Impaired SKIN INTEGRITY related to Frailty, Incontinence peripheral edema. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Target Date: 03/09/2026	• 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		• Lillian will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026 • Will weigh within GWR/IBW/Realistic weight range of 58-64 kg/BMI 22-25 through to next review date. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 03/09/2026 • Lillian will be adequately hydrated aeb drinking at least 80% of total fluid requirement	• NUTRITION RISK: Lillian is high risk level. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Lillian will receive regular diet, regular texture Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID CONSISTENCY: Lillian drinks REGULAR/THIN Level 0 Fluids. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID TARGET: Encourage Lillian to drink a minimum of 1160ml per day. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • MEDPASS SUPPLEMENTS: 237ml boost fruit beverage TID (Hx of refusing Resource 2.0) Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)		Dietitian (RD) PCA PCA PCA Dietary aide PCA	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		<p>@25 ml/kg, through to next review date. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 03/09/2026</p> <p>• Will meet estimated nutritional requirements of 25-30 kcal/kg, protein @ 1.2-1.5g/kg through to next review date. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 03/09/2026</p>				
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Vascular Dementia, BiPolar and Severe Anxiety Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		<p>• To promote adequate rest/sleep for Lillian based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/09/2026</p>	<p>• REST PATTERN: Preferred bedtime 2230-2300, usual wake time 1000-1100 and daytime naps when she wants to. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		PCA	
• Potential for BOWEL INCONTINENCE related to Vascular Dementia Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		<p>• (Resident name) will have bowel incontinence managed every shift through to the next review period. Target Date: 03/09/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.</p> <p>• BOWEL Continence level is OCCASIONALLY Incontinent. Report change to level as noted. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</p>		Registered Staff PCA PCA	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none">• INCONTINENCE PRODUCT: Resident uses a white brief throughout all shifts. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
<ul style="list-style-type: none">• URINARY (Mixed) INCONTINENCE related to Vascular Dementia Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none">• Lillian will have urinary incontinence managed every shift through to the next review period. Revision on: 09/18/2025 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 for toileting needs, changes to health status and alteration of continence level. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• URINARY Continence level is (FREQUENTLY Incontinent). Report change to level as noted. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• INCONTINENCE PRODUCT: Resident uses white brief throughout all shifts Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA <	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
concentrating, altered judgement) related to progression of Vascular Dementia Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		through the review date. Current CPS is 3. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/09/2026	Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Lillian can comprehend and follow. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"> Increased risk for FALLS related to Vascular Dementia as evidence by Limitation of cognitive function/altered judgement Revision on: 09/18/2025 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. Target Date: 03/09/2026	<ul style="list-style-type: none"> Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls. CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: Walker ENVIRONMENT: Secure environment reduce clutter, night light, quiet environment, etc.) to reduce fall risk FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. 			RN Registered Practical Nurse PCA PCA PCA PCA	D/E/N
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation 		<ul style="list-style-type: none"> Lillian will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care 	<ul style="list-style-type: none"> BATHING: Lillian can participate with 1 team member limited assistance with washing herself on her bath days. She has per shower/bath (offer a choice) on Thursday and Sunday on the day shift. 			PCA	
Allergies	No Known Allergies			D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)			Admission Date	09/18/2025	Location	5 522 A

Care Plan Report

[illegible]

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 		<ul style="list-style-type: none"> ORAL CARE: Lillian has full upper dentures, partial lower dentures and is able to complete her own oral and denture care. Monitor for changes in ability to do so. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) FOOT CARE: PSW) to complete toenail care on shower days. Report long toe nails or other abnormalities as noted. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to (Lillian Medical Treatment and End of Life Care Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 03/09/2026 	<ul style="list-style-type: none"> DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 10/06/2025 Revision by: Gurjit Kaur (RN) 		

Allergies	No Known Allergies	D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)	Admission Date	09/18/2025	Location	5 522 A

Care Plan Report


Diagnosis

Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecified(F01.9), Unspecified fracture of neck of femur, closed(S72.090), Migraine, unspecified(G43.9)

Allergies	No Known Allergies	D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	McCullough, Lillian (922131005663)	Admission Date	09/18/2025	Location	5 522 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Lori,o requires temporary SAFETY CHECKS for physical aggression for duration of 72 hour related to hitting other resident Revision on: 12/10/2025 Revision by: Hetal Patel (RN)		<ul style="list-style-type: none">• Safety Check initiated on Dec 10,2025 as temporary measure to monitor resident each day until completed date dec 13,2025. Revision on: 12/10/2025 Revision by: Hetal Patel (RN) Target Date: 12/13/2025	<ul style="list-style-type: none">• Check Lori,O location every 30 minutes. Revision on: 12/10/2025 Revision by: Hetal Patel (RN)			PCA	Q1/2hr
<ul style="list-style-type: none">• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need), removing colostomy bag related to Alzheimer's Disease, bipolar Revision on: 11/08/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">• To promote safety for Lori and/or others during each episode through to the next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026 <ul style="list-style-type: none">• To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 5. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026 <ul style="list-style-type: none">• Lori will be supported to adjust to her new environment to lower risk of triggering former (WANDERING, PHYSICAL inappropriate, VERBALLY inappropriate, resistiveness to care, delusions, hallucinations etc.) behaviour episodes through to the next review.	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lori for indications to change in or for escalating expressive behaviour risk. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• TRIGGERS leading to PHYSICAL (Hitting, Punching, Slapping) as expression of behaviour include anger, frustration, fearfulness, confusion, invasion of personal space, pain, when care is being provided Revision on: 11/11/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none">• PHYSICAL Behaviour: If Lori is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Redirect other residents away from Lori when she is becoming physical. During care use the stop and go approach as well as walk her through what you are doing to limit physical expressions. Ensure 2 people for care. Seek Registered Staff assistance. Revision on: 11/21/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none">• TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none">• VERBAL Behaviour: If Lori 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. During care use the stop and go approach as well as walk her through what you are doing to limit verbal expressions. Report episode to Registered Staff.				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A	



Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need), removing colostomy bag related to Alzheimer's Disease, bipolar</p> <p>Revision on: 11/08/2025 Revision by: Maryola Perion (RN)</p>		<p>Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026</p>	<p>Revision on: 11/11/2025 Revision by: Chelsea Campbell-Wright (ADOC)</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, pain</p> <p>Revision on: 11/10/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• RESISTANCE to Care Need: If (Lori 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: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate as expression of behaviour include (hoarding items.)(taking off her colostomy bag and throwing it on the floor multiple times a day. Will often do this over and over again)</p> <p>Revision on: 10/29/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: if noted collecting and hoarding items. Remove from her room when she is not in there. Try to redirect in the moment when accepting. Use distraction such as videos of cats, cat books, and other videos she likes to help redirect Lori from not removing ostomy. Apply abdominal belt over ostomy site to keep it in place.</p> <p>When resident is taking off her colostomy bag team to approach to reapply. If resident refuses, reapproach in 10-15 minutes. May offer to place a towel to protect her clothing however not often accepting of intervention. Team to monitor for pain, bleeding, feces on surfaces as a result of ripping the bag off. Report all incidents to the nurse.</p> <p>Revision on: 11/11/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• WANDERING: Permit Lori to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>			
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

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, RESISTANCE to care need), removing colostomy bag related to Alzheimer's Disease, bipolar Revision on: 11/08/2025 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none">MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
			<ul style="list-style-type: none">HALLUCINATION: Seeing her children or other children when they are not present. Team to not argue with her. Allow her to express her concerns. Team to offer support and reassurance. Notify MD if her hallucinations are impacting her functioning.			Registered Practical Nurse RN	
			<ul style="list-style-type: none">DELUSION: when in hospital she believed that the staff was there to harm her. She also believed she had children which she does not. team to not argue with her. Allow her to express her concerns. Team to offer support and reassurance. Notify MD if her hallucinations are impacting her functioning.			Registered Practical Nurse RN	
<ul style="list-style-type: none">Potential for BOWEL INCONTINENCE related to Colostomy Bag, Leaking, resident removing colostomy bag. Revision on: 11/08/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">Lori will have bowel incontinence managed every shift through to the next review period. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none">BOWEL Continence level is FREQUENTLY Incontinent. Report change to level as noted. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)			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">COLOSTOMY: Resident has Colostomy bag number :14404 and Flange no. 18134. Change flange as per MD Order. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)				
			<ul style="list-style-type: none">OSTOMY BAG CHANGE: Check OSTOMY every 2 hours; Empty contents of ostomy bag when 1/3 full of stool and release gas as needed. Report any redness,			PCA	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)			Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for BOWEL INCONTINENCE related to Colostomy Bag, Leaking, resident removing colostomy bag. Revision on: 11/08/2025 Revision by: Maryola Perion (RN)			drainage or leaking of ostomy immediately if noted Revision on: 10/15/2025 Revision by: Juanelle Boussey (Staff Development Coordinator)				
• Alteration in skin integrity related to RASH ON ABDOMEN / THIGH. Revision on: 11/08/2025 Revision by: Maryola Perion (RN)		• To promote intact skin integrity through healing of RASH by the target date. Revision on: 11/17/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with RASH ON ABDOMEN / THIGH for changes to health status and alteration or complications affecting skin integrity. Revision on: 11/08/2025 Revision by: Maryola Perion (RN) • COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making for treatment of skin issues. Revision on: 11/08/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for RASH as per MD Order. Monitor effectiveness and for side effects. Revision on: 11/08/2025 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: 11/08/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN Registered Practical Nurse RN	
• ROM Exs Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• Increased ROM at Lt knee from -30 to -20 in next 3 months Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/06/2026	• A-AAROM ex's for B/L LE, as best tolerated, 10reps/ex's, 2-3 x a week; B/L Hams and calf passive stretching; 10-20 sec hold, 3-5 reps, 2-3 x a week; Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)			PT - Physiotherapist PTA	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> • ROM Exs Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)						
<ul style="list-style-type: none"> • Strengthening Exs Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		<ul style="list-style-type: none"> • Increased strength for B/L UE from 3/5 to 3+/5 in over 3 months. Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist) Target Date: 01/06/2026	<ul style="list-style-type: none"> • Strengthening ex's for B/L UE within pain limits as best tolerated, 10 reps/ex's, 2-3 x a week; Revision on: 11/05/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		PT - Physiotherapist PTA	
<ul style="list-style-type: none"> • Potential for altered hematologic symptoms or complications related to blood clots noted in her colostomy bag. Revision on: 10/30/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> • To treat and/or minimize complications associated blood clots each day through to the next review date. Revision on: 10/30/2025 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 with blood clots for complications or changes to health status. Revision on: 10/30/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> • Alteration in skin integrity related to BRUISE to left outer wrist. Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)		<ul style="list-style-type: none"> • To promote intact skin integrity through healing of BRUISE by (specify date of expected healing or end of treatment and remember to adjust goal target date) Target Date: 01/06/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (resident name)/SDM in decision making for treatment of bruise as skin issue. Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)		<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with bruise to left outer wrist. for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Alteration in skin integrity related to BRUISE to left outer wrist. Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)			Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse) • TREATMENT: (Specify in detail). Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)				
• Lori has AKI. Revision on: 10/28/2025 Revision by: Maryola Perion (RN)		• To treat and minimize complications associated with AKI through to next review date. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with AKI for changes to health status and alteration or complications affecting renal function. Revision on: 10/28/2025 Revision by: Maryola Perion (RN)				
• Lori has potential for recurrence of SUBSTANCE ABUSE, withdrawal symptoms, mood/behaviour disturbances related to history of NARCOTIC Abuse Revision on: 10/28/2025 Revision by: Maryola Perion (RN)		• Lori will remain free of non-prescribed narcotics through next review date. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• SET BOUNDARIES: Discuss behavioural limits and expectations with Lori. Be very clear with limits to establish behaviour boundaries. Revision on: 10/28/2025 Revision by: Maryola Perion (RN)			Social Worker Director of Care Executive Director	
• Potential to experience alteration in RESPIRATORY FUNCTION related to: Diagnosis of Respiratory Acidosis (RFH - 10/25/25) Revision on: 10/28/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Respiratory Acidosis each day through to next review date. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Respiratory Acidosis for changes to health status and alteration or complications affecting respiratory function. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) • POSITIONING: To manage shortness of breath (SOB) elevate head of the bed to improve breathing.			Registered Staff PCA	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			<ul style="list-style-type: none"> • OXYGEN: Administer Oxygen as per MD/NP order. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) 			
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to wound (Stage #2) to coccyx secondary to Pressure Injury Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) 		<ul style="list-style-type: none"> • To minimize risk of WOUND (Stage #2) infection each day until fully healed. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026 • To promote optimal healing of WOUND (Stage #2) 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). Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026 	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for Stage 2 pressure injury to coccyx area as per MD Order. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Stage #2 Wound to coccyx for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • WEEKLY ASSESSMENT: Assess and evaluate pressure injury weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • POSITIONING: Has Turning/Repositioning to off load pressure intervention in place; see Skin Impairment Risk Care Plan. Initiated Oct. 28th Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • PAIN Management of STAGE #2 WOUND: Has intervention for (specify pre or post) dressing change; Refer to PAIN Care Plan. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • NUTRITIONAL SUPPLEMENT for Skin Healing in place; refer to Dietary Care Plan. Dietitian (RD) RD referral sent Oct. 28th. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) 			
<ul style="list-style-type: none"> • Alteration in skin integrity related to BRUISE #5 to Left Antecubital Space. Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) 		<ul style="list-style-type: none"> • To promote intact skin integrity through healing of BRUISE by the next review date. Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with BRUISE #5 to Left Antecubital Space for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN 			
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Target Date: 01/06/2026	using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)				
• Alteration in skin integrity related to MASD Right abdominal fold #1 Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)			• MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD #1 on right abdominal fold for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) • TOPICAL TX: Apply topical treatment to MASD #1 on right abdominal fold as MD Order. Revision on: 10/25/2025 Revision by: Jane Del Rosario (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: 10/25/2025 Revision by: Jane Del Rosario (RPN)			Registered Practical Nurse RN Registered Practical Nurse Registered Practical Nurse	
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 10/21/2025 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: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026 • To promote Lori's understanding of treatment regime and possible side effects of medication taken through to the next review. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	• COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 10/21/2025 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: 10/21/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A

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 (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	Target Date: 01/06/2026			
<ul style="list-style-type: none"> Potential for CHRONIC PAIN and alteration in comfort level related to SPINAL FUSION, Migraine, CHRONIC BACK PAIN, Leg pain. Most Current RAI Pain Score is 3. Revision on: 10/21/2025 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: 01/06/2026 <ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Target Date: 01/06/2026	<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. MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	RN Registered Practical Nurse Registered Practical Nurse RN	
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to: Dyslipidemia Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with Dyslipidemia through to the next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making of Cardiac Care Management for Dyslipidemia. MONITORING: Utilize holistic perspective of continuous monitoring of resident with Dyslipidemia for changes to health status and alteration or complications affecting cardiac function. MEDICATION: Administer medication for Dyslipidemia as per MD Order and monitor for side effects. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN	

Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)	Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility and transfer). Revision on: 10/14/2025 Revision by: Suzanne Azar (RN)		• Lori 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: 10/14/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026	• 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: 10/14/2025 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 and transfer. Revision on: 10/14/2025 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: 10/14/2025 Revision by: Suzanne Azar (RN)			PCA	D/E/N
• Lori has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Lori will be safe when choosing to smoke through to the next review Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• COMMUNICATION: Involve (Lori/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: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • CHECK: Room and personal belongings to be checked for smoking materials every shift. • STORAGE: Smoking materials to be appropriately stored by (Nurse) and Lori to return cigarettes/lighter/matches after each smoke break. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			Social Worker	
• Nutrition Risk Level		• Lori will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026 • Will weigh within realistic GWR	• LABELLED SNACK HS: assorted deli sandwich on white bread daily Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LABELLED SNACK PM: Instead of standard snack, provide: Banana (Mon/Wed/Fri) Cheese and crackers (Tues/Sat) ½ peanut butter sandwich on white bread (Thurs/Sun) Revision on: 10/28/2025			PCA	E
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)			Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
	<p>65-75 kg through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/06/2026</p> <p>• Lori will be adequately hydrated aeb drinking 100% of total fluid requirement 2070 ml/day (30 ml/kg using 69 kg weight) through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/06/2026</p>	<p>Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Lori is HIGH risk level. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Lori will receive regular diet, regular texture Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID CONSISTENCY: Lori drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID TARGET: Encourage Lori to drink 2070 ml/day. Encourage intake of Powerade. Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DINING INSTRUCTIONS: Ileostomy diet: - Provide coffee/tea at breakfast only - Provide lactose-free milk to drink - Dilute juice with water 50/50 - No raw vegetables/salads (serve cooked vegetables) - Encourage adding some salt to her meals Revision on: 10/17/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• MEDPASS SUPPLEMENTS: 1 scoop of Beneprotein powder once daily with 20:00 medpass (mix in 200 ml lactose-free milk or mix in apple sauce) Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• LABELLED SNACK: bottle of Powerade (591 ml) given twice daily at AM/PM snack for resident to sip on throughout the day Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Dietitian (RD)</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>Registered Practical Nurse</p> <p>PCA</p>	<p>D/E</p> <p>Q1H</p>			
<p>• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Alzheimer Disease Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote adequate rest/sleep for Lori based on identified sleep patterns/preferences each night</p>	<p>• REST PATTERN: Preferred bedtime 2300, usual wake time 0900 and daytime naps when she wants to Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• MONITOR: Monitor Lori sleeping patterns. Document when awake or asleep.</p>	<p>PCA</p> <p>PCA</p>				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A	

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		through to the next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Lori -is experiencing colonization with Antibiotic Resistant Organism ESBL as of confirmed date: Noted on Admission paper work Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To lower risk of infection and prevent transmission of identified Antibiotic Resistant Organism through to the next review. Target Date: 01/06/2026	• HEALTH EDUCATION: Engage with resident/SDM to enhance their knowledge of infection control practices (hand hygiene, visitation, PPEs, isolation, transmission, etc.) for Antibiotic Resistant Organism. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITORING: Utilize holistic perspective of monitoring resident for (signs/symptoms of secondary infection, overall health condition, etc.). Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status.			Registered Staff	
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD). Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To treat and/or minimize complications associated with GERD each day through to the next review date. Target Date: 01/06/2026	• COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making for GERD Management. Revision on: 10/21/2025 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.			Registered Staff	
			• 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.			PCA Registered Staff	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		• MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.	Registered Staff			
• URINARY (Functional) INCONTINENCE related to Cognitive loss, mobility loss. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Lori will have urinary incontinence managed every shift through to the next review period. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • URINARY Continence level is TOTAL Incontinent. Report change to level as noted. PCA Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses Blue brief throughout all shifts. PCA Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Lori is at high risk for ELOPEMENT related to New admission time to adjust Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote Lori safety and minimize risk for episode of elopement each day through next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• ALERT: Lori 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: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • ELOPEMENT ALERT: Redirect Lori away from elevator or exit doors as needed. PCA Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Frailty, Incontinence	• To protect and maintain skin integrity each day through to the next review. 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. • POSITIONING: Turn, reposition every 2 hours (OR SPECIFY the frequency if more/less often as per the residents preference/request) when in bed/wheelchair to offload pressure. New pressure injury to coccyx Oct. 27th Revision on: 10/28/2025 Revision by: Suzanne Azar (RN)	PCA PCA	 Q2h		
• Potential to experience alteration in MOOD related to Depression Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Lori will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lori for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/08/2025				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Lori effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)					
• Alteration in skin integrity related to MASD under rt.breast. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN)		• To promote intact skin integrity through healing of MASD under rt.breast by the target date. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD under rt.breast for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) • COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making for treatment of skin issues. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOPICAL TX: Apply topical treatment to (right breast) as MD Order. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI 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: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				Registered Practical Nurse RN	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, slurred speech, mumbled speech, etc.) related to Alzheimer's Disease Revision on: 10/08/2025		• Lori will be supported to maintain current communication abilities each day through to the review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI	• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Lori needs (intermittent) cueing or demonstrative instruction in tasks and activities.				Registered Practical Nurse Registered Practical Nurse	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Oglan, Lori (922131005665)	Admission Date	10/08/2025		Location	5 512 A		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		Coordinator) Target Date: 01/06/2026	Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Alteration in skin integrity related to MASD around stoma. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN)		• To promote intact skin integrity through healing of RASH by the target date. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD (Redness) around stoma for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) • COMMUNICATION: Involve/collaborate with Lori Oglan in decision making for treatment of skin issues. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) • TOPICAL TX: Apply topical treatment to MASD (Redness) around stoma.as MD Order. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (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: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			Registered Practical Nurse RN	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Alzhiemer's Disease Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Lori will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• COMMUNICATION: Involve/collaborate with Lori/SDM in decision making of Cognitive Loss for Alzheimer's Disease . Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • ORIENTATION: Gently reorient to (person, place, time) as needed when Alzheimer's Disease is feeling lost or in confused state. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Lori can comprehend and follow.				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A

Care Plan Report

Focus		Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> • COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Alzheimer's Disease Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> • Increased risk for FALLS related to HISTORY OF FALLS, IMPAIRED JUDGEMENT Revision on: 10/08/2025 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. Target Date: 01/06/2026	<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: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	D/E/N
			<ul style="list-style-type: none"> • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
			<ul style="list-style-type: none"> • ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Lori. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
			<ul style="list-style-type: none"> • BED: place bed in lowest position, etc. to lower risk for injury. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
			<ul style="list-style-type: none"> • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
			<ul style="list-style-type: none"> • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> • Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation 		<ul style="list-style-type: none"> • Lori will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care 	<ul style="list-style-type: none"> • BATHING: Lori prefers (shower or tub bath) on (Evening shift Wednesday and Saturday). Resident is able to move her body and assist with washing her upper body. Due to her expressed behaviours she may require stop and go approaches. MAXI lift for transfer. 	PCA	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies			D.O.B.	07/06/1955
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...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	Oglan, Lori (922131005665)			Admission Date	10/08/2025
				Location	5 512 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		needs are met each day through to the next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<p>Nail care to be provided on shower/bath day. Revision on: 11/06/2025 Revision by: Blanche Erika Bureros (Registered Practical Nurse)</p> <p>• BED MOBILITY: Lori is able to move herself once in bed from side to side. MAXI lift PCA transfer between bed to wheelchair. Monitor for changes and need for increased support. Revision on: 11/06/2025 Revision by: Blanche Erika Bureros (Registered Practical Nurse)</p> <p>• DRESSING: Lori requires 2 team member maximal assistance to dress her upper PCA and lower body. If expressed behaviours are not present she may only require 1 team member extensive assistance. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Lori is able to eat independently. Observe for the need of set up PCA assistance as her care level varies. She eats her meals in the dining room on the 5th floor. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Lori requires 1 team member to porter her in a loaner transport PCA chair. She is able to propel her wheelchair on short distances. She has refused Physio assessment on admission. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Lori can assist with participating in her personal hygiene PCA with set up of her tooth brush and wash cloth. She does require 1 team member extensive assistance to complete all other hygiene tasks. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide her reminders assistance to (use soap/water, PCA apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Intermittent assist required. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>			
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

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 		<ul style="list-style-type: none"> TOILET USE: Requires 2 team member maximal assistance to toilet and for change and change of incontinent products. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) TRANSFERRING: Lori requires Two staff using MAXI lift for transferring. Monitor for changes in status. Revision on: 11/06/2025 Revision by: Blanche Erika Bureros (Registered Practical Nurse) ORAL CARE: Lori is EDENTULOUS. She needs set up assistance with oral care. May require 1 team member to complete. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) FOOT CARE: REGISTERED STAFF to complete toenail care every on bath day and as needed. Report long toe nails or other abnormalities as noted. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) 	PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Lori Medical Treatment and End of Life Care Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To support and honor Lori expressed wishes and beliefs through to the End of Life. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026 	<ul style="list-style-type: none"> CPR: Lori wishes to have DO NOT ATTEMPT CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 11/20/2025 Revision by: Hetal Patel (RN) 		

Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)	Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Diagnosis

Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified (F32.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Oedema, unspecified(R60.9), Alzheimer's disease, unspecified(G30.9), Lipid storage disorder, unspecified(E75.6), Resistance to other specified extended spectrum betalactam antibiotics(U82.28), Chronic intractable pain(R52.1), Obesity, unspecified(E66.9), Migraine, unspecified(G43.9), Other fusion of spine, multiple sites in spine(M43.20), Other and unspecified intestinal obstruction (K56.6), Acquired absence of genital organ(s)(Z90.7), After-cataract(H26.4), Presence of artificial hip(Z96.60), Hyperkalaemia(E87.5), Acute renal failure, unspecified(N17.9), Acidosis(E87.2), Poisoning by other and unspecified narcotics(T40.6)


Allergies

Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolides and Ketolides, Sulfa Antibiotics

Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Oglan, Lori (922131005665)	Admission Date	10/08/2025	Location	5 512 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by (history of nervousness/anxiety, suspicious of others), persistent anger with self or others related to Decline in Health Condition, Alzheimer's Disease Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To decrease the episodic frequency of negative Mood symptoms by next review date. DRS score will be less than 1. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Balubhai for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> RESIDENT STRENGTHS: Build on Balubhai effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <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: 10/15/2025 Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level . Most Current MDS Pain Score is 0. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Target Date: 12/31/2025	<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 Nurse	
<ul style="list-style-type: none"> Strength (Bicycle/peddler) Training Revision on: 10/08/2025 Revision by: Shina Wadhwa (Physical Therapist)	<ul style="list-style-type: none"> Increase strength for B/L LE from 3+/5 to 4/5 in next 3months. Revision on: 10/08/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/31/2025	<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: 10/08/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
<ul style="list-style-type: none"> Balance Training Revision on: 10/08/2025 Revision by: Shina Wadhwa (Physical Therapist)	<ul style="list-style-type: none"> Increase Tinetti scores from 14 to 17 in next 3 months; Revision on: 10/08/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/31/2025	<ul style="list-style-type: none"> 1:1 balance training with wall bar/walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week 1:1 assist gait training with RW, rest breaks as needed, cue for proper foot clearance and heel toe pattern and proper use of brakes, Distance as best tolerated; 2-3 x a week; Revision on: 10/08/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	

Allergies	No Known Allergies	D.O.B.	08/15/1945	Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described (E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Patel, Balubhai (922131005664)	Admission Date	10/02/2025	Location	5 501 B	

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
• Nutrition Risk Level		• Balubhai will be adequately nourished aeb consuming >75% at meals and snacks through to next review date Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/31/2025 • Will weigh within GWR 64-70 kg through to next review date Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/31/2025 • Balubhai will be adequately hydrated aeb drinking at least 80% of total fluid requirement 1600 ml/day (25 ml/kg using 64 kg weight) through to next review date. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/31/2025	• Labelled Item Breakfast: banana daily Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA Registered Practical Nurse RN	D
			• Labelled Item Dinner: crustless peanut butter sandwich daily Revision on: 11/11/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA Registered Practical Nurse RN	E
			• Labelled Item Lunch: crustless cheese sandwich daily Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA Registered Practical Nurse RN	D
			• NUTRITION RISK: Balubhai is moderate risk level. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))				Dietitian (RD)	
			• DIET ORDER: Balubhai will receive regular diet, regular texture - see dining instructions Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA	
			• FLUID CONSISTENCY: Balubhai drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/25/2025 Revision by: Holly Laasanen (Dietitian (RD))				Diet PCA	
			• FLUID TARGET: Encourage Balu to drink a minimum of 1280 ml/day Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA	
			• DINING INSTRUCTIONS: - No beef or pork - Cut food into small pieces - Add sauce/gravy when available to moisten food - Encourage slow pace of eating/drinking Revision on: 11/25/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse	
			• FOOD PREFERENCES: No beef or pork				PCA	
			Allergies	No Known Allergies			D.O.B.	08/15/1945
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Patel, Balubhai (922131005664)			Admission Date	10/02/2025	Location	5 501 B	

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level			Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH CALORIE/PROTEIN IN MEALS: Offer special-labelled items AND standard menu items at meals. Encourage him to try both. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 60 ml Resource 2.0 TID Revision on: 11/13/2025 Revision by: Holly Laasanen (Dietitian (RD))			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, Alzheimer Disease Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To promote adequate rest/sleep for Balubhai based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/06/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/31/2025	• PREFERENCE: Snack prior to bed Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • REST PATTERN: Preferred bedtime: around 9:00pm, usual wake time: no specific time and takes a short nap. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Target Date: 12/31/2025	• COMMUNICATION: Involve/ collaborate with (Balubhai)/SDM in decision making of diabetes care management. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. • MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 10/02/2025			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM 		<ul style="list-style-type: none"> To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Balubhai)/SDM in decision making of thyroid care management. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> 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: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to: Arteriosclerotic Heart Disease Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with Arteriosclerotic Heart Disease through to the next review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Arteriosclerotic Heart Disease for changes to health status and alteration or complications affecting cardiac function. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MEDICATION: Administer medication for Arteriosclerotic Heart Disease as per MD Order and monitor for side effects. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		Registered Practical Nurse RN	
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related 		<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication 	<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 			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
to use of (multi-pharmacy, etc.) Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		used each day through to the next review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	complications affecting functioning or quality of life. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
• BOWEL Continence - Balubhai is continent and has self recognition of urge to defecate. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• Balubhai to remain continent of bowels through next review date Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted. PCA • TOILETING: Balubhai requires one staff member to assist in transferring him to the PCA toilet for bowel movement. Each shift, staff to document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
• URINARY (Mixed) INCONTINENCE related to Alzheimer's disease Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• Balubhai will receive support to (use toilet, commode) and promote urinary continence each shift through to the next review. Revision on: 10/06/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/31/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is (USUALLY continent). Report change to level as noted. PCA Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
• Risk for Impaired SKIN INTEGRITY related to Diabetes Mellitus Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 12/31/2025	• 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			
• Balubhai is at high risk for ELOPEMENT related Hx of packing his bag and try to leave home, elopement x3 and found down the street		• To promote Balubhai safety and minimize risk for episode of elopement each day through next review date.	• ALERT: Balubhai 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: 10/02/2025			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	Revision by: Maryola Perion (RN) • DIVERSION ACTIVITY: Resident responds well to (playing music, doing puzzles, reading, conversing, singing, watching TV, etc.) to divert attention when exit seeking. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Balubhai away from elevator or exit doors as needed. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		PCA	
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need), history of hallucination (talking to himself & having a conversation, answering his own questions) & delusions (he has a flight to India and needs to go home, will often say he has a home in Toronto and needs to visit his friend there) related to Symptom Progression of Dementia/Alzheimer</p> <p>Revision on: 10/02/2025 Revision by: Maryola Perion (RN)</p>		<p>• To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 2. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025</p> <p>• Balubhai will be supported to adjust to his/her new environment to lower risk of triggering former (WANDERING, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Balubhai for indications to change in or for escalating expressive behaviour risk. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (swear, calling names, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Balubhai is heard swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 10/02/2025 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 expressions of behaviour include (S confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</p> <p>Balubhai likes to listen classic Indian Hindi music especially singer Lata Mangeshkar Revision on: 10/03/2025 Revision by: Gurjit Kaur (RN) • RESISTANCE to Care Need: If Balubhai is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered</p>			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need), history of hallucination (talking to himself & having a conversation, answering his own questions) & delusions (he has a flight to India and needs to go home, will often say he has a home in Toronto and needs to visit his friend there) related to Symptom Progression of Dementia/Alzheimer</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>		<div>Staff.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• WANDERING: Permit Balubhai to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</div> <div>Revision on: 10/15/2025</div> <div>Revision by: Maryola Perion (RN)</div>	Registered Practical Nurse RN			
<div>• Altered VISION related to use of eyeglasses.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• Balubhai supported to use eyeglasses for vision correction daily through to the next review date.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 12/31/2025</div>	<div>• EYEGLASSES: Balubhai wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>	PCA			
<div>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Alzheimer's disease, minimal difficulty hearing.</div> <div>Revision on: 10/02/2025</div>	<div>• Balubhai will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review</div>	<div>• PRIMARY LANGUAGE: Balubhai primary language is English. He is able to speak/understand English.</div> <div>2nd Language: Gujarati</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>				
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
Revision by: Maryola Perion (RN)	date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025 • Balubhai will be supported to make basic needs known each day through to the review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 10/14/2025 Revision by: Maryola Perion (RN)					
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Alzheimer's Disease. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)	• Balubhai will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Balubhai is feeling lost or in confused state. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.	Registered Staff				
• Increased risk for FALLS related to History of falls, unsteady gait. Revision on: 10/02/2025 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. Target Date: 12/31/2025	• Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls. Revision on: 12/08/2025 Revision by: Chelsea Campbell-Wright (ADOC) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker Revision on: 10/02/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN PCA PCA PCA	D/E/N			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B	

Care Plan Report

[illegible]

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, Alzheimer's disease. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PERSONAL HYGIENE: Balubhai is able to wash/dry his face and hands, brush his teeth with staff to set up and supervise. One staff extensive assistance with peri care. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <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. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TOILET USE: Balubhai requires one staff Extensive to assist with transferring on and off the toilet and adjusting his clothes, providing period care. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRANSFERRING: transfers with 1 person physical assistance. Monitor for changes in status. Revision on: 10/06/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> ORAL CARE: Balubhai has his own TEETH and is able to do his own oral care with staff to set up and provide supervision. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> SHAVING - Balubhai prefers to shave every other day and as needed with staff to set up and provided supervision. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)	PCA	D
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Balubhai Medical Treatment and End of Life Care Revision on: 10/02/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 12/31/2025	<ul style="list-style-type: none"> CPR: Balubhai wishes to have CPR and TRANSFER to hospital. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		

Allergies	No Known Allergies	D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre	Print Date	12/11/2025		
Resident	Patel, Balubhai (922131005664)	Admission Date	10/02/2025	Location	5 501 B

Care Plan Report


--	--	--

Diagnosis

Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, unspecified(E03.9), Other specified surgical follow-up care(Z48.8)

Allergies	No Known Allergies	D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Patel, Balubhai (922131005664)	Admission Date	10/02/2025	Location	5 501 B

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<ul style="list-style-type: none"> Potential for altered bone density related to diagnosis of OSTEOPOROSIS. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> To treat and minimize complications associated with OSTEOPOROSIS through to the next review date. Target Date: 03/05/2026 	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Charmaine)/SDM in decision making of osteoporosis care management. Revision on: 12/05/2025 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				
<ul style="list-style-type: none"> Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care/eat related to Dementia Revision on: 12/05/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> To promote safety for Charmaine and/or others during each episode of (wandering, disrobing, verbal, physical or resistive to care expressed behaviours) through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026 To decrease the episodic frequency of Expressive Behaviours by the next review date. ABS score will be less than 5. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) Target Date: 03/05/2026 Charmaine will be supported to adjust to her new environment to 	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Charmaine for indications to change in or for escalating expressive behaviour risk. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) TRIGGERS leading to PHYSICAL history of grabbing her daughter by the throat, making fists at the team with care, frustration with other residents, hitting staff member as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) PHYSICAL Behaviour: If Charmaine is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Redirect other residents away from Charmaine is she is becoming aggressive. Seek Registered Staff assistance. Revision on: 11/13/2025 Revision by: Chelsea Campbell-Wright (ADOC) TRIGGERS leading to VERBAL yelling, calling names as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) VERBAL Behaviour: If Charmaine is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. 					
Allergies	No Known Allergies	D.O.B.	12/28/1951	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre			Print Date	12/11/2025		
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location		5 521 B
Last Care Plan Review Completed:		12/05/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care/eat related to Dementia</div> <div>Revision on: 12/05/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>lower risk of triggering former wandering, disrobing, verbal, physical or resistive to care expressed behaviours behaviour episodes through to the next review.</div> <div>Revision on: 08/28/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 03/05/2026</div>	<div>Redirect Charmaine away from resident she is upset with. Attempt to resolve her concern. Report episode to Registered Staff.</div> <div>Revision on: 11/07/2025</div> <div>Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication) as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight.</div> <div>Revision on: 08/28/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• RESISTANCE to Care Need: If Charmaine is declining to (bathe, change clothes, take medications, eat) re-approach in 10-15 minutes. Report episode to Registered Staff.</div> <div>Revision on: 08/28/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRIGGERS leading to SOCIALLY Inappropriate (disrobing and laying in her doorway or on the ground, walking around naked) as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight.</div> <div>Revision on: 08/28/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• SOCIALLY Inappropriate Behaviour: If Charmaine is noted to walking around naked, laying naked on her floor, disrobing gently redirect her (to focus on task at hand, to move to quieter area, etc., or specify distraction activity).</div> <div>Revision on: 08/28/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>				
<div>• Potential to experience alteration in MOOD as exhibited by making negative statements, repetitive anxious complaints, persistent anger with self or others, Past history of self harm, anxiety related to Anxiety disorder- possible sexual abuse history but never confirmed, loss of spouse, Dementia.</div>	<div>• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 1.</div> <div>Revision on: 12/05/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 03/05/2026</div>	<div>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Charmaine for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</div> <div>Revision on: 08/28/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• RESIDENT STRENGTHS: Build on Charmaine effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities.</div> <div>Revision on: 08/28/2025</div>				
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision on: 12/05/2025 Revision by: Maryola Perion (RN)		Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Modify environment to support MOOD STABILITY (reduce noise, etc.) Revision on: 12/05/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • SUICIDAL IDEATIONS: Report to Registered Staff IMMEDIATELY if Charmaine expresses thoughts to harm to self. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential for Persistent PAIN and alteration in comfort level related to history of MVA resulting in chronic complaints of hip pain (right hip), back pain. LTCF pain score of 0. Revision on: 12/05/2025 Revision by: Maryola Perion (RN)	• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 03/05/2026 • Promote RAI Pain Score of 0 through to the next review. Target Date: 03/05/2026	• 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. • NON VERBAL CUES of PAIN for Charmaine include - (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: 09/13/2025 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: 09/13/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse PCA Registered Practical Nurse RN		
• Charmaine is on isolation related to room mate being Covid 19 (+) Onset date: 11/29/25 Revision on: 12/01/2025 Revision by: Maryola Perion (RN)	• To effectively treat and manage RESPIRATORY INFECTION without further complications by the target date. Revision on: 12/01/2025 Revision by: Maryola Perion (RN) Target Date: 03/05/2026	• MONITORING: Utilize holistic perspective of monitoring resident for signs/symptoms, hydration status, overall health condition, process of healing, etc. until stable. Revision on: 12/01/2025 Revision by: Maryola Perion (RN) • PPE PRECAUTIONS: Precaution identified as CONTACT & DROPLET for RESPIRATORY INFECTION and requires use of the following PPE: GOWN, MASK,			
Allergies	No Known Allergies	D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)	Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:	12/05/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		GLOVES & FACESHIELD for direct care, handling soiled clothes and linens, disposing of incontinent product, etc. Revision on: 12/01/2025 Revision by: Maryola Perion (RN)				
• Charmaine DECLINES PARTICIPATION in structured programs related to personal choice. ISE score = 6/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	• Charmaine participates in Independent/Self-Directed activities monthly through to the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 03/05/2026	• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, knitting, drawing, crossword puzzles, word searches, smoking on the patio, patio visits.) Revision on: 11/27/2025 Revision by: Nick Carroll (Recreation Aide) • FRIENDLY VISIT: Provide her one to one visits as tolerated. Revision on: 11/27/2025 Revision by: Nick Carroll (Recreation Aide) • INVITATION: Offer an invite to structured programs scheduled in the home. Often enjoys movies, music, funny videos, travel videos in the afternoons. Revision on: 11/27/2025 Revision by: Nick Carroll (Recreation Aide)				
• Potential for altered hematologic symptoms or complications related to diagnosis of Iron deficiency ANEMIA Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	• To treat and/or minimize complications associated with ANEMIA each day through to the next review date. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 03/05/2026	• COMMUNICATION: Involve/collaborate with (Charmaine)/SDM in decision making of hematologic care management for Anemia. Revision on: 09/13/2025 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			
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia. Revision on: 09/13/2025	• Charmaine will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care	• BATHING: Charmaine prefers shower) on Wed. and Sunday in the evening shift. She can complete the shower on her own with supervision and set up. Will wash herself up. Needs encouragement as Charmaine will refuse shower.	PCA			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
Revision by: Maryola Perion (RN)		needs are met each day through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	Nail care to be provided on shower/bath day. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) • BED MOBILITY: Charmaine is independent with her bed mobility. Team to monitor for changes. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Charmaine is able to dress herself Independently with staff to set up her clothings. Team to monitor for changes. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) • EATING: Charmaine is independent with eating, set up assistance from the staff. Team to monitor for changes. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Charmaine is independent with no gait aid. Has a walker but does not use it. Requires one staff Supervision when going off the floor to the patio or activities on the main floor. Revision on: 12/05/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Charmaine completes her own personal hygiene care. Team to monitor for changes. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: Charmaine is able to independently complete task of Hand Hygiene each day. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOILET USE: Charmaine toilets herself. Team to monitor for changes. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFERRING: Charmaine is independent with her transferring. Revision on: 08/28/2025					PCA	
Allergies	No Known Allergies			D.O.B.	12/28/1951	Physician	Albert Patrick Ng		
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre					Print Date	12/11/2025		
Resident	Poisson-Kani, Charmaine (922131005659)			Admission Date	08/28/2025	Location	5 521 B		
Last Care Plan Review Completed:		12/05/2025							

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)</div>		<div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• ORAL CARE: Charmaine has no bottom teeth and has upper dentures full set. She PCA can complete her own oral hygiene. Team to support with denture cleaning. Resident may refuse assistance. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</div>				
<div>• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility). Revision on: 09/03/2025 Revision by: Suzanne Azar (RN)</div>	<div>• Charmaine 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: 09/03/2025 Revision by: Suzanne Azar (RN) Target Date: 03/05/2026</div>	<div>• 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: 09/03/2025 Revision by: Suzanne Azar (RN)</div> <div>• 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: 09/03/2025 Revision by: Suzanne Azar (RN)</div> <div>• BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility. Monitor every shift. Revision on: 09/03/2025 Revision by: Suzanne Azar (RN)</div>	PCA	D/E/N		
<div>• Charmaine has potential to experience a safety hazard/burn injury related to personal SMOKING habits smoking in her room in retirement, burn marks in her mattresses before admission. Family is</div>	<div>• Charmaine will be safe when choosing to smoke through to the next review Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI</div>	<div>• COMMUNICATION: Involve Charmaine 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.</div> <div>The family is providing her with smoking materials.</div>	Social Worker			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
providing smoking materials Revision on: 08/31/2025 Revision by: Maryola Perion (RN)		Coordinator) Target Date: 03/05/2026	Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • CHECK: Room and personal belongings to be checked for smoking materials every shift. • STORAGE: Smoking materials to be appropriately stored by Registered staff in the med room and staff (that brings her down to the courtyard) to return cigarettes/lighter/matches after each smoke break. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • SMOKING SUPERVISION: Charmaine will be smoking ONLY in the presence of a staff member in the courtyard. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • SMOKING CONTRACT: Charmaine has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)				PCA Clerk Social Worker Social Worker	D/E/N
• Nutrition Risk Level		• Charmaine will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026 • Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/05/2026	• LABELLED SNACK HS: assorted deli sandwich daily per resident's preference Revision on: 11/20/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Charmaine is moderate risk level. Revision on: 11/27/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Charmaine will receive regular diet, regular texture Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID CONSISTENCY: Charmaine drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID TARGET: Encourage Charmaine to drink a minimum of 1510 ml/day Revision on: 09/09/2025				PCA Registered Practical Nurse RN Dietitian (RD) PCA PCA PCA	E
Allergies	No Known Allergies			D.O.B.	12/28/1951	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	12/11/2025	
Resident	Poisson-Kani, Charmaine (922131005659)			Admission Date	08/28/2025	Location	5 521 B	
Last Care Plan Review Completed:		12/05/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Nutrition Risk Level	• Charmaine will be adequately hydrated aeb drinking at least 80% of TFR: 1888 ml/day (25 ml/kg) through to next review date. Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/05/2026	Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 11/26/2025 Revision by: Shereen Khan (Dietitian (RD))	PCA			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Anxiety, Dementia Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Charmaine based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	• PREFERENCE: Charmaine likes to have warm drink, watch TV, have a snack) to fall asleep. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • REST PATTERN: Preferred bedtime 11pm, usual wake time 8am and daytime naps frequently at her own discretion. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITOR: Monitor Charmaine sleeping patterns. Document when awake or asleep. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	Q1H		
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension	• To treat and minimize signs/symptoms or complications associated with hypertension through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	• 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: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for hypertension as per MD Order and monitor for side effects. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN			
• Potential for CONSTIPATION related to history of constipation.	• Charmaine will have regular soft formed bowel movements	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/	Registered Staff			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	every 1-2 days through to the next review. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	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	
• BOWEL Continence - Charmaine is continent and has self recognition of urge to defecate. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Charmaine to remain continent of bowels through next review date Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Charmaine 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: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA	
• URINARY Continence - Charmaine is continent and has self recognition of urge to void. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Charmaine will maintain continence level through next review date Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	• URINARY Continence Level is: CONTINENT • SELF TOILETING: Charmaine toilets self. Each shift ask if he/she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA PCA	
• Risk for Impaired SKIN INTEGRITY related to Frailty	• To protect and maintain skin integrity each day through to the next review. Target Date: 03/05/2026	• 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	
• Charmaine is at high risk for ELOPEMENT related to new environment Revision on: 08/28/2025	• To promote Charmaine safety and minimize risk for episode of elopement each day through	• ALERT: Charmaine has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately.		
Allergies	No Known Allergies	D.O.B.	12/28/1951	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)	Admission Date	08/28/2025	Location 5 521 B
Last Care Plan Review Completed:		12/05/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Charmaine away from elevator or exit doors as needed. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Altered COMMUNICATION as exhibited by limitations to comprehension, related to Hard of hearing Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Charmaine will continue to freely express self and adequately comprehend information each day through to the next review period. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	• PRIMARY LANGUAGE: Charmaine's primary language is English. She is able to speak/understand English. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • HARD of HEARING and does not use hearing aids: Strategies to support hearing are (speak clearly, ensure her attention and speak slowly when needed) Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Charmaine needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)		PCA	
• Altered VISION related to Presbyopia, History of Cataracts in both eyes with surgery. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Charmaine supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	• EYEGLASSES: Charmaine wears reading eyeglasses at her discretion. Assist to clean eyeglasses as needed and store in night table drawer when sleeping. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • READING: Charmaine uses large print material to aid with reading. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Charmaine will be supported to maintain cognitive function through the review date. Current CPS is 2. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 03/05/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Charmaine is feeling lost or in confused state. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Charmaine can comprehend and follow. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025				

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, unsteady gait, non-compliance with gait aid. Revision on: 08/28/2025 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. Target Date: 03/05/2026	<ul style="list-style-type: none"> Nightlight in the resident's room to improve visibility during evening and nighttime hours and reduce the risk of falls. CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. ENVIRONMENT: Secure environment reduce clutter to reduce fall risk for Charmaine FOOTWEAR: Ensure Charmaine wears appropriate footwear when ambulating and transferring. SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. 	RN Registered Practical Nurse PCA PCA PCA	D/E/N
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Charmaine Medical Treatment and End of Life Care Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To support and honor Charmaine expressed wishes and beliefs through to the End of Life. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/05/2026	<ul style="list-style-type: none"> CPR: Charmaine wishes Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		

Allergies	No Known Allergies	D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)	Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025			

Care Plan Report


--	--	--

Diagnosis

Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), Acquired absence of genital organ(s)(Z90.7), Osteoporosis, unspecified(M81.9)

Allergies	No Known Allergies	D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Poisson-Kani, Charmaine (922131005659)	Admission Date	08/28/2025	Location	5 521 B
Last Care Plan Review Completed:		12/05/2025			

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: 11/25/2025 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. Target Date: 02/25/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Anna Maria)/SDM in decision making for GERD Management. Revision on: 11/25/2025 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: 11/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> 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. <ul style="list-style-type: none"> MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects. 	PCA Registered Staff Registered Staff			
<ul style="list-style-type: none"> Anna Maria is at high risk for ELOPEMENT related to exit seeking, going towards the exit doors/elevators asking for keys to open the doors, wanting to go home. Revision on: 11/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote Anna Maria safety and minimize risk for episode of elopement each day through next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	<ul style="list-style-type: none"> ALERT: Anna 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: 11/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ELOPEMENT ALERT: Redirect Anna Maria away from elevator or exit doors as needed. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation Revision on: 11/21/2025 Revision by: Mitchell Atkinson (Recreation Aide)	<ul style="list-style-type: none"> Anna Maria 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: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> BATHING: Anna Maria prefers Shower on Wednesday and Saturday Afternoon. Anna participates in her shower and requires 1 team member to provide limited assistance if using the shower. Often refuses and she will independently give herself a cleansing in her washroom. Anna does not like a tub bath. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) <ul style="list-style-type: none"> BED MOBILITY: Anna Maria is independent with her movement in bed. 	PCA PCA			
Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Vitali, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A	
Last Care Plan Review Completed:		11/25/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Target Date: 02/25/2026	<p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DRESSING: Anna Maria is able to dress herself. She can dress both her upper and lower body. Team to monitor for changes. PCA</p> <p>Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Anna Maria independently with set up on the wildflower lane dining area. PCA</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Anna Maria is independent with her locomotion. Supervision when not on the home area is required. PCA</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Anna Maria is able to complete her hygiene care. May need set up, reminders, cues and oversight. Monitor for changes. PCA</p> <p>Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide reminders assistance to apply hand sanitizer for hand hygiene. PCA</p> <p>Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• TOILET USE: Anna Maria is independent with her toileting and continence care needs. PCA</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Anna Maria is an independent transfer no staff assistance PCA</p> <p>Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• ORAL CARE: Anna Maria has her own teeth. Anna has a partial bridge, however often does wear it. Anna Maria is independent with cues and reminders for her oral care PCA</p> <p>Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p>			
• Expressed Wishes and Beliefs related to Anna Maria Medical Treatment and End of	• To support and honor Anna Maria expressed wishes and	• CPR: Anna wishes express NO CPR, however TRANSFER to hospital decision will be made at the time.			
Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Vitali, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025			

Care Plan Report

[illegible]

Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Vitalli, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia</p> <p>Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)</p>	<p>• Anna Maria will be supported to maintain cognitive function through the review date. Current CPS is 3.</p> <p>Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026</p>	<p>• ORIENTATION: Gently reorient to (person, place, time) as needed when Anna Maria is feeling lost or in confused state.</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• CUE TASKS: Break tasks into manageable subtasks, Anna Maria can comprehend and follow.</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.</p>	Registered Staff		
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Dementia</p> <p>Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)</p>	<p>• To promote safety for Anna Maria and/or others during each episode of Expressive Behaviour through to the next review date.</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026</p> <p>• To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 2.</p> <p>Revision on: 11/25/2025 Revision by: Maryola Perion (RN) Target Date: 02/25/2026</p>	<p>• TRIGGERS leading to PHYSICAL (Hitting, swatting, slapping, pushing) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space)</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Anna Maria is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance.</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intentions)</p> <p>Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Anna Maria 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: 08/15/2025 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) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement,</p>			
Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Vitalli, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Dementia</p> <p>Revision on: 11/19/2025</p> <p>Revision by: Shina Wadhwa (PT - Physiotherapist)</p>		<p>fearfulness.)</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Anna Maria is declining to (bathe, change clothes, take medications, eat.) re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate (yelling, reportingly calling on the all bell/alert system in the past) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SOCIALLY Inappropriate Behaviour: If Anna Maria is noted to (to be calling on the call bell, yelling) gently redirect her (to focus on task at hand, to move to quieter area, try to engage her in an activity on the home area, assess for unmet needs etc).</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• WANDERING: Permit Anna Maria to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DE-ESCALATION: Anna calms with going for walk, distraction, re-direction, watching tv like I love lucy, italian music, playing cards, playing bingo, provide apple sauce when looking for medications</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Chelsea Campbell-Wright (ADOC)</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: 11/25/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• DELUSION: Believes that her husband owns this place she leaves. This can cause her to become agitated and expressive.</p>	<p>PCA</p> <p>Registered Practical Nurse</p> <p>Registered Practical Nurse</p>		
Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Vitali, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Dementia</p> <p>Revision on: 11/19/2025</p> <p>Revision by: Shina Wadhwa (PT - Physiotherapist)</p>			<p>Team to listen to her. Do no argue with her. Offer support and reassurance. Inform MD if expressions interfere with daily functioning.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• SPECIAL CONSIDERATIONS: Anna is used to having an alert button. Provided Anna with a wanderguard to support her.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Chelsea Campbell-Wright (ADOC)</p>			RN	
<p>• Altered VISION related to Presbyopia</p> <p>Revision on: 11/19/2025</p> <p>Revision by: Shina Wadhwa (PT - Physiotherapist)</p>		<p>• Anna Maria supported to use eyeglasses for vision correction daily through to the next review date.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 02/25/2026</p>	<p>• EYEGLASSES: Anna Maria wears eyeglasses. Assist to clean eyeglasses as needed</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• READING: May require large printed materials when presented with something to be read.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>			PCA	
<p>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension,) related to Dementia, hearing loss</p>		<p>• Anna Maria will be supported to maintain current communication abilities to (express self, comprehend</p>	<p>• HEARING AID; Apply/Remove to/from right or left ear/s. Anna does not like using both her hearing aids in, only one is to be applied.</p> <p>Revision on: 08/15/2025</p> <p>Revision by: Chelsea Campbell-Wright (ADOC)</p>			PCA	D/E
Allergies	No Known Allergies			D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Vitalli, Anna Maria (922131005655)			Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		information) each day through to the review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	• HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored at nursing station. Anna may refuse to have nurse store hearing aids. Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, speak loudly, Anna will lip read, Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) • INSTRUCTION GUIDANCE: Anna Maria needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential to experience alteration in CARDIAC FUNCTION related to; Coronary Artery Disease, Hypertension Revision on: 11/19/2025 Revision by: Shina Wadhwa (PT - Physiotherapist)		• To treat and minimize signs/symptoms or complications associated with Coronary Artery Disease, Hypertension through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Artery Disease, Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for Coronary Artery Disease, Hypertension as per MD Order and monitor for side effects. Revision on: 11/25/2025 Revision by: Maryola Perion (RN)		Registered Practical Nurse RN	
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Conflict with Others (Anna Maria does not like other residents in her personal space or sharing supplies/ recreation items with others. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		• Team members will support Anna Maria in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 02/25/2026	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; baking, music programs, reminiscing, walking groups, movies, parties, tea social, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • ONE to ONE: Provide her with individual visits for conversation, bedside activity, reading, reminiscing, etc. Revision on: 09/21/2025			
Allergies	No Known Allergies		D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Vitalli, Anna Maria (922131005655)		Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025				

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 Disinterest, Conflict with Others (Anna Maria does not like other residents in her personal space or sharing supplies/ recreation items with others. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		Revision by: Kameron Stewart (Recreation Aide)		
<ul style="list-style-type: none"> Nutrition Risk Level 	<ul style="list-style-type: none"> Anna Maria will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	<ul style="list-style-type: none"> Labelled Item Lunch: crustless cheese sandwich daily - encourage Anna Maria to eat this PLUS other options available at the meal Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA Registered Practical Nurse RN Dietitian (RD)	D
	<ul style="list-style-type: none"> Will weigh within realistic GWR 47-57 kg through to next review date. Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/25/2026	<ul style="list-style-type: none"> NUTRITION RISK: Anna Maria is moderate risk level. Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))		
	<ul style="list-style-type: none"> Anna Maria will be adequately hydrated aeb drinking 100% of TFR: 1188 ml/day (25 ml/kg using 47.5 kg weight) through to next review date. Revision on: 08/26/2025	<ul style="list-style-type: none"> DIET ORDER: Anna Maria will receive Regular diet, Regular texture - encourage softer options and provide crustless bread/toast Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	
		<ul style="list-style-type: none"> FLUID CONSISTENCY: Anna Maria drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> FLUID TARGET: Encourage Anna Maria to drink a minimum of 1188 ml/day Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	
		<ul style="list-style-type: none"> EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. She likes to drink water, apple juice, and coffee with sugar. Revision on: 11/11/2025 Revision by: Shereen Khan (Dietitian (RD))	PCA	
		<ul style="list-style-type: none"> DINING INSTRUCTIONS: 	Registered	
Allergies	No Known Allergies		D.O.B.	06/20/1933
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)			
Facility	Berkshire Care Centre		Print Date	12/11/2025
Resident	Vitalli, Anna Maria (922131005655)		Admission Date	08/15/2025
			Location	5 509 A
Last Care Plan Review Completed:		11/25/2025		

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved	
• Nutrition Risk Level	Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 02/25/2026	- Encourage softer options and provide crustless bread/toast - Do not serve milk, yogurt, cottage cheese, or ice cream (she strongly dislikes) Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FOOD PREFERENCES: Anna Maria enjoys eating pasta dishes, white bread, toast with jam, cheese, and fruit. Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	Practical Nurse		
• BOWEL Continence - Anna Maria is continent and has self recognition of urge to defecate. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Anna Maria to remain continent of bowels through next review date Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Anna Maria 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: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• URINARY Continence - Anna Maria is continent and has self recognition of urge to void. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Anna Maria will maintain continence level through next review date Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	• URINARY Continence Level is: CONTINENT • SELF TOILETING: Anna Maria toilets self. Each shift ask if he/she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, cognitive loss Revision on: 08/15/2025	• To promote adequate rest/sleep for Anna Maria based on identified sleep patterns/preferences each night	• PREFERENCE: Anna Maria may wish to have a warm beverage before bed and to watch T.V. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Vitalli, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)	through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	• REST PATTERN: Preferred bedtime 2000, usual wake time 0700 and daytime naps PCA when she wants to. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Potential to experience alteration in MOOD related to cognitive loss Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Anna Maria will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 02/25/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Anna Maria for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Anna Maria effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 11/25/2025 Revision by: Maryola Perion (RN)		

Allergies	No Known Allergies	D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Vitali, Anna Maria (922131005655)	Admission Date	08/15/2025	Location	5 509 A
Last Care Plan Review Completed:		11/25/2025			

Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved	
<ul style="list-style-type: none">• STRONG PARTICIPATION : James attends most of the programs on the floor. ISE score: 4/6 Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide)	<ul style="list-style-type: none">• James will be supported to maintain participation in activities 20-25 times per month by the next review date. Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide) Target Date: 03/02/2026	<ul style="list-style-type: none">• SELF-DIRECTED ACTIVITIES: Encourage James to engage in self-directed activities such as colouring, music activities & Netflix especially Yellowstone. Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none">• ONE to ONE: Provided James with colouring materials, one to one exercise, conversation about animals and his grandchildren. Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none">• FAMILY INVOLVEMENT: Has family that visits often and are involved. Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none">• SOCIAL INTERACTION: James prefers one to one visits over group programs. Encourage him to participate in some smaller groups as he can tolerate. Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide)			Recreation Aide		
<ul style="list-style-type: none">• Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 12/07/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• James will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 12/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026 <ul style="list-style-type: none">• To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 12/07/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (James/SDM) for decision making regarding constipation management. Revision on: 12/07/2025 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 Plan. <ul style="list-style-type: none">• BOWEL PROTOCOL: In place as per MD order			Registered Staff		
<ul style="list-style-type: none">• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD).	<ul style="list-style-type: none">• To treat and/or minimize complications associated with GERD each day through to the next review date.	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (James)/SDM in decision making for GERD Management. Revision on: 12/07/2025 Revision by: Maryola Perion (RN)					
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder(F43....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	12/11/2025	
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision on: 12/07/2025 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 management of GERD for discomfort/ complications or changes to health status. Revision on: 12/07/2025 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			
<ul style="list-style-type: none">• Potential to experience alteration in MOOD as exhibited by frustration, anxiety, restlessness, nervousness, persistent anger to self or others related to Loss of Independence, Dementia, anxiety, BPD. Revision on: 12/07/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• James will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026• To decrease the episodic frequency of (negative Mood symptoms) by the next review date. DRS score will be less than 1. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026	<ul style="list-style-type: none">• Maintain personal space which is James preferred while offer care.• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of James for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)• RESIDENT STRENGTHS: Build on James effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)• ENVIRONMENT: Modify environment to support MOOD STABILITY (Reduce noise, open curtains, ambient lighting, preferred music (Motown) etc.) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)• MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none">• Potential for Expressive Behaviour of (VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need, history inappropriate sexual comments to the team prior to his admission),	<ul style="list-style-type: none">• To promote safety for James and/or others during each episode of Expressive Behaviour through to the next review date.	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of James for indications to change in or for escalating expressive behaviour risk. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)• TRIGGERS leading to PHYSICAL (Hitting, Punching, Slapping,) as expression of				
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
hit/punched registered staff arm/hand, yelling related to history of multiple strokes and mixed dementia, BPD. Revision on: 12/07/2025 Revision by: Maryola Perion (RN)		Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026 • To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 7. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026 • James will be supported to adjust to his new environment to lower risk of triggering former (PHYSICAL inappropriate, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026	behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • PHYSICAL Behaviour: If James 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: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • VERBAL Behaviour: If James is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 09/08/2025 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 expressions of behaviour include confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 09/17/2025 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If James is declining to (bathe, change clothes, take medications, eat.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to SOCIALLY Inappropriate (disruptive vocalizations) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • SOCIALLY Inappropriate Behaviour: If James is noted to (make loud disruptive noises in dining room/program.) gently redirect him (to focus on the task at hand, to			
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Potential for Expressive Behaviour of (VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need, history inappropriate sexual comments to the team prior to his admission), hit/punched registered staff arm/hand, yelling related to history of multiple strokes and mixed dementia, BPD. Revision on: 12/07/2025 Revision by: Maryola Perion (RN)</p>		<p>move to a quieter area or specify distraction activity). Revision on: 12/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• SEXUAL Behaviour: James demonstrates habit of unwanted (sexual comments to female staff in the past). (Monitor for comments when rendering care, 2 person for care, team to ensure safety and reapproach if note able to redirect). Report episode to Registered Staff. Revision on: 09/08/2025 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. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</p>	<p>PCA</p> <p>Registered Practical Nurse RN</p>	
<p>• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility). Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)</p>	<p>• James 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: 10/02/2025 Revision by: Suzanne Azar (RN) Target Date: 03/02/2026</p>	<p>• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of (Specify PASD).</p> <p>• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL).</p> <p>• BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with (specify; bed mobility, transfer in/out of bed). Monitor every shift. Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)</p>	<p>Registered Staff</p> <p>Registered Staff</p> <p>PCA</p>	<p>D/E/N</p>

Allergies	Shell Fish	D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Webber, James (922131005660)	Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Transfers- Sit to Stand Revision on: 09/23/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Reduce assistance needed for transfers from Sara lift to 2 person assist in next 6 months; Revision on: 09/23/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 03/02/2026	• Sit to stand : 2 person assist at the bar/walker; Slowly increase standing endurance to 45 sec x 2-5 reps; 2-3 x a week; Revision on: 09/23/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, Anxiety and Dementia Revision on: 09/19/2025 Revision by: Maryola Perion (RN)		• To promote adequate rest/sleep for James based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• REST PATTERN: Preferred bedtime 2000, usual wake time 0700 and daytime naps. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• Potential for PAIN and alteration in comfort level related to headache, Impaired Mobility. Most Current LTCF Pain Score is 1. Revision on: 09/19/2025 Revision by: Maryola Perion (RN)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 03/02/2026	• 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. • NON VERBAL CUES of PAIN for James 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: 09/14/2025 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: 09/14/2025 Revision by: Maryola Perion (RN)			RN Registered Practical Nurse PCA Registered Practical Nurse RN	
• Potential to experience alteration in CARDIAC FUNCTION related to: Coronary Artery Disease, Hypertension,		• To treat and minimize signs/symptoms or complications associated with	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Artery Disease, Hypertension for changes to health status and alteration or complications affecting cardiac function.				
Allergies	Shell Fish		D.O.B.	07/27/1957		Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	12/11/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025		Location	5 515 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
dyslipidemia. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)	(coronary artery disease and hypertension) through to the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for Coronary Artery Disease, Hypertension, dyslipidemia as per MD Order and monitor for side effects. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN		
• Potential for BOWEL INCONTINENCE related to limited mobility and cognitive impairment. James will request staff to be toileted. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)	• James will have bowel incontinence managed every shift through to the next review period. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• 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. Report change to level as noted. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: Resident uses Blue brief throughout all shifts. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff PCA PCA PCA		
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Mixed Dementia, Hx of stroke. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	• James 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: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026 • James will have ALL ADL care needs met each day through the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• BATHING: James prefers (tub bath) on (Monday and Thursday evening). Resident participates by helping to raise arms of shift weight. He requires 2 team maximal assistance. Nail care to be provided on shower/bath day. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: James is able to is able to shift weight. He requires 2 team members maximal assistance to reposition when in bed. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: James can be resistive to care and requires 2 person Maximal assistance to dress both his upper and lower body.	PCA PCA PCA		
Allergies	Shell Fish	D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Webber, James (922131005660)	Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
		Target Date: 03/02/2026	<p>May require 1 team member to try to engage him while other renders care.</p> <p>May require stop and go approach or reapproach to care. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: James is independent with set up support. Team to monitor at meals for changes. He may require one staff extensive assistance to feed him.</p> <p>James has his meals in the Wild Flower Lane dining room. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: James requires the use of a wheelchair and is dependent on the team for portering Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: James is able to participate in his care when expressed behaviours are not present. He requires 2 team member maximal assistance to complete his hygiene care needs. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide (REMINDER to total depending on his ability to follow directions) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: James requires 2 team member maximal assistance for his toileting and continence care needs. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: James requires the use of a sit to stand lift with two assistance for transfer. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</p> <p>• TRANSFER LIFT/SLING: Sit to stand lift and Yellow SIZE of sling needed for</p>					PCA	
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng			
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre				Print Date	12/11/2025			
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A			

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, Mixed Dementia, Hx of stroke. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)			<p>transfer.</p> <p>Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none">ORAL CARE: James has some missing teeth and natural teeth present. He has some implants too. He does not use dentures. <p>1 team member to complete his oral care. 12 team members to be present due to expressed behaviours.</p> <p>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none">SHAVING - James requires the team to shave him on his bathing days. He may wish not to be. 2 team member approach to care. <p>Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</p>		PCA	D
<ul style="list-style-type: none">Nutrition: Swallowing difficulty related to risk for aspiration Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">To maintain safe swallowing through to next review date Target Date: 03/02/2026To obtain or maintain adequate intake to meet estimated nutritional requirements through to next review date Target Date: 03/02/2026	<ul style="list-style-type: none">Provide diet/texture interventions as per Nutrition Risk Level			
<ul style="list-style-type: none">Alteration in skin integrity related to MASD to Groin Left and Right sides. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)		<ul style="list-style-type: none">To promote intact skin integrity through healing of MASD by December 7th 2025 Revision on: 09/08/2025 Revision by: Chelsea Campbell-	<ul style="list-style-type: none">MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD for changes to health status and alteration or complications affecting skin integrity. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)		Registered Practical Nurse RN	
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Wright (ADOC) Target Date: 03/02/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with James/SDM in decision making for treatment of skin issues. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC) • TOPICAL TX: Apply topical treatment to Left and Right Groin as MD Order. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC) • 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: 09/17/2025 Revision by: Maryola Perion (RN) 		Registered Practical Nurse Registered Practical Nurse	
• Nutrition Risk Level		<ul style="list-style-type: none"> • James will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026 • Will weigh within realistic GWR 75-85 kg through to next review date. Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/02/2026 • (resident name) will be adequately hydrated aeb drinking at least 77% of total 	<ul style="list-style-type: none"> • Labelled Item Breakfast: pudding daily Revision on: 11/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Jim is HIGH risk level. Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: James will receive regular diet, minced texture Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) • THICKENED FLUIDS: James drinks thickened fluids at moderately thick level 3 (honey-like) consistency. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID TARGET: Encourage Jim to drink at least 1500 ml/day Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 11/10/2025 		PCA Registered Practical Nurse RN Dietitian (RD) PCA PCA PCA	D
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	12/11/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
• Nutrition Risk Level	fluid requirement: 1942 ml/day (25 ml/kg) through to next review date. Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 03/02/2026	Revision by: Shereen Khan (Dietitian (RD))			
		• ADAPTIVE AIDS: Rimmed/lip plate and non-slip mat for meals.	PCA		
		Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))			
		• FOOD ALLERGY: Do not serve items containing shellfish.	PCA		
		Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))	Restorative Care Aide		
		• FOOD PREFERENCES: James likes oatmeal with brown sugar and milk. He also likes chocolate milk to drink.	PCA		
		Revision on: 12/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			
		• HIGH CALORIE/PROTEIN IN MEALS: provide Magic Cup at lunch and dinner daily	PCA	BLD	
		Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))			
		• MEDPASS SUPPLEMENTS: 1 scoop/packet Beneprotein once daily (0800) - mix in cereal or pudding at breakfast 60 ml Resource 2.0 three times daily (thickener added to supplement)			
		Revision on: 12/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			
		• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (CEREBROVASCULAR ACCIDENT) for changes to health status and alteration or complications affecting neurological function.			
		Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
		• URINARY (functional) INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
		• To treat and minimize signs/symptoms or complications associated with CEREBROVASCULAR ACCIDENT through to the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026			
• URINARY (functional) INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• James will have urinary incontinence managed every shift through to the next review period. Revision on: 09/08/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level.			
		Revision on: 09/17/2025 Revision by: Maryola Perion (RN)			
		• URINARY Continence level is (Incontinent). Report change to level as noted.	PCA		
Allergies	Shell Fish	D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Webber, James (922131005660)	Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses Blue brief throughout all shifts. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed.	PCA PCA			
• Risk for Impaired SKIN INTEGRITY related to Frailty, Incontinence	• 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			
• Altered COMMUNICATION as exhibited by limitations to (self expressions, limited decision making and understanding) related to aphasia and cognitive loss Hard of hearing Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• James will be supported to make basic needs known each day through to the review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 03/02/2026	• HARD of HEARING and does not use hearing aids: Strategies to support hearing are (speak clearly, ensure visual contact, speak slowly) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: James needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Mixed Dementia Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• James 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: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 03/02/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when James is feeling lost or in confused state. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL ITEMS: Keep in a consistent place in his room. Environmental CUES- Name plate, Colour of the hallway. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	12/11/2025	
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			• CUE TASKS: Break tasks into manageable subtasks, James can comprehend and follow. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to (cognitive loss- Mixed dementia). Limitation of cognitive function/altered judgement Revision on: 09/08/2025 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. Target Date: 03/02/2026	• 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: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 09/17/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) • FLOOR MAT: Position on floor next to left side of bed to lower risk of injury. Revision on: 10/13/2025 Revision by: Lucy(Xifeng)Lu (RPN) • ALARM: Small clip Alarm ON every shift: when in bed and wheelchair for safety. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/11/2025 Revision by: Lara Ismail (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)			PCA Registered Practical Nurse RN PCA PCA PCA	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 03/02/2026			

Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder(F43.1), Dysphasia and aphasia(R47.0), Unspecified dementia(F03), Benign hypertension(I10.0), Lipid storage disorder, unspecified(E75.6), Other congenital malformations of cardiac septa(Q21.8), Paraesthesia of skin(R20.2), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Emotionally unstable personality disorder(F60.3)

Allergies	Shell Fish	D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	12/11/2025
Resident	Webber, James (922131005660)	Admission Date	09/08/2025	Location	5 515 A