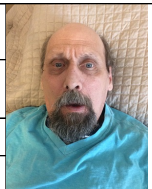


Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Alteration in skin integrity related to Eczema on UPPER RIGHT INNER ARM (#14), RIGHT INNER FOREARM (#15) and LOWER RIGHT ABDOMEN (#16) Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of Eczema on UPPER RIGHT INNER ARM (#14), RIGHT INNER FOREARM (#15) and LOWER RIGHT ABDOMEN (#16) Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) Target Date: 11/17/2025	<ul style="list-style-type: none"> • MONITORING: Utilize the holistic perspective of continuous monitoring of Stanley with Eczema on UPPER RIGHT INNER ARM (#14), RIGHT INNER FOREARM (#15) and LOWER RIGHT ABDOMEN (#16) for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Stanley Barchan (Resident) in decision making for treatment of skin issues. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)	Registered Practical Nurse RN		
<ul style="list-style-type: none"> • Risk for Impaired Skin Integrity r/t: Incontinence, Impaired Mobility, Use of containment product, Skin Desensitized to Pain/Pressure, History or Coccyx Ulcer. Revision on: 09/17/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<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. <ul style="list-style-type: none"> • HEALTH EDUCATION: Engage resident/SDM in health education regarding prevention of skin impairment and management of his coccyx injury. Resident to not scratch the site as it may worsen the area Revision on: 08/29/2023 Revision by: Idylle Labrado (RPN)	PCA		
<ul style="list-style-type: none"> • STRONG PARTICIPATION in Activities. ISE 6/6 Revision on: 09/11/2025 Revision by: Megan Pipe (Recreation Aide)	<ul style="list-style-type: none"> • Stanley will be supported to maintain participation in activities 30-35 times per month by the next review date. Revision on: 06/12/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 12/17/2025 <ul style="list-style-type: none"> • Stanley will maintain ISE score 	<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite Stanley to programs of personal interest; Exercise programs, music programs (Happy hour, music trivia), Religious programs, Bingo, games, movie night, special events, etc. Revision on: 07/09/2024 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none"> • SELF-DIRECTED ACTIVITIES: Encourage Stanley to engage in self-directed activities such as watching t.v, listening to music, visiting with staff and other residents, etc. Revision on: 07/09/2024 Revision by: Mitchell Atkinson (Recreation Aide)			
Allergies	No Known Allergies	D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)	Admission Date	11/07/2019	Location	8 818 A
Last Care Plan Review Completed:		09/17/2025			



Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		of 3/6 by the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• ASSISTANCE: Provide assistance/encouragement to get Stanley to scheduled activities - offer reminders, invitations and help with portering, etc. Revision on: 04/16/2024 Revision by: Laura Morris (Restorative Care Aide) • ONE to ONE: Provide Stanley with individual visits for (conversation, listening to music, reminiscing, etc.) Revision on: 04/16/2024 Revision by: Laura Morris (Restorative Care Aide)				
• Potential for Acute PAIN and alteration in comfort level related to Stroke with left side weakness, Seizure disorder, impaired mobility. Most Current LTCF Pain Score is 0. Revision on: 06/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• Promote LTCF Pain Score of 0 through to the next review. Revision on: 06/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with Stanley/SDM about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 11/29/2019 Revision by: Maryola Perion (Registered Nurse) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.			Registered Staff RN Registered Practical Nurse	
• Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy. Revision on: 05/05/2024 Revision by: Elsie Calumpang (RN)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using poly-pharmacy for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up) • PREFERENCE: Stanley prefers to receive medication whole with water. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
• Increased risk for FALLS related to: History of falls, Stroke with Left side weakness, Seizure Disorder. History of falls.		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.	• CALL BELL: Place call bell within resident's reach to RIGHT side if needed, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Chelsea Campbell-Wright (IPAC LEAD)			PCA	D/E/N
Allergies	No Known Allergies		D.O.B.	08/16/1957		Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)		Admission Date	11/07/2019		Location	8 818 A
Last Care Plan Review Completed:		09/17/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 01/29/2024 Revision by: Maryola Perion (RN)		Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: Wheelchair Revision on: 05/19/2022 Revision by: Meghan Sears (ADOC)			PCA	
			<ul style="list-style-type: none"> • FOOTWEAR: Ensure resident wears appropriate footwear for at all time. Revision on: 04/24/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	
			<ul style="list-style-type: none"> • FLOOR MAT: Position floor mat on left side of the bed to lower risk of injury. Revision on: 09/17/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
			<ul style="list-style-type: none"> • ALARMS: Requires Bed/Chair alarm. Check placement and working order. Revision on: 05/26/2021 Revision by: Ruqio Hassan (RN)			PCA	D/E/N
			<ul style="list-style-type: none"> • SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries. 			Registered Staff	
<ul style="list-style-type: none"> • Use of PASD two 1/4 bedrails to assist resident with Activity of Daily Living with bed mobility. Revision on: 01/24/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> • Stanley will be effectively supported with use of two 1/4 bedrails to optimize Activity of Daily Living for bed mobility each day through to the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<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: 05/19/2022 Revision by: Meghan Sears (ADOC)				
			<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use 2 x 1/4 bed rails as to support appropriate bed mobility. Revision on: 05/19/2022 Revision by: Meghan Sears (ADOC)				
			<ul style="list-style-type: none"> • BED RAIL (TWO PARTIAL 1/4 rails) in USE as a PASD to assist resident with bed mobility. Monitor every shift. Revision on: 05/19/2022 Revision by: Meghan Sears (ADOC)			PCA	D/E/N
<ul style="list-style-type: none"> • Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA), SEIZURE Disorder Revision on: 07/26/2023 Revision by: Kenya Mosely (RPN)		<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with CVA through to the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> • MEDICATION: Administer medication for CVA as per MD order. Monitor effectiveness and for side effects. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)				
			<ul style="list-style-type: none"> • 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: 02/13/2021				
Allergies	No Known Allergies		D.O.B.	08/16/1957	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Barchan, Stanley (922131005300)		Admission Date	11/07/2019	Location	8 818 A	
Last Care Plan Review Completed:		09/17/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			Revision by: Jenny Liu (RAI Coord Back-up) • Observe SWALLOWING: Inform Registered staff of changes or any signs of difficulty in swallowing (coughing during eating, drooling, etc.). • SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway.		PCA Registered Staff PCA Registered Staff All	
• Potential for CONSTIPATION related to decreased mobility Revision on: 04/26/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Stanely will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of Stanley for constipation management and changes to health status and symptoms/ complications of constipation. Revision on: 04/26/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • BOWEL PROTOCOL: In place as per MD order		Registered Staff	
• Potential for BOWEL INCONTINENCE related to Stroke. Revision on: 05/11/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• Stanley will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• 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 (Totally Incontinent). Report change to level as noted. Revision on: 04/24/2024 Revision by: Jenny Liu (RAI Coord Back-up) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.		Registered Staff PCA PCA	
• Strength Revision on: 02/22/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		• To improve strength of B/L UE from 3+/5 to 4/5 in 3 months. To increase ROM of Rt knee extension from -10 degrees to WFL in next 3 months Revision on: 09/16/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Strength exe. with use of 1-3lbs. wt.,1set, 10rps.,B/L UE and LE, assist as needed; 2-3/week as tolerated. A-AAROM exs for B/L UE end range; as best tolerated; 10 reps/exs, 1-2 sets , 2-3 x a week; Stretching exe. for B/L hams & Calf 1set,5rps.,hold up to 30 sec., 2-3/wk as tolerated. Revision on: 06/18/2025 Revision by: Shina Wadhwa (Physical Therapist)		PT - Physiotherapist PTA	
Allergies	No Known Allergies		D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)		Admission Date	11/07/2019	Location	8 818 A
Last Care Plan Review Completed:		09/17/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Strength Revision on: 02/22/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		Target Date: 12/17/2025				
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Stanley Medical Treatment and End of Life Care Revision on: 02/19/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> To support and honor Stanley expressed wishes and beliefs through to the End of Life. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> CPR: Stanley wishes to have CPR and TRANSFER to hospital. Revision on: 01/30/2023 Revision by: Kenya Mosely (RPN)			
<ul style="list-style-type: none"> Potential for altered genitourinary function or complications related to diagnosis of BENIGN PROSTATIC HYPERTROPHY (BPH). Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with BPH through to next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Benign Prostatic Hypertrophy for changes to health status and alteration or complications affecting urinary function. MEDICATION: Administer medication as per MD order and monitor for side effects and effectiveness. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)		Registered Staff	
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, difficulty of hearing) related to Stroke with Left side weakness. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> Stanley will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Stanley primary language is English. He is able to speak/understand English. SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)			
Allergies	No Known Allergies		D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)		Admission Date	11/07/2019	Location	8 818 A
Last Care Plan Review Completed:		09/17/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, difficulty of hearing) related to Stroke with Left side weakness. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• Stanley will be able to make basic needs known on a daily basis through the review date Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Stroke with Left side weakness. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• Stanley will be supported to maintain cognitive function through the review date. Current CPS is (3) Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• RIENTATION: Gently reorient to (person, place, time) as needed when Stanley is feeling lost or in confused state. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routines and activities. Revision on: 02/13/2021 Revision by: Jenny Liu (RAI Coord Back-up)		PCA	
• SPIRITUAL BELIEFS: Stanley is Non-Religious. Revision on: 02/13/2020 Revision by: Judy Woods (Activation aide)		• To provide Stanley spiritual support as interested through to the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• PERSONAL CHOICE: He has recently shown an increased interest in attending church services, please invite and respect his right to decline should he choose not to attend. Revision on: 06/18/2025 Revision by: Megan Pipe (Recreation Aide)			
• URINARY (Functional) INCONTINENCE related to: Disease diagnosis Revision on: 11/29/2019 Revision by: Maryola Perion (Registered Nurse)		• Stanley will receive support to use toilet, urinal and promote urinary continence each shift through to the next review. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up)	• URINARY Continence level is Incontinent. Report change to level as noted. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator) • CHECK and CHANGE: Stanley experiences TOTAL incontinence and requires checks every 2 hrs and change each time noted to be soiled. Revision on: 01/22/2024 Revision by: Jenny Liu (RAI Coord Back-up)		PCA PCA	
Allergies	No Known Allergies		D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)		Admission Date	11/07/2019	Location	8 818 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Target Date: 12/17/2025	<ul style="list-style-type: none"> • INCONTINENCE PRODUCT: Resident uses blue color brief. 	PCA		
		Revision on: 04/11/2025 Revision by: Jenny Liu (RAI Coordinator)			
<ul style="list-style-type: none"> • Altered ability to complete Activities of Daily Living (ADLs) related to: Stroke with Left side Weakness, Seizure Disorder. Revision on: 11/27/2019 Revision by: Maryola Perion (Registered Nurse)	<ul style="list-style-type: none"> • Stanley will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care tasks are met each day through to the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> • BATHING: Stanley prefers (shower) on (Tuesdays and Fridays on Day shift). Stanley participates by (providing washcloth and washing his upper body and face with cues). Two staff (MAXIMAL) assistance for bathing. Sit to stand lift for transfer with two staff assist. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • BED MOBILITY: Extensive to Maximal Assist. Stanley requires one to two team member weight bearing assist to turn and reposition in bed. Two (2) Bed rails to aim for bed mobility. Revision on: 06/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • DRESSING: Maximal assist- Stanley requires two team members to assist with dressing from head to toe with weight bearing assist. Stanley is capable of guiding limbs through his clothing. Revision on: 06/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • EATING: Stanley is able to eat independently but requires supervision (cueing/encouragement) at times and setup assistance. He eats in the main dining room-1st floor. Revision on: 09/17/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • LOCOMOTION: Total assist- Stanley uses a wheelchair as his primary mode of locomotion. Revision on: 10/16/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA		
		<ul style="list-style-type: none"> • PERSONAL HYGIENE: Maximal assist. Stanley requires the team to assist with providing cuing and encouragement to complete oral hygiene, brushing his hair and washing his face. Team to provide assistance if unable to do on his own. Stanley needs the team to assist with providing pericare related to incontinence. Revision on: 04/11/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • HAND HYGIENE: 1 staff to provide Reminder assistance to use sanitizer wipes for 	PCA		
Allergies	No Known Allergies	D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)	Admission Date	11/07/2019	Location	8 818 A
Last Care Plan Review Completed:	09/17/2025				

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 with Left side Weakness, Seizure Disorder. Revision on: 11/27/2019 Revision by: Maryola Perion (Registered Nurse)		hand hygiene. Revision on: 05/19/2022 Revision by: Meghan Sears (ADOC) <ul style="list-style-type: none"> TOILET USE: Maximal Assist; Stanley requires a sit to stand lift and two team member assist for transferring onto and off of the toilet. Stanley requires the team to assist with changing incontinence product, re-applying his clothing. Refer to transferring care plan for transfer status. Revision on: 04/11/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> TRANSFERRING: Stanley requires the sit to stand lift with two team member assist to transfer. Revision on: 05/03/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> TRANSFER LIFT/SLING: Yellow Sling Revision on: 05/03/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> ORAL CARE: Stanley is able to brush his own teeth once set up/supervision by staff. Revision on: 08/05/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> SHAVING - Stanley prefers (beard, mustache, face) shaved on his bath days and as needed. Revision on: 04/24/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	D		
<ul style="list-style-type: none"> Sleep Patterns. Revision on: 11/27/2019 Revision by: Maryola Perion (Registered Nurse)	<ul style="list-style-type: none"> To promote adequate rest/sleep for Stanley based on identified sleep patterns/preferences each night through to the next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime: Around 21:30, usual wake time: 6:00-7:00 Revision on: 11/29/2019 Revision by: Maryola Perion (Registered Nurse) <ul style="list-style-type: none"> SLEEPWEAR: Stanley prefers to wear his own clothes or Pyjama. Revision on: 11/29/2019 Revision by: Maryola Perion (Registered Nurse)	PCA			
• Nutrition Risk Level (diet details)	• Stanley will be adequately	• LABELLED SNACK PM: ice cream (115 ml fluid) daily	PCA	D		
Allergies	No Known Allergies		D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Barchan, Stanley (922131005300)		Admission Date	11/07/2019	Location	8 818 A
Last Care Plan Review Completed:		09/17/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 01/15/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse RN Dietitian (RD)	
		• Will weigh within realistic GWR 75-85 kg through to next review date. Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/17/2025 • Stanley will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1978 ml/day (25 ml/kg using 79.1 kg weight) through to next review date. Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/17/2025	• NUTRITION RISK: Stanley is low risk level. Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))					
			• DIET ORDER: Stanley is provided regular diet, regular texture. Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA	
			• FLUID CONSISTENCY: Stanley drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/14/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)				Diet PCA	
			• FLUID TARGET: Encourage Stanley to drink a minimum of 1582 ml/day. He likes to drink chocolate milk. Revision on: 09/12/2025 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.				Dietary aide PCA	
			• DINING INSTRUCTIONS: Encourage taking fluids "to go" in a sippy cup after each meal to meet his hydration needs Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse	
			• PORTION SIZE: Stanley prefers double portions for desserts Revision on: 05/10/2021 Revision by: Anna Slack (Registered Dietitian)				Diet PCA	
			• HIGH CALORIE/PROTEIN HS SNACK: cheese and crackers or peanut butter and crackers (alternating) daily Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA	E
			• MEDPASS SUPPLEMENTS: Extra hydration - provide 100 ml water at each med pass (QID) Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))					
Allergies	No Known Allergies			D.O.B.	08/16/1957	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Barchan, Stanley (922131005300)			Admission Date	11/07/2019	Location	8 818 A	
Last Care Plan Review Completed:		09/17/2025						


Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details)		• LABELLED SNACK AM: jello (99 ml fluid) daily Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	D/E

Allergies	No Known Allergies	D.O.B.	08/16/1957	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Seizure disorder, so described(R56.80), Hyperplasia of prostate(N40), Hemiplegia of unspecified type of non-dominant side(G81.91)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Barchan, Stanley (922131005300)	Admission Date	11/07/2019	Location	8 818 A
Last Care Plan Review Completed:		09/17/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> • Alteration in skin integrity related to MASD to under left breast Onset: Oct 28, 2025. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of MASD to under left breast by the target date. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) Target Date: 01/18/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD to under left breast for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) • COMMUNICATION: Involve/collaborate with Barbara Broody in decision making for treatment of skin issues. Revision on: 10/28/2025 Revision by: Baljinder Sidhu (RPN) • TOPICAL TX: Apply topical treatment to MASD to under left breast as MD Order. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) 	Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Alteration in skin integrity related to MASD to under right breast Onset: Oct 28, 2025. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of MASD to under right breast within the next review date. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) Target Date: 01/18/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD to under right breast for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) • TOPICAL TX: Apply topical treatment to MASD to under right breast as MD Order. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/29/2025 Revision by: Janina Lucero (RN) 	Registered Practical Nurse RN	

Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies	D.O.B.	10/07/1964	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Broddy, Barbara (92213101078)	Admission Date	12/15/2021	Location	8 825 B	

Last Care Plan Review Completed:
08/07/2025

Broddy, Barbara (92213101078)

Page 1 of 12

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 impaired mobility, Degenerative Disc Disease, Colitis, Crohns, Hemiparesis, Multiple Sclerosis, Seizure Disorder, abdominal pain, pain in the right Foot and swelling, possible right foot fracture waiting XRAY. Most Current LTCF Pain Score is 0/3. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• Promote MDS Pain Score of 0 through to the next review. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	<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 Barbara satisfaction for pain control. Revision on: 12/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) <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: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			RN Registered Practical Nurse 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: 08/01/2025 Revision by: Suzanne Azar (RN)		<ul style="list-style-type: none">• Barbara 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: 08/01/2025 Revision by: Suzanne Azar (RN) Target Date: 01/18/2026	<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: 08/01/2025 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 transfer and bed mobility. Revision on: 08/01/2025 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: 08/01/2025 Revision by: Suzanne Azar (RN)			PCA	D/E/N
<ul style="list-style-type: none">• STRONG PARTICIPATION in Activities. ISE Score: 6/6 Revision on: 07/31/2025 Revision by: Megan Pipe (Recreation Aide)		<ul style="list-style-type: none">• Barbara will be supported to maintain participation in activities 15-20 times per month by the next review date. Revision on: 10/26/2025 Revision by: Laura Morris (Restorative Care Aide)	<ul style="list-style-type: none">• STRUCTURED ACTIVITIES: Invite Barbara to programs of personal interest; 1: 1/friendly visits, games - board games & Bingo card games, trivia, reading programs (library cart) TV - movie night, beauty club, discussion groups, spiritual, special events, etc. Barbara enjoys calling Bingo with the recreation team assisting, please remind her before starting to see if she would like to call that day.				
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964		Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)			Admission Date	12/15/2021	Location	8 825 B
Last Care Plan Review Completed:		08/07/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 01/18/2026	Revision on: 05/07/2025 Revision by: Megan Pipe (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage Barbara to engage in self-directed activities such as watching/listening to TV, listening to music, visiting with residents/team members, patio socializing/enjoying outdoors, etc. Revision on: 11/13/2024 Revision by: Laura Morris (Restorative Care Aide) • ONE to ONE: Provide Barbara with individual visits for conversation, reading, reminiscing, music, humor, etc. Revision on: 11/13/2024 Revision by: Laura Morris (Restorative Care Aide)			
• Risk for Impaired SKIN INTEGRITY related to History of stroke, Occasional bowel incontinence related to Crohn's and Colitis, Cytotoxic medication use Impaired mobility. Revision on: 06/23/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• 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. • CYTOTOXIC MEDICATION RISK: Barbara has potential to experience skin irritation (redness, burning, itchiness, etc.), report observed symptoms to Registered Staff immediately as noted. Revision on: 06/23/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• URINARY INCONTINENCE related to Hyperreflexia Bladder, Removal of suprapubic catheter. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)		• Barbara will have urinary incontinence managed every shift through to the next review period. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Barbara's for toileting needs, changes to health status and alteration of continence level. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • URINARY Continence level is Frequently incontinent. Report change to level as noted. Revision on: 10/17/2024 Revision by: Maryola Perion (RN) • SCHEDULED TOILETING: Check resident 3 times in a shift ,remind resident to use toilet.If sleeping do not awake her up as per resident. Revision on: 08/05/2025 Revision by: Gurjit Kaur (RN) • INCONTINENCE PRODUCT: Barbara uses PUM per prevail sheet.		PCA	
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)		Admission Date	12/15/2021	Location	8 825 B
Last Care Plan Review Completed:		08/07/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> • URINARY INCONTINENCE related to Hyperreflexia Bladder, Removal of suprapubic catheter. Revision on: 10/17/2024 Revision by: Maryola Perion (RN)			Revision on: 02/17/2025 Revision by: Jenny Liu (RAI Coord Back-up)			
<ul style="list-style-type: none"> • Potential to experience (Specify; rash, hives, anaphylaxis, etc.) related to ALLERGY of Codeine, Morphine, Erythromycin, Dilantin, Fish and Bees. Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> • Barbara will be protected from exposure to allergen each day through next review date. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of Barbara with Food and medication allergy for changes to health status and complications mortality. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> • BOWEL Continence - Barbara is continent and has self recognition of urge to defecate. Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> • Barbara to remain continent of bowels through next review date Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	<ul style="list-style-type: none"> • BOWEL Continence level is CONTINENT. Report change to level as noted. PCA			
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of (RESISTANCE to care need) nature 		<ul style="list-style-type: none"> • To decrease episodic frequency of (resisting her 	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Barbara for indications to change in or for escalating expressive behaviour risk. 			
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)		Admission Date	12/15/2021	Location	8 825 B
Last Care Plan Review Completed:		08/07/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
related to Depression and bipolar disorder. Revision on: 02/23/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)	showers) by next review date. ABS score will be less than (0). Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	Revision on: 09/16/2022 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe) as expression of behaviour include (Specify cause; confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 09/16/2022 Revision by: Jenny Liu (RAI Coord Back-up) • RESISTANCE to Care Need: If Barbara is refusing to eat re-approach in 10-15 minutes. Report episode to Registered Staff. Often refuses to shower/bathe. Document refusal. Offer assist with partial or bed bath. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. Revision on: 09/16/2022 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Practical Nurse RN	
• Increased risk for FALLS related to history of falls, history of stroke, Impaired mobility, blindness to right eye. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• CALL BELL: Place call bell within Barbara reach and check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • ENVIRONMENT: Ensure Barbara's environment is clean and clear of clutter. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • FOOTWEAR: Ensure Barbara wears appropriate footwear while transferring. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.	PCA PCA PCA Registered Staff	D/E/N
• Balance (Standing) Revision on: 09/06/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	• To improve Tinetti scores from 20 to 22 in next 3 months; Revision on: 08/17/2024 Revision by: Shina Wadhwa	• Dynamic standing balance exs at the wall bar, frequent breaks; 10 reps, 2-3 x a week; Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies	D.O.B.	10/07/1964	Physician Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre			Print Date 10/30/2025
Resident	Broddy, Barbara (92213101078)	Admission Date	12/15/2021	Location 8 825 B
Last Care Plan Review Completed:		08/07/2025		

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		(Physical Therapist) Target Date: 01/18/2026					
• Potential to experience alteration in MOOD as exhibited by (crying, scared post elopement on 5/13) to Depression, Bipolar Disorder. Revision on: 06/09/2023 Revision by: Jenny Liu (RAI Coord Back-up)		• Barbara will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Barbara for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 06/09/2023 Revision by: Jenny Liu (RAI Coord Back-up)				
• Barbara has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 12/05/2022 Revision by: Mitchell Atkinson (Recreation Aide)		• Barbara will be safe when choosing to smoke through to the next review Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve Barbara 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: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • SMOKING CONTRACT: Barbara 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: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			Social Worker	
• Strength Revision on: 01/25/2022 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		• Barbara to increase strength of B/L UE≤ from grade (3+ to 4/5) to grade 4+/5 in 3 months. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• Barbara to perform Strengths exercise for UE and LE of all major joints with 2-3 lb weight, 8-10 reps of 1-2 sets with PTA, 3x/wk as tolerated Revision on: 08/14/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• Ambulation. Revision on: 01/25/2022 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		• To prevent decline in overall endurance over 3 months Revision on: 09/13/2023 Revision by: Katie Wolters-Savo	• Ambulation with use of RW Sup-CG Assist: Cue for good foot clearance and heel toe pattern, distance as best tolerated, rest breaks as needed as resident can feel dizzy at times, her room to nursing station then take break for 2-3 minute and ambulate back 2-3x/week as tolerated.			PT - Physiotherapist PTA	
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)			Admission Date	12/15/2021	Location	8 825 B
Last Care Plan Review Completed:		08/07/2025					

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		(RAI Coordinator) Target Date: 01/18/2026	Revision on: 10/21/2025 Revision by: Shina Wadhwa (Physical Therapist)					
• Sleep Patterns. Revision on: 01/12/2022 Revision by: Jenny Liu (RAI Coord Back-up)		• To promote adequate rest/sleep for Barbara based on identified sleep patterns/preferences each night through to the next review date. Revision on: 05/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• REST PATTERN: Preferred bedtime no specific time, usual wake time no specific time Revision on: 01/12/2022 Revision by: Jenny Liu (RAI Coord Back-up) • SLEEPWEAR: Barbara prefers to wear her regular to bed Revision on: 01/12/2022 Revision by: Jenny Liu (RAI Coord Back-up)				PCA <	

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved		
			<p>Care level varies based on her strength in the moment and ability to bear weight. May require 1 team extensive. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Barbara is able to eat independently once set up by the team, staff to cut up food into pieces. and she eats on the floor dining room- floor 8 Revision on: 06/09/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• LOCOMOTION: Barbara uses a electric wheelchair independently as her primary mode of locomotion and Walks with physio with R/W Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• PERSONAL HYGIENE: Barbara is able to wash her face, brush and store her dentures and requires team member to provide pericare due to incontinence. Revision on: 02/17/2025 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• HAND HYGIENE: 1 staff to provide reminders for Barbara to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• TOILET USE: Barbara is able to transfer herself onto and off of the toilet on her own. She requires one team member to re-apply her brief though she is able to adjust her clothing.</p> <p>Care level varies based on her strength in the moment and ability to bear weight. May require 1 team extensive. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: One Person assistance during transfer assistance require to Go bed and Get out from the bed to Wheelchair. Revision on: 07/31/2025 Revision by: Sonpreet Gurm (Registered Nurse)</p> <p>• ORAL CARE: Barbara has full upper and full lower dentures. She is able to brush and store her dentures on her own. Revision on: 12/15/2021</p>						PCA	
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964		Physician	Wallace Liang			
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses									
Facility	Berkshire Care Centre					Print Date	10/30/2025			
Resident	Broddy, Barbara (92213101078)		Admission Date	12/15/2021		Location	8 825 B			
Last Care Plan Review Completed:		08/07/2025								

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Arthritis, Degenerative Disc Disease, Blindness to right eye, History of Stroke, Hemipareis, Multiple Sclerosis, Seizure Disorder. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		Revision by: Katie Wolters-Savo (RAI Coordinator)		
<ul style="list-style-type: none"> Potential to experience alteration in RESPIRATORY FUNCTION related to Chronic Obstructive Pulmonary Disorder (COPD). Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with COPD each day through to next review date. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of Barbara with COPD for changes to health status and alteration or complications affecting respiratory function. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to; History of Stroke. Revision on: 12/15/2021	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with history of stroke through to the 	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of Barbara with history of stroke for changes to health status and alteration or complications affecting cardiac function. Revision on: 12/15/2021		
Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses		Physician	Wallace Liang
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)	Admission Date	12/15/2021	Location 8 825 B
Last Care Plan Review Completed:		08/07/2025		

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved			
Revision by: Katie Wolters-Savo (RAI Coordinator)		next review date. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	Revision by: Katie Wolters-Savo (RAI Coordinator)								
• Nutrition Risk Level		<p>• Barbara will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026</p> <p>• Will weigh within realistic weight range of 70-80 kg through to next review date. Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026</p> <p>• Barbara will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2048 ml/day (25 ml/kg using 81.9 kg weight) through to next review date. Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026</p>	<p>• GERD CARE: Do not serve coffee,tea,chocolate, tomatoes, onions, citrus- orange juice, onions itself, spicy food NO straws Limit high fat food and extra creamy high fat sauces Revision on: 09/06/2023 Revision by: Anna Slack (Registered Dietitian) • NUTRITION RISK: Barbara is at moderate risk level. Revision on: 07/30/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Barbara will receive regular diet, regular texture Revision on: 12/15/2021 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Barbara drinks REGULAR/THIN Level 0 Fluids. Revision on: 12/15/2021 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Bee to drink a minimum of 1638 ml/day Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • DINING INSTRUCTIONS: Do not serve rice by itself (rice with sauce/gravy, in a casserole, or in a soup is okay). Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • SEVERE ALLERGY TO FISH/SHELLFISH (even the smell; reaction is difficulty breathing). Intolerance to mushrooms (reaction is upset stomach).</p>				Dietitian (RD)				
Allergies		Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies		D.O.B.	10/07/1964	Physician	Wallace Liang				
Diagnosis		Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses									
Facility		Berkshire Care Centre				Print Date	10/30/2025				
Resident		Broddy, Barbara (92213101078)		Admission Date	12/15/2021	Location	8 825 B				
Last Care Plan Review Completed:		08/07/2025									

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level 		Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH CALORIE/PROTEIN HS SNACK: peanut butter sandwich Tues/Thurs/Sat Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH FIBRE: Offer fruit rite at breakfast M-W-F Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA PCA	E D/E
• Altered VISION related to blindness to right eye. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Barbara will use glasses for vision correction daily through to the next review date. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with Barbara/SDM for decision making pertaining to change in visual status as needed. Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • EYEGLASSES: Barbara wears eyeglasses when she wishes. Assist as needed and store on night table when sleeping. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
• Expressed Wishes and Beliefs related to Barbara's Medical Treatment and End of Life Care Revision on: 12/15/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To support and honor Barbara's expressed wishes and beliefs through to the End of Life. Revision on: 09/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/18/2026	• DO NOT ATTEMPT CPR: Do not transfer to hospital, plan includes death at home - see PoET Individualized Summary Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • SPIRITUAL/RELIGIOUS needs: Barbara wishes to received the Last Rights in recognition of faith. Revision on: 12/16/2021 Revision by: Laurence Despard (Registered Nurse)		

Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies	D.O.B.	10/07/1964	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)	Admission Date	12/15/2021	Location	8 825 B
Last Care Plan Review Completed:		08/07/2025			

Care Plan Report

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Diagnosis


Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site (M13.99), Chronic obstructive pulmonary disease, unspecified(J44.9), Enterocolitis due to Clostridium difficile(A04.7), Seizure disorder, so described(R56.80), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Multiple sclerosis(G35), Blindness, binocular(H54.0), Pure hypercholesterolaemia(E78.0), Bipolar affective disorder, unspecified(F31.9), Other vitamin B12 deficiency anaemias(D51.8), Hypokalaemia(E87.6), Chronic obstructive pulmonary disease with acute exacerbation, unspecified(J44.1)

Allergies

Aspirin, Codeine, Erythromycin, Morphine, Asasantine, Dilantin, Fish, Mushroom, Bees

Allergies	Aspirin, Codeine, Erythromycin, Morphine, Asasantine, D...See last page for a complete listing of the Resident's allergies	D.O.B.	10/07/1964	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Arthritis, unspecified, unspecified site(M13.99), Chronic obstructive pul... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Barbara (92213101078)	Admission Date	12/15/2021	Location	8 825 B
Last Care Plan Review Completed:		08/07/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Steven is experiencing an episode of INFECTION to his BILATERAL LOWER LEGS. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)		<ul style="list-style-type: none">To have infection adequately managed and treated without further complications. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) Target Date: 01/25/2026	<ul style="list-style-type: none">COMMUNICATION: Involve/collaborate with Steven Broddy (Resident) with decision making for infection treatment plan and update accordingly. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none">VITAL SIGNS: Monitor VITAL SIGNS every shift. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none">MEDICATIONS: Administer medication Ciprofloxacin 500mg twice daily for 10 days as per MD/NP order. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)				
<ul style="list-style-type: none">Alteration in skin integrity with risk for infection or complications related to #43 - Venous - Left lateral leg secondary to Impaired Circulation Revision on: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none">To minimize risk of #42 - Venous - Left Shin #43 - Venous - Left lateral leg infection each day until fully healed. Revision on: 06/19/2025 Revision by: Janina Lucero (RN) Target Date: 01/25/2026 <ul style="list-style-type: none">To promote optimal healing of #42 - Venous - Left Shin #43 - Venous - Left lateral leg. Revision on: 06/19/2025 Revision by: Janina Lucero (RN) Target Date: 01/25/2026	<ul style="list-style-type: none">TREATMENT PLAN: Administer treatment for #42 - Venous - Left Shin #43 - Venous - Left lateral leg as per MD Order. Revision on: 06/19/2025 Revision by: Janina Lucero (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: 06/19/2025 Revision by: Janina Lucero (RN)				
<ul style="list-style-type: none">Alteration in skin integrity with risk for infection or complications related to #42 venous-left shin Revision on: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none">To minimize risk of WOUND infection each day until fully healed. Revision on: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 <ul style="list-style-type: none">To promote optimal healing of	<ul style="list-style-type: none">TREATMENT PLAN: Administer treatment for venous ulcer to left shin as per MD Order. Revision on: 10/18/2025 Revision by: Jenny Liu (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: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator)				
Allergies	Penicillin, Piperacillin, Tegaderm		D.O.B.	04/30/1962	Physician	Wallace Liang	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Broddy, Steven (922131005064)		Admission Date	09/13/2021	Location	8 825 A	
Last Care Plan Review Completed:		10/25/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Alteration in skin integrity with risk for infection or complications related to #42 venous-left shin Revision on: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator)		WOUND within next review date. Revision on: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026					
• Potential for Persistent PAIN and alteration in comfort level related to Arthritis, Legs pain, VENOUS ULCERS TO LOWER LEGS, sharp pain in the kidney, and soreness to his legs bilaterally. Most Current RAI Pain Score is 3. Revision on: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator)		• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve/collaborate with Steven about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 09/18/2019 Revision by: Brandi Livingstone (ADOC) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Please wake resident for all medications. Revision on: 09/21/2020 Revision by: Meghan Sears (ADOC)			Registered Staff RN Registered Practical Nurse Registered Practical Nurse RN	
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to Diuretic medication and Diarrhea (10/16/25). Revision on: 10/16/2025 Revision by: Kenya Mosely (RPN)		• To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve/collaborate with Steven in decision making for plan of Hydration/Fluid consumption and risks of dehydration. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. • PROMOTE FLUIDS: Promote Steven to consume fluids; amount as per Nutrition Care Plan. Revision on: 12/07/2020 Revision by: Maryola Perion (RN)			Diet Registered Staff	
• Alteration in skin integrity with risk for		• To minimize risk of #46 -	• TREATMENT PLAN: Administer treatment for #46 - Venous				
Allergies	Penicillin, Piperacillin, Tegaderm		D.O.B.	04/30/1962	Physician	Wallace Liang	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Broddy, Steven (922131005064)		Admission Date	09/13/2021	Location	8 825 A	
Last Care Plan Review Completed:		10/25/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
infection or complications related to #46 - Venous Left Foot, 2nd Digit (Second Toe) Revision on: 10/06/2025 Revision by: Janina Lucero (RN)	Venous Left Foot, 2nd Digit (Second Toe) infection each day until fully healed. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) Target Date: 01/25/2026 • To promote optimal healing of #46 - Venous Left Foot, 2nd Digit (Second Toe) within the next review date. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) Target Date: 01/25/2026	Left Foot, 2nd Digit (Second Toe) as per MD Order. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with #46 - Venous Left Foot, 2nd Digit (Second Toe) for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 10/06/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/06/2025 Revision by: Janina Lucero (RN)			
• Alteration in skin integrity with risk for infection or complications related to #33 - Venous Right Calf Lateral Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To minimize risk of WOUND infection each day until fully healed. Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/25/2026 • To promote stabilization of WOUND through to the next review date Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/25/2026	• TREATMENT PLAN: Administer treatment for Stage #33 - Venous Right Calf Lateral as per MD Order. Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Wound to #33 - Venous Right Calf Lateral for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Penicillin, Piperacillin, Tegaderm	D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre	Print Date	10/30/2025		
Resident	Broddy, Steven (922131005064)	Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025			

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 #33 - Venous Right Calf Lateral Revision on: 09/12/2025 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: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none">Potential for altered skin healing, infection or complications related to venous ulcers to #31 - Venous Right Foot, 2nd Digit (Second Toe) Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">To minimize risk of venous ulcers infection each day until fully healed. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 <ul style="list-style-type: none">To promote optimal healing of venous ulcers within the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	<ul style="list-style-type: none">TREATMENT PLAN: Administer treatment for venous ulcers to the #31 - Venous Right Foot, 2nd Digit (Second Toe) as per MD Order Revision on: 09/12/2025 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: 04/01/2024 Revision by: Janina Lucero (RN)			
<ul style="list-style-type: none">Steven DECLINES PARTICIPATION in structured programs related to personal choice. ISE Score: 4/6 Revision on: 07/14/2025 Revision by: Megan Pipe (Recreation Aide)		<ul style="list-style-type: none">Steven will participate in 10-20x, Independent/Self-Directed activities and 1:1 visits, monthly through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none">SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as smoking on the patio, watching tv (Toronto Maple Leaf, Toronto Raptors, New York Yankees games), visiting with residents/team members, community outings, listen to music (rock music, Metalica), etc. Revision on: 08/18/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy) <ul style="list-style-type: none">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		ACT	ACT
Allergies	Penicillin, Piperacillin, Tegaderm			D.O.B.	04/30/1962	Physician Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)			Admission Date	09/13/2021	Location 8 825 A
Last Care Plan Review Completed:		10/25/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved	
		Target Date: 01/25/2026	events, etc. Revision on: 12/02/2019 Revision by: Megan Pipe (Restorative Care Aide) • INVITATION: Offer friendly invites to structured programs scheduled in the home such as patio programs, trivia, special events, TV/movies, etc. Revision on: 08/24/2022 Revision by: Mitchell Atkinson (Recreation Aide)				ACT		
• Risk for/Impaired Skin Integrity r/t: Diagnosis of Diabetes Mellitus, Impaired Mobility, Edema, Venous ulcer L & R lower leg, lymphedema to left and right lower legs. Revision on: 06/23/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• 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. Revision on: 03/13/2025 Revision by: Danielle Loreto (RAI Coordinator) • EQUIPMENT: Steven has a cushion to offload pressure Geko device to bilateral lower legs to help with the calf muscle pump reflex: Geko is to be applied everyday as ordered Each device can be used for 2 days. After the second day a new device is to be applied. The Geko device can be removed on shower days but needs to be reapplied within 3hrs or the device will not activate. A tingling sensation will be felt by the resident to know that the device is working. Revision on: 10/08/2025 Revision by: Kenya Mosely (RPN)				PCA PCA		
• Potential risk for impaired skin integrity related to friction 10/31/2024 Revision on: 11/02/2024 Revision by: Gursharan Kaur (Registered Practical Nurse)		• To maintain skin integrity Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• Steve to report worsening or new skin impairment to Registered Staff Revision on: 03/07/2024 Revision by: Idylle Labrado (RPN)						
Allergies	Penicillin, Piperacillin, Tegaderm					D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre						Print Date	10/30/2025	
Resident	Broddy, Steven (922131005064)					Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025							

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Use of PASD TILT to assist resident with Activity of Daily Living comfort, offloading, reducing edema to lower legs and positioning. Revision on: 10/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) 	<ul style="list-style-type: none"> • Steven will be effectively supported with use of TILT to optimize Activity of Daily Living comfort, offloading and reducing edema to lower legs and positioning each day through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 	<ul style="list-style-type: none"> • HEALTH EDUCATION: Engage with Steven to enhance their knowledge of possible benefits and challenges associated with Use of TILT. Revision on: 07/11/2024 Revision by: Janina Lucero (RN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use TILT as to support appropriate comfort, offloading, reducing edema to lower legs and positioning. Revision on: 07/11/2024 Revision by: Janina Lucero (RN) • TILTED CHAIR in USE as a PASD to support resident with comfort, offloading, positioning and reducing edema to lower legs. Monitor every shift. Revision on: 07/11/2024 Revision by: Janina Lucero (RN) 	PCA	D/E/N	
<ul style="list-style-type: none"> • Potential for Expressive Behaviour (resistance to care/medication) related to Diagnosis of Bipolar Affective Disorder, Schizophrenia. Revision on: 05/05/2024 Revision by: Elsie Calumpang (RN) 	<ul style="list-style-type: none"> • To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 3. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Steven for indications to change in or for escalating expressive behaviour risk. Revision on: 11/17/2021 Revision by: Leslie Meloche (Activities/Rec Therapy) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing oxygen to be wear daily) as expression of behaviour include (misunderstanding care needs, poor judgement, fearfulness, etc.) Revision on: 02/01/2024 Revision by: Jenny Liu (RAI Coord Back-up) • RESISTANCE to Care Need: If Steven is refusing to (take oxygen) re-approach in 10-15 minutes. Report episode to Registered Staff and inform Physician. Revision on: 02/01/2024 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for therapeutic treatment of as per MD Order. Monitor effectiveness and for side effects. Revision on: 09/28/2020 Revision by: Maryola Perion (RN) 	Registered Practical Nurse RN		
<ul style="list-style-type: none"> • Potential to experience alteration in MOOD as exhibited by hx of persistent anger with self or others, repetitive health 	<ul style="list-style-type: none"> • To decrease episodic frequency of negative Mood symptoms by next review date. 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Steven about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) 			
Allergies	Penicillin, Piperacillin, Tegaderm	D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)	Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
complaints, anxious related to Dx of Bipolar, Schizophrenia, Pain. Revision on: 05/05/2024 Revision by: Elsie Calumpang (RN)	DRS score will be less than 0. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	<ul style="list-style-type: none"> • HEALTH EDUCATION: Provide education and support to Steven pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Steven for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Steven's effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 08/31/2022 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) 	RN Registered Practical Nurse		
<ul style="list-style-type: none"> • Increased risk for FALLS related to: Diabetes mellitus, Anti-psychotic drug use, history of falls, unsteady gait. Revision on: 01/29/2024 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Steven in decision making in fall prevention Plan of Care. Revision on: 03/05/2021 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: Electric wheelchair. Revision on: 06/05/2023 Revision by: Kenya Mosely (RPN) • ENVIRONMENT: Secure environment (reduce clutter, quiet environment, etc.) to reduce fall risk for Steven. Revision on: 02/23/2022 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. 	PCA	D/E/N	
Allergies	Penicillin, Piperacillin, Tegaderm	D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)	Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
• Increased risk for FALLS related to: Diabetes mellitus, Anti-psychotic drug use, history of falls, unsteady gait. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)		Revision on: 06/26/2020 Revision by: Maryola Perion (RN)			
• Potential to experience alteration in RESPIRATORY FUNCTION related to Chronic Obstructive Pulmonary Disorder (COPD). Revision on: 11/27/2023 Revision by: Kenya Mosely (RPN)	• To treat and minimize signs/symptoms or complications associated with COPD each day through to next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• Nebulizer inhalers as ordered. Monitor effectiveness, side effects. Revision on: 11/27/2023 Revision by: Kenya Mosely (RPN) • COMMUNICATION: Involve/collaborate with Steven in decision making of Respiratory Management for COPD. Revision on: 11/27/2023 Revision by: Kenya Mosely (RPN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with COPD for changes to health status and alteration or complications affecting respiratory function. Revision on: 11/27/2023 Revision by: Kenya Mosely (RPN) • OXYGEN: Administer Oxygen as per MD order. He is often non-compliant with his Oxygen and needs reminders. Revision on: 03/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for COPD as per MD order and monitor for side effects. Revision on: 11/27/2023 Revision by: Kenya Mosely (RPN)	Registered Staff Registered Staff Registered Staff Registered Staff		
• Potential for complications, injury related to anticoagulant medications. Revision on: 05/20/2023 Revision by: Jenny Liu (RAI Coord Back-up)	• Steven will remain free from complications, bleeding, injury related to use of Eliquis through	• 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: 08/03/2023			
Allergies	Penicillin, Piperacillin, Tegaderm	D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)	Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		review date Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	Revision by: Jenny Liu (RAI Coord Back-up) • Notify nurse immediately if Steven has any blood noted in urine, stool or unexplained bleeding (gums). Revision on: 05/20/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted Revision on: 08/03/2023 Revision by: Jenny Liu (RAI Coord Back-up)		PCA All	
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 08/24/2021 Revision by: Maryola Perion (RN)		• To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 • Steven will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve/collaborate with Steven/SDM for decision making regarding constipation management. Revision on: 08/24/2021 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order		Registered Staff Registered Staff	
• Steven has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 06/04/2021 Revision by: Maryola Perion (RN)		• Steven will be safe when choosing to smoke through to the next review. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve Steven 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: 12/07/2020 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Steven wears oxygen and is a smoker. The nurse on the floor is to take Stevens oxygen tank off while he is providing him with cigarettes/lighter to smoke and keep until he arrives back to the unit and reapply.		Social Worker	
Allergies	Penicillin, Piperacillin, Tegaderm		D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)		Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			Revision on: 11/13/2024 Revision by: Danielle Loreto (RAI Coordinator) • SMOKING CONTRACT: Steven has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Revision on: 12/07/2020 Revision by: Maryola Perion (RN)			Social Worker Administrator	
• Expressed Wishes and Beliefs related to Steven Medical Treatment and End of Life Care Revision on: 03/05/2021 Revision by: Maryola Perion (RN)		• To support and honor Steven expressed wishes and beliefs through to the End of Life. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• CPR; Steven wishes Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 09/12/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Altered ability to complete Activities of Daily Living (ADLs) related to: DM, Bipolar, COPD, Arthritis, edema on both legs. Revision on: 12/07/2020 Revision by: Maryola Perion (RN)		• Steven will be supported to maintain current self participation in ADL care for all ADL area and assisted to ensure all ADL care tasks are met each day through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• BATHING: Steven prefers (shower/bath) on (Mondays and Thursdays on Evening shift). Steven is able to wash himself independently. One staff (Extensive) assistance (assistance with wash/drying his legs/feet and putting his pants on due to increased shortness of breath) for bathing. Nail care to be provided on shower/bath day. Revision on: 10/29/2025 Revision by: Alyssa Egan (ADOC) • BED MOBILITY: Steven is Independent with turning and repositioning in bed without any assistive device or staff. Revision on: 02/01/2024 Revision by: Jenny Liu (RAI Coord Back-up) • DRESSING: Steven is able to dress his upper/lower body independently. During bath day, Steven requires team member to pull up his pants for him due to increased SOB Revision on: 04/25/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Steven is able to eat and cut his food independently.he eats on the floor dining room Revision on: 02/01/2024 Revision by: Jenny Liu (RAI Coord Back-up) • LOCOMOTION: Steven is using an electric wheelchair and able to independently			PCA 	

Care Plan Report

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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Katherine Arca (RPN)		complications through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• TREATMENT PLAN: Registered staff to maintain foot care and refer to foot care nurse as needed. Revision on: 05/09/2024 Revision by: Chelsea Campbell-Wright (ADOC) • PREFERENCE: S.B. has no preference during footcare at this time. Revision on: 07/09/2020 Revision by: Katherine Arca (RPN)		Footcare Nurse - Internal	
• Potential for muscular dysfunction, contractures and bone deformity related to Dx of Arthritis. Revision on: 06/26/2020 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Arthritis through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve/ collaborate with Steven in decision making of musculoskeletal care management. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • Encourage exercise and mobility as tolerated. • MEDICATION: Administer medication for management of Arthritis as per MD order. Monitor effectiveness and for side effects. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Arthritis for discomfort/complications or changes to health status. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for Arthritis prescribed and in place; refer to Pain Care Plan. Revision on: 06/26/2020 Revision by: Maryola Perion (RN)		PCA Registered Staff	
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 06/26/2020 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve/ collaborate with Steven in decision making of diabetes care management. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • LIBRE MONITORING: Monitor glucose level as specified in manufacture instruction.		Registered Staff RN Registered	
Allergies	Penicillin, Piperacillin, Tegaderm		D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)		Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none"> • MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) • LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) 	Practical Nurse	
<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: 06/26/2020 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: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Steven in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 06/26/2020 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: 06/26/2020 Revision by: Maryola Perion (RN) • PREFERENCE: Steven prefers to receive medication whole with water. Revision on: 06/26/2020 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"> • BOWEL Continence - Steven is continent and has self recognition of urge to defecate. Revision on: 06/26/2020 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • Steven to remain continent of bowels through next review date Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 	<ul style="list-style-type: none"> • BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Steven 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: 06/26/2020 Revision by: Maryola Perion (RN) 	PCA	

Allergies	Penicillin, Piperacillin, Tegaderm	D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)	Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• URINARY Continence - Steven is continent and has self recognition of urge to void. Revision on: 06/26/2020 Revision by: Maryola Perion (RN)		• Steven will maintain continence level through next review date Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• URINARY Continence Level is: CONTINENT PCA • SELF TOILETING: Steven toilets self. Each shift ask if he has voided and document PCA accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 06/26/2020 Revision by: Maryola Perion (RN)				
• SPIRITUAL BELIEFS: Steven is of the Roman Catholic Faith. Revision on: 12/02/2019 Revision by: Megan Pipe (Restorative Care Aide)		• To provide Steven spiritual support as interested through to the next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• PERSONAL CHOICE: Respect Steven's right to decline participation in spiritual programs. He is currently not practicing at this time. Revision on: 12/02/2019 Revision by: Megan Pipe (Restorative Care Aide)			ACT	
• Nutrition Risk Level (diet details)		• Steven will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 04/02/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 • Will weigh within realistic weight range of 140-150 kg through to next review date. Revision on: 07/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/25/2026 • Steven will be adequately	• LABELLED SNACK HS: Steven receives 2 yogurt at HS nourishment pass as per preference. Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LABELLED SNACK PM: Instead of standard snack, provide: Cheese and crackers (Mon/Wed/Fri/Sun) Peanut butter and crackers (Tues/Thurs/Sat) Revision on: 07/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Steven is moderate risk level. Revision on: 10/07/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Steven will receive regular diet, regular texture. Revision on: 04/27/2021 Revision by: Olivia Kuhlmann (Dietetic Intern) • FLUID CONSISTENCY: Steven drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/14/2021			PCA Registered Practical Nurse RN PCA Registered Practical Nurse RN Diet Food Services Aide PCA Diet PCA	E
Allergies	Penicillin, Piperacillin, Tegaderm		D.O.B.	04/30/1962	Physician	Wallace Liang	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Broddy, Steven (922131005064)		Admission Date	09/13/2021	Location	8 825 A	
Last Care Plan Review Completed:		10/25/2025					

Care Plan Report


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Diagnosis

Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive pulmonary disease, unspecified(J44.9), Open wounds of multiple regions of lower limb(s), uncomplicated(T01.30), Oedema, unspecified(R60.9), Embolism and thrombosis of other specified veins(I82.8), Resistance to vancomycin(U83.0), Resistance to methicillin(U82.1), Psoriasis, unspecified(L40.9), Lymphoedema, not elsewhere classified(I89.0), Haemorrhoids, unspecified(K64.9), Epilepsy, unspecified, not stated as intractable(G40.90), Benign hypertension(I10.0), Obesity, unspecified(E66.9), Schizophrenia, unspecified(F20.9), Venous insufficiency (chronic)(peripheral) (I87.2), Chronic obstructive pulmonary disease with acute exacerbation, unspecified(J44.1), Pulmonary embolism without mention of acute cor pulmonale (I26.9), Flat foot [pes planus] (acquired)(M21.4), Post-traumatic wound infection, not elsewhere classified(T79.3), Bacterial infection, unspecified(A49.9)

Allergies	Penicillin, Piperacillin, Tegaderm	D.O.B.	04/30/1962	Physician	Wallace Liang
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Arthritis, unspecified, unspecified site(M13.99), Bipolar affective disorder, unspecified(F31.9), Chronic obstructive p... See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Broddy, Steven (922131005064)	Admission Date	09/13/2021	Location	8 825 A
Last Care Plan Review Completed:		10/25/2025			

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. ISE Score: 6/6 Revision on: 09/24/2025 Revision by: Megan Pipe (Recreation Aide)	<ul style="list-style-type: none">Team members will support Rina in decreasing social isolation by participating in activities of personal choice 30-35 times per month by the next review date. Revision on: 09/24/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 12/25/2025	<ul style="list-style-type: none">STRUCTURED ACTIVITIES: Invite her to programs of personal interest; friendly/1:1 visits, games - Bingo, music groups, reminiscing - reflections, reminiscing group, tea socials, Happy Hour, special events, spiritual - bible study, hymn sing & celebrations, TV - matinee movie, etc. Revision on: 10/10/2022 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none">SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as family/friend visits, visiting with residents/team members (her daughter), watching TV (news), listening to music, etc. Revision on: 10/10/2022 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none">ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - Reminders, etc. Revision on: 05/26/2020 Revision by: Shayna Lee Wonsch (Activation Manager) <ul style="list-style-type: none">ONE to ONE: Provide her with individual visits for conversation (family, TV shows), reminiscing, etc. Revision on: 11/08/2019 Revision by: Shayna Lee Wonsch (Activation Manager)					
<ul style="list-style-type: none">Potential for Persistent PAIN and alteration in comfort level related to (arthritis). Most Current LTCF Pain Score is (0) Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none">Rina's pain will be at a tolerable level through the review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	<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. <ul style="list-style-type: none">REST: accommodate resident rest and relaxation preference (put back to bed after lunch per resident). Revision on: 05/07/2021 Revision by: Jenny Liu (RAI Coord Back-up) <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: 08/05/2021 Revision by: Jenny Liu (RAI Coord Back-up)	RN Registered Practical Nurse Registered Practical Nurse RN				
<ul style="list-style-type: none">ROM/Strengthening Exs Revision on: 04/07/2025 Revision by: Shina Wadhwa (Physical Therapist)	<ul style="list-style-type: none">To improve ROM at B/L Knee extension from -20 to -10	<ul style="list-style-type: none">A-AAROM of B/I UE≤ 1SET,10RPS.,2-3/wk as tolerated. Passive gentle stretching at B/L Knees for 5 sec hold, 5 reps, within pain limits;2-3 x	PT - Physiotherapist				
Allergies	Tetracycline, Sulfa Antibiotics		D.O.B.	05/20/1942	Physician	Wallace Liang	
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Cassin, Rina (922131005045)		Admission Date	11/07/2018	Location	8 821 A	
Last Care Plan Review Completed:		09/25/2025					



Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		degrees in 3 months. To maintain strength of B/L UE for next 3 months. Revision on: 09/24/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/25/2025	a week; B/L UE strengthening exs with 1-2 lbs, 10 reps, 1-2 sets, assist as needed. 2-3 x a week; Revision on: 04/07/2025 Revision by: Shina Wadhwa (Physical Therapist)		PTA	
• Falls, at risk/potential for falling r/t impaired mobility and antipsychotic drug use. Revision on: 01/08/2025 Revision by: Jenny Liu (RAI Coord Back-up)		• Rina will be free from falls through the review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 06/08/2020 Revision by: Clarisa Amir (RPN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment:(high/low bed, wheelchair) Revision on: 02/04/2022 Revision by: Jenny Liu (RAI Coord Back-up) • Ensure Rina wearing non-slip footwear worn prior to transfer. Revision on: 11/03/2021 Revision by: Jenny Liu (RAI Coord Back-up)		PCA PCA PCA	D/E/N
• Potential for Expressive Behaviour of (verbally/physically abusive, accusatory, RESISTANCE to care need) nature related to health decline and loss of dependence. Revision on: 07/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To decrease episodic frequency of (resist care and socially inappropriate (accusatory) by next review date. ABS score will be less than (1). Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 12/25/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Rina for indications to change in or for escalating expressive behaviour risk. Revision on: 04/14/2023 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to PHYSICAL (swing at staff) as expression of behaviour include (anger, frustration, fearfulness, confusion, etc.) Revision on: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up) • PHYSICAL Behaviour: If Rina 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: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to VERBAL (yelling, screaming, calling names, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.)			
Allergies	Tetracycline, Sulfa Antibiotics		D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Cassin, Rina (922131005045)		Admission Date	11/07/2018	Location	8 821 A
Last Care Plan Review Completed:		09/25/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<p>Revision on: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• VERBAL Behaviour: If Rina 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: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refuse to use the slider) as expression of behaviour include (misunderstanding care needs, poor judgement.)</p> <p>Revision on: 04/14/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• RESISTANCE to Care Need: If Rina is refusing to use the slider re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 04/14/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate (accusatory towards staff, when her care is delayed or her request is not able to be met due to safety concerns) as expression of behaviour include (confusion, decreased insight, poor judgement.)</p> <p>Revision on: 04/14/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• SOCIALLY Inappropriate Behaviour: Provide education as needed and document</p> <p>Revision on: 04/14/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction)</p> <p>Physical:Hitting, striking out Triggers: Pain, anger, frustration</p> <p>BSO recommends to use stop and go approach. Reapproach when the resident is calm/ready. Explain tasks to be done prior to care, obtain consent. Attempt to resolve her concern. Don't take her words personally and don't argue. If the resident is upset try to redirect the conversation to something positive (ex. her daughter).</p> <p>Revision on: 12/09/2024 Revision by: Leslie Meloche (Recreation Aide)</p>		
• Use of PASD Two 1/4 bedrail/tilt w/c to residents both sides of bed to assist resident with turning and repositioning in	• Rina will be effectively supported with use of one 1/4 bedrail to her left side of bed to	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL).	Registered Staff	
Allergies	Tetracycline, Sulfa Antibiotics		D.O.B.	05/20/1942
Physician	Wallace Liang			
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses			
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Resident	Cassin, Rina (922131005045)	Admission Date	11/07/2018	Location 8 821 A
Last Care Plan Review Completed:		09/25/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
bed. Revision on: 05/05/2024 Revision by: Elsie Calumpang (RN)	optimize in aiding in turning and repositioning each day through to the next review date. And a tilt wheel chair for comfort. Revision on: 10/17/2023 Revision by: Suzanne Azar (RN) Target Date: 12/25/2025	• BED RAIL: Two 1/4 Rail to both sides in USE as a PASD to assist resident with bed mobility. Monitor every shift. Revision on: 05/05/2024 Revision by: Elsie Calumpang (RN) • TILTED CHAIR in USE as a PASD to support resident with reposition and comfort. Monitor every shift. Revision on: 04/17/2024 Revision by: Prabhjot Maan (ADOC)	PCA	D/E/N		
• Potential to experience alteration in MOOD as exhibited by (hx of non-health complaints, persistent anger with self or others) related to Decline in Health Condition, Loss of Independence Revision on: 01/10/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• Rina will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Rina for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/05/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Rina effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 02/05/2021 Revision by: Jenny Liu (RAI Coord Back-up)				
• Potential for bruising, bleeding, clotting or other complications related to use of (ANTICOAGULANT) medication. Revision on: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up)	• To monitor for bleeding and minimize complications related to use of (xarelto) through the review date. Revision on: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• 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: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up) • BLEEDING ALERT: Notify nurse immediately if Rina is bleeding (noted blood in urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.	PCA Registered Staff			
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy)	• To monitor effectiveness and for side effects of medication used each day through to the	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (Specify; anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life.				
Allergies	Tetracycline, Sulfa Antibiotics		D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Cassin, Rina (922131005045)		Admission Date	11/07/2018	Location	8 821 A
Last Care Plan Review Completed:		09/25/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 07/15/2023 Revision by: Jenny Liu (RAI Coord Back-up)		next review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	Revision on: 08/05/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
• Activities of Daily Living, self care r/t Chronic viral hep. C, CAD, Arthritis, Rheumatoid, Congestive heart failure, HTN, Osteoarthritis, Hypothyroidism and Lymphoedema. Revision on: 10/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)		• Rina's will maintain current self sufficiency in ADL abilities through the review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	• BATHING: Rina prefers (shower) on (Wednesdays and Saturdays on Day shift). Two staff (TOTAL) assistance for bathing. Maxi lift for transfer with two staff to assist. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Maximal Assist. Rina requires one to two team member assist to turn and reposition when in bed. Bedrails/Slider sheets used with turning and repositioning in bed. Revision on: 04/11/2025 Revision by: Jenny Liu (RAI Coordinator) • DRESSING: Maximal Assist: Rina is able to guide her arms and legs through the clothes, but required weight bearing assistance from two staff to pull up her pants, socks, shoes and adjust her clothes. Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Rina eats in the floor dining room/on her bed independently once set up done. Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator) • LOCOMOTION: Total assistance- Rina is using wheelchair for locomotion and requires one staff to porter her on/off the unit. Revision on: 11/05/2021 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL HYGIENE: Maximal Assist: Rina is able to wash her hands, face and comb her hair. and required weight bearing assist from two team members to provide peri-care. Revision on: 04/11/2025 Revision by: Jenny Liu (RAI Coordinator) • HAND HYGIENE: 1 staff to provide Reminder assistance to Use hand santizer for			PCA	
Allergies	Tetracycline, Sulfa Antibiotics			D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses						
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Resident	Cassin, Rina (922131005045)			Admission Date	11/07/2018	Location	8 821 A
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Activities of Daily Living, self care r/t Chronic viral hep. C, CAD, Arthritis, Rheumatoid, Congestive heart failure, HTN, Osteoarthritis, Hypothyroidism and Lymphoedema. Revision on: 10/14/2022 Revision by: Jenny Liu (RAI Coord Back-up)</div>			<div>hand hygiene. Revision on: 08/18/2021 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • TOILET USE: Rina is in a maxi lift and requires 3 staff assistance while changing her in bed. Revision on: 01/10/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TRANSFERRING: Rina requires the use of a total mechanical lift for transferring from bed to wheelchair. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator) • TRANSFER LIFT/SLING: extra large size sling, use regular maxi sling, not the black pressure relieving sling Revision on: 07/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) • ORAL CARE: Rina required set up assistance and can clean her own teeth Revision on: 11/27/2018 Revision by: Joe Albano (RAI Coordinator)</div>			PCA	
<div>• Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF), Hypertension, Coronary Artery Disease Revision on: 11/05/2021 Revision by: Jenny Liu (RAI Coord Back-up)</div>		<div>• To treat and minimize signs/symptoms or complications associated with CHF and Hypertension through to the next review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025</div>	<div>• 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 (CHF, CAD and HTN) as per MD Order and monitor for side effects. Revision on: 11/05/2021 Revision by: Jenny Liu (RAI Coord Back-up) • OXYGEN: Administer Oxygen as per MD order. Revision on: 11/13/2019 Revision by: Qiufeng Liu (Registered Practical Nurse) • WEIGHT: Check/Document weight as per Order. Notify MD of any sudden weight gain. Revision on: 10/14/2022</div>			Registered Staff	
Allergies	Tetracycline, Sulfa Antibiotics			D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Cassin, Rina (922131005045)			Admission Date	11/07/2018	Location	8 821 A
Last Care Plan Review Completed:		09/25/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF), Hypertension, Coronary Artery Disease</p> <p>Revision on: 11/05/2021</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p>			<p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• BP MONITORING: Monitor BLOOD PRESSURE (monthly and as ordered). Notify MD of abnormalities as needed.</p> <p>Revision on: 11/05/2021</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• COMPRESSION Wear:Compression stockings knee high 20-30 mmHg to bilateral lower legs, 12 hours On and 12 hours Off of night.</p> <p>Revision on: 11/13/2019</p> <p>Revision by: Qiufeng Liu (Registered Practical Nurse)</p>				
<p>• Risk for/Impaired SKIN INTEGRITY related to Thin fragile Skin, Impaired Mobility</p> <p>Revision on: 05/04/2021</p> <p>Revision by: Mitchell Atkinson (Activities/Rec Therapy)</p>		<p>• To protect and maintain skin integrity each day through to the next review.</p> <p>Revision on: 07/17/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>Target Date: 12/25/2025</p>	<p>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.</p> <p>PCA</p> <p>• EQUIPMENT: Rina requires a wedge pillow to offload pressure to her heels while in bed. Blue Pressure relieving sling used and kept under Rina</p> <p>PCA</p> <p>Revision on: 02/02/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• POSITIONING: Turn, reposition at least every 2 hours or when in bed/wheelchair as per Rina preference to offload pressure.</p> <p>PCA</p> <p>Resident often refuses, continue to approach and provide education</p> <p>Revision on: 07/25/2022</p> <p>Revision by: Haley Cadarian (Quality Lead)</p> <p>Q2h</p>				
<p>• Potential for BOWEL INCONTINENCE related to Impaired mobility and bedfast all of time.</p> <p>Revision on: 05/04/2021</p> <p>Revision by: Mitchell Atkinson (Activities/Rec Therapy)</p>		<p>• Rina will have bowel incontinence managed every shift through to the next review period.</p> <p>Revision on: 07/17/2023</p> <p>Revision by: Katie Wolters-Savo</p>	<p>• BOWEL Continence level is (Total Incontinence). Report change to level as noted.</p> <p>PCA</p> <p>Revision on: 02/05/2021</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</p> <p>PCA</p>				
Allergies	Tetracycline, Sulfa Antibiotics			D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Cassin, Rina (922131005045)			Admission Date	11/07/2018	Location	8 821 A
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		(RAI Coordinator) Target Date: 12/25/2025	<ul style="list-style-type: none"> • INCONTINENCE PRODUCT: Resident uses BEIGE color brief per prevail sheet. 		PCA	
<ul style="list-style-type: none"> • Expressed Wishes and Beliefs related to Rina Medical Treatment and End of Life Care 		<ul style="list-style-type: none"> • To support and honor Rina expressed wishes and beliefs through to the End of Life. 	<ul style="list-style-type: none"> • CPR: Rina wishes express CPR, however TRANSFER to hospital decision will be made at the time. 			
Revision on: 02/05/2021 Revision by: Jenny Liu (RAI Coord Back-up)		Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	Revision on: 07/05/2023 Revision by: Gurjit Kaur (RN)			
<ul style="list-style-type: none"> • SPIRITUAL BELIEFS: Rina is of the Roman Catholic Faith. 		<ul style="list-style-type: none"> • To provide Rina spiritual support as interested through to the next review date. 	<ul style="list-style-type: none"> • SELF-DIRECTED SPIRITUAL Activities: Rina engages in communion, praying, etc. 		ACT	
Revision on: 05/26/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	Revision on: 11/08/2019 Revision by: Shayna Lee Wonsch (Activation Manager)			
<ul style="list-style-type: none"> • Potential for complications related to dx of hypothyroidism. 		<ul style="list-style-type: none"> • Rina will remain free from complications related to hypothyroidism through review date. 	<ul style="list-style-type: none"> • Assess/record/report to MD prn symptoms of hypothyroidism such as; weight gain, confusion, altered mental status, feeling of being cold, tongue enlargement 		Registered Staff PCA	
Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)		Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025				
<ul style="list-style-type: none"> • ALLERGIC to Tetracycline, Sulfa Antibiotics 		<ul style="list-style-type: none"> • Rina will remain free of allergen through next review date. 	<ul style="list-style-type: none"> • Staff to remain aware of allergen (Tetracycline, Sulfa Antibiotics) and prevent contact with. 		All	
Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)		Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)			
			<ul style="list-style-type: none"> • Registered staff to ensure MD's and Pharmacy aware of allergy and ensure she does not receive it. 		Registered Staff	
			Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)			
Allergies	Tetracycline, Sulfa Antibiotics		D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses					
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Last Care Plan Review Completed:		09/25/2025				

Care Plan Report

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• Potential for pain, discomfort related to Dx of (Arthritis/Osteoarthritis/Rheumatoid Arthritis) Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)		• Rina will be free of complications related to arthritis, such as contractures, joint stiffness, swelling, or decline in mobility through next review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	• Assess for pain and document, using Rina's own words as possible. Use standardized pain scale in order to evaluate severity and response to interventions Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)			Registered Staff	
• Rina is immunity impaired related to (Hepatitis C). Onset date (Lab result -11/12/18) Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)		• To prevent further infection through next review Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	• Keep Rina informed of any health status changes Revision on: 11/28/2018 Revision by: Joe Albano (RAI Coordinator)			Registered Staff	
• Urinary Incontinence r/t decreased mobility Revision on: 11/27/2018 Revision by: Joe Albano (RAI Coordinator)		• Rina will have urinary incontinence managed every shift through to the next review period. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	• URINARY Continence level is (TOTAL Incontinent). Report change to level as noted. Revision on: 02/05/2021 Revision by: Jenny Liu (RAI Coord Back-up) • CHECK and CHANGE: Rina experiences TOTAL incontinence and requires checks every 2 hrs and change each time noted to be soiled. Revision on: 07/22/2022 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Resident uses BEIGE color brief per prevail sheet. Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	
• Sleep Patterns for Rina Revision on: 11/27/2018 Revision by: Joe Albano (RAI Coordinator)		• To meet Rina's personal preferences for sleep patterns through the next review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo	• Usual bedtime put back to bed after lunch per resident and usual wake time is between 0600 and 0700hrs Revision on: 05/07/2021 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	
Allergies	Tetracycline, Sulfa Antibiotics		D.O.B.	05/20/1942	Physician	Wallace Liang	
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses						
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Resident	Cassin, Rina (922131005045)		Admission Date	11/07/2018	Location	8 821 A	
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	(RAI Coordinator) Target Date: 12/25/2025	<ul style="list-style-type: none"> Rina wears her own pajamas to bed each night Revision on: 11/27/2018 Revision by: Joe Albano (RAI Coordinator)	PCA	
• Nutrition Risk Level (diet details)	<ul style="list-style-type: none"> Rina will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 07/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/25/2025	<ul style="list-style-type: none"> LABELLED SNACK PM: cheese and crackers Mon/Wed/Fri per Rina's request Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA Registered Practical Nurse RN	D
	<ul style="list-style-type: none"> Weight will be stable or decrease towards realistic GWR 100-110 kg through to next review date. Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/25/2025	<ul style="list-style-type: none"> NUTRITION RISK: Rina is moderate risk level. Revision on: 10/29/2021 Revision by: Anna Slack (Registered Dietitian)	Dietitian (RD) Dietary Manager	
	<ul style="list-style-type: none"> Rina will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2280 ml/day (20 ml/kg using 114 kg weight) through to next review date. Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/25/2025	<ul style="list-style-type: none"> DIET ORDER: Rina will receive regular diet, regular texture Revision on: 04/10/2023 Revision by: Anna Slack (Registered Dietitian)	Diet Food Services Aide PCA	
		<ul style="list-style-type: none"> FLUID CONSISTENCY: Rina drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/15/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)	Diet PCA	
		<ul style="list-style-type: none"> FLUID TARGET: Encourage Rina to drink at least 1824 ml/day Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	
		<ul style="list-style-type: none"> DINING INSTRUCTIONS: Resident can request minced texture food per her discretion Revision on: 04/10/2023 Revision by: Anna Slack (Registered Dietitian)	Diet Food Services Aide Registered Practical Nurse PCA	
		<ul style="list-style-type: none"> LOW CALORIE: Interventions for weight management/general health: 1 glass of milk at meals, encourage water vs. juice to drink, 1/2 portion of starch at meals, and 1/2 portion of pie/baked good. Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD))		
		<ul style="list-style-type: none"> LABELLED SNACK: 1/2 banana and 200 ml orange juice at breakfast daily per Rina's request Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	D/E

Allergies	Tetracycline, Sulfa Antibiotics	D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Cassin, Rina (922131005045)	Admission Date	11/07/2018	Location	8 821 A
Last Care Plan Review Completed:		09/25/2025			

Care Plan Report


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Diagnosis

Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Primary generalized (osteo)arthrosis(M15.0), Benign hypertension(I10.0), Hypothyroidism, unspecified(E03.9), Lymphoedema, not elsewhere classified(I89.0), Chronic viral hepatitis C(B18.2), Dehydration(E86.0), Acute renal failure, unspecified(N17.9), Suspiciousness and marked evasiveness(R46.5), Unspecified dementia(F03)

Allergies	Tetracycline, Sulfa Antibiotics	D.O.B.	05/20/1942	Physician	Wallace Liang
Diagnosis	Arthritis, unspecified, unspecified site(M13.99), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I50.0), Rheumatoid arthritis, unspecified(M06.9), Prima...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Cassin, Rina (922131005045)	Admission Date	11/07/2018	Location	8 821 A
Last Care Plan Review Completed:		09/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<div><div>• Potential for Expressive Behaviour of History of VERBAL, PHYSICAL, Socially inappropriate, RESISTANCE to care needs related to Dementia</div><div>Revision on: 10/23/2025</div><div>Revision by: Jenny Liu (RAI Coordinator)</div></div>	<div><div>• To promote safety for Stella and/or others during each episode of (Expressive Behaviour) through to the next review date.</div><div>Revision on: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div><div>Target Date: 01/18/2026</div></div> <div><div>• Stella will be supported to adjust to her new environment to lower risk of triggering former (VERBALLY inappropriate, etc.) behaviour episodes through to the next review.</div><div>Revision on: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div><div>Target Date: 01/18/2026</div></div>	<div><div>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Stella for indications to change in or for escalating expressive behaviour risk.</div><div>Revision on: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div></div> <div><div>• TRIGGERS leading to VERBAL (profanity, calling names, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.)</div><div>Revision on: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div></div> <div><div>• VERBAL Behaviour: If Stella 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: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div></div> <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 (confusion, misunderstanding care needs, poor judgement, etc.)</div><div>Revision on: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div></div> <div><div>• RESISTANCE to Care Need: If Stella 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: 10/21/2025</div><div>Revision by: Maryola Perion (RN)</div></div> <div><div>• TRIGGERS leading to SOCIALLY Inappropriate disruptive vocalizations as expression of behaviour include confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</div><div>Revision on: 10/23/2025</div><div>Revision by: Jenny Liu (RAI Coordinator)</div></div> <div><div>• SOCIALLY Inappropriate Behaviour: provide re-direction, use stop and go approach. Document the behaviors, refer to internal BSO/MD as needed.</div><div>Revision on: 10/23/2025</div><div>Revision by: Jenny Liu (RAI Coordinator)</div></div> <div><div>• DELUSION: Son reports some days resident wants to go to her parents home as she misses them at times believes parents are alive, fixed belief that she goes to the</div></div>	Registered Practical				
Allergies	No Known Allergies		D.O.B.	01/11/1937	Physician	Wallace Liang	
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified (G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Dale, Stella (922131005669)		Admission Date	10/21/2025	Location	8 811 A	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">• Potential for Expressive Behaviour of History of VERBAL, PHYSICAL, Socially inappropriate, RESISTANCE to care needs related to Dementia Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		washroom and completes her own care and has no memory issues. If staff are noting that the resident is having delusion, immediately inform Registered Staff. Monitor for the signs and symptoms of delusions and report to the Physician. Continue to build trust with the resident. Focus on the resident feelings rather than delusion itself. Engage resident with activities she likes. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	Nurse RN			
<ul style="list-style-type: none">• Alteration in skin integrity related to #2 - MASD - IAD Groin Onset date: Admission Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• To promote intact skin integrity through healing of MASD. Revision on: 10/22/2025 Revision by: Suzanne Azar (RN) Target Date: 01/18/2026	<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: 10/22/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none">• TOPICAL TX: Apply topical treatment to groin as MD Order. Protectant paste. Revision on: 10/22/2025 Revision by: Suzanne Azar (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. MASD. Revision on: 10/22/2025 Revision by: Suzanne Azar (RN)	Registered Practical Nurse RN Registered Practical Nurse Registered Practical Nurse			
<ul style="list-style-type: none">• Nutrition Risk Level Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Stella will be adequately nourished aeb consuming >75%	<ul style="list-style-type: none">• NUTRITION RISK: Stella is moderate risk level. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))	Dietitian (RD)			
Allergies	No Known Allergies		D.O.B.	01/11/1937	Physician	Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Dale, Stella (922131005669)		Admission Date	10/21/2025	Location	8 811 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		at meals and snacks through to next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• DIET ORDER: Stella will receive Regular diet, Regular texture (cut into small pieces) Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Stella drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID TARGET: Encourage Stella to drink at least 1224 ml/day. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DINING INSTRUCTIONS: Cut food into small pieces Encourage Stella to eat slowly No added salt (no salt packets or shaker) Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH FIBRE: prune juice at breakfast Mon/Wed/Fri Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
		• Will weigh within realistic GWR 40-50 kg through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026				PCA	
		• Stella will be adequately hydrated aeb drinking 100% of total fluid requirement: 1224 ml/day (30 ml/kg using 40.8 kg weight) through to next review date. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026				Registered Practical Nurse	
						PCA	D/E
• Alteration in skin integrity with risk for infection or complications related to #1 - Open Lesion Left Hand, 5th Digit (Small Finger) Onset date: Admission Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		• To promote optimal healing of Open Lesion within the target date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with abrasion for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/21/2025 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: 10/21/2025 Revision by: Maryola Perion (RN)				
Allergies	No Known Allergies			D.O.B.	01/11/1937	Physician	Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Dale, Stella (922131005669)			Admission Date	10/21/2025	Location	8 811 A

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Stella is experiencing episode of INFECTION (finger fungal infection). Onset date: On admission Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	<div>• To have infection adequately managed and treated without further complications by the target date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026</div>	<div>• MONITORING: Utilize holistic perspective of monitoring resident for signs/symptoms, hydration status, overall health condition, process of healing, etc. until stable. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>				
<div>• Potential to experience alteration in CARDIAC FUNCTION related to: Atrial Fibrillation Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	<div>• To treat and minimize signs/symptoms or complications associated with Atrial Fibrillation through to the next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Stella)/SDM in decision making of Cardiac Care Management for Atrial Fibrillation. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div> <div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Atrial Fibrillation for changes to health status and alteration or complications affecting cardiac function. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer medication for Atrial Fibrillation as per MD Order and monitor for side effects. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	Registered Practical Nurse RN			
<div>• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia, new environment. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	<div>• To promote adequate rest/sleep for Stella based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026</div>	<div>• REST PATTERN: Preferred bedtime (specify), usual wake time (specify) and daytime naps (specify).</div>	PCA			
<div>• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, etc.) Revision on: 10/21/2025</div>	<div>• To monitor effectiveness and for side effects of medication used each day through to the</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 10/21/2025</div>				
Allergies	No Known Allergies		D.O.B.	01/11/1937	Physician	Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Dale, Stella (922131005669)		Admission Date	10/21/2025	Location	8 811 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Maryola Perion (RN)		next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026 • To promote Stella'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) Target Date: 01/18/2026	Revision by: Maryola Perion (RN)			
• Potential for BOWEL INCONTINENCE related to Impaired Mobility, Dementia. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		• Stella will have bowel incontinence managed every shift through to the next review period. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Total Incontinence. Report change to level as noted. Revision on: 10/21/2025 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 Large brief. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		Registered Staff	
• URINARY INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		• Stella will have urinary incontinence managed every shift through to the next review period. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• 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 TOTAL Incontinent. Report change to level as noted. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses Large brief Revision on: 10/21/2025		PCA	PCA
Allergies	No Known Allergies		D.O.B.	01/11/1937	Physician	Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Dale, Stella (922131005669)		Admission Date	10/21/2025	Location	8 811 A

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• URINARY INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 10/21/2025 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN)			
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Incontinence		• To protect and maintain skin integrity each day through to the next review. Target Date: 01/18/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.		PCA	
• Altered VISION related to Macular Degeneration, Use of eyeglasses. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		• Stella supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026 • To treat and minimize complications of macular degeneration through to next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• EYEGLASSES: Stella wears eyeglasses. Assist to clean eyeglasses as needed and store in night table drawer when sleeping. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		PCA	
• COGNITIVE LOSS; alteration in thought processes (specify; memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia		• (Resident name) will be supported to maintain cognitive function through the review date. Current CPS is (SPECIFY; 1, 2, 3, or 4)	• ORIENTATION: Gently reorient to (SPECIFY; person, place, time) as needed when (Resident's Name) is feeling lost or in confused state. All			
Allergies	No Known Allergies			D.O.B.	01/11/1937	Physician Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Dale, Stella (922131005669)			Admission Date	10/21/2025	Location 8 811 A

Care Plan Report

Focus		Goal	Interventions	Position	Freq/Resolved
		Target Date: 01/18/2026			
<ul style="list-style-type: none"> Increased risk for FALLS related to Macular Degeneration, History of falls, Impaired Mobility and balance. 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: 01/18/2026	<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: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	D/E/N
			<ul style="list-style-type: none"> ENVIRONMENT: Secure environment: reduce clutter, etc.) to reduce fall risk for Stella. 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"> Potential for PAIN and alteration in comfort level Most Current MDS Pain Score is (fill in score) Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Target Date: 01/18/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. 	RN Registered Practical Nurse	
			<ul style="list-style-type: none"> NON VERBAL CUES of PAIN for Stella 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: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Immobility, Macular Degeneration, Dementia. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> Stella 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: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	<ul style="list-style-type: none"> BATHING: Stella prefers showers on Monday and Thursdays Evening shift. Stella requires Total assistance with one staff with bathing. Nail care to be provided on shower/bath day. Revision on: 10/29/2025 Revision by: Alyssa Egan (ADOC)	PCA	
			<ul style="list-style-type: none"> BED MOBILITY: Stella requires Total assistance from two staff for bed mobility. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
		<ul style="list-style-type: none"> Stella will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care 	<ul style="list-style-type: none"> DRESSING: Stella requires Total assistance from two staff for dressing UPPER & LOWER body. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	PCA	
			<ul style="list-style-type: none"> EATING: Stella requires EXTENSIVE from one staff to assist for eating. 	PCA	
Allergies	No Known Allergies		D.O.B.	01/11/1937	Physician Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Dale, Stella (922131005669)		Admission Date	10/21/2025	Location 8 811 A

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved			
		needs are met each day through to the next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	Eats in the unit dining room - Floor 8. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)				PCA				
			• LOCOMOTION: Stella is using a wheelchair as her mode of locomotion and requires one staff to propel her on and/or off unit. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)								
			• PERSONAL HYGIENE: Stella requires Total assistance from 1 to 2 staff in washing/drying her face and hands, providing peri care. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)				PCA				
			• HAND HYGIENE: 1 staff to provide TOTAL assistance to use soap/water, apply sanitizer, dry hands, etc. for hand hygiene. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)								
			• TOILET USE: Stella requires maximal assistance from two staff with the use of a sit to stand lift to transfer her to and from wheelchair to the toilet, brief changes and to provide peri care. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)				PCA				
			• TRANSFERRING: Stella requires the use of a sit to stand lift from two staff to transfer her to and from bed to wheelchair. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)								
			• TRANSFER LIFT/SLING: Sit to stand lift and small SIZE of sling needed for transfer. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)				PCA				
			• ORAL CARE: Stella has some teeth missing. Requires one staff total assistance in providing oral care. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)								
			• Expressed Wishes and Beliefs related to Stella's Medical Treatment and End of Life Care		• To support and honor (resident's name) expressed wishes and beliefs through to	• CPR: Stella wishes to have CPR and TRANSFER to hospital. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)					
			Allergies	No Known Allergies			D.O.B.	01/11/1937		Physician	Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses										
Facility	Berkshire Care Centre						Print Date	10/30/2025			
Resident	Dale, Stella (922131005669)			Admission Date	10/21/2025		Location	8 811 A			

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	the End of Life. Target Date: 01/18/2026			

Diagnosis

Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), Arthritis, unspecified, unspecified site(M13.99), Congestive heart failure(I50.0)

Allergies	No Known Allergies	D.O.B.	01/11/1937	Physician	Wallace Liang
Diagnosis	Degeneration of macula and posterior pole(H35.3), Unspecified dementia(F03), Atrial fibrillation, unspecified(I48.90), Transient cerebral ischaemic attack, unspecified(G45.9), Immobility(R26.3), ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Dale, Stella (922131005669)	Admission Date	10/21/2025	Location	8 811 A

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• Karl DECLINES PARTICIPATION in structured programs related to personal choice.</p> <p>ISE Score: 4/6 Revision on: 07/31/2025 Revision by: Megan Pipe (Recreation Aide)</p>		<p>• Karl participates in Independent/Self-Directed activities monthly through to the next review date.</p> <p>Karl will participate in 5-10x group and or 1:1 activities per month by the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026</p>	<p>• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, reading independently (mystery, thriller, sci-fi) visiting with residents/team members, etc. Revision on: 05/07/2025 Revision by: Megan Pipe (Recreation Aide)</p> <p>• 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: 04/20/2020 Revision by: Shayna Lee Wonsch (Activation Manager)</p> <p>• INVITATION: Offer friendly invite to structured programs scheduled in the home. Karl enjoys Resident Council, socials, special events, library cart, happy hour, karaoke (games (especially trivia), tuck shop, movies, etc. Revision on: 05/07/2025 Revision by: Megan Pipe (Recreation Aide)</p>			ACT	
<p>• Potential for Expressive Behaviour of Resisting care, hx of inappropriate smoking. Will refuse to change, eating, showering. Revision on: 11/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p>		<p>• Karl will exhibit fewer episodes of Resisting care, inappropriate smoking Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Karl for indications to change in or for escalating expressive behaviour risk. Revision on: 04/20/2022 Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <p>• Discharged by BSO. Revision on: 04/20/2022 Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 08/31/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• RESISTANCE to Care Need: If Karl is refusing to (bathe, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 04/20/2022 Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <p>• MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. Revision on: 03/02/2023</p>			Registered Practical Nurse	
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Dembach, Karl (922131003784)		Admission Date	06/24/2013	Location	8 815 A	
Last Care Plan Review Completed:		08/07/2025					

Care Plan Report

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<ul style="list-style-type: none">• Potential for Expressive Behaviour of Resisting care, hx of inappropriate smoking. Will refuse to change, eating, showering. Revision on: 11/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)		Revision by: Jenny Liu (RAI Coord Back-up)	RN			
<ul style="list-style-type: none">• Potential to experience alteration in MOOD related to dx with Depression. Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none">• Karl will maintain their mood as evidenced by Depression Rating Scale 0/14 at a range of 1-2 by the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	<ul style="list-style-type: none">• SSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Karl for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up) <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: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)				
<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) Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<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: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (Specify; anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none">• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff			
<ul style="list-style-type: none">• Altered VISION related to DECREASED/IMPAIRED VISION and Dx of CATARACTS	<ul style="list-style-type: none">• Karl will be able to function safely in his environment through next review date.	<ul style="list-style-type: none">• VISUAL IMPAIRMENT: Resident has use to have glasses but no longer does. Team to monitor for safety and provide direction as needed.	PCA			
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses					
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Resident	Dembach, Karl (922131003784)		Admission Date	06/24/2013	Location	8 815 A
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Care Plan Report

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Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)	Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	May use larger print to assist. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Altered COMMUNICATION as exhibited by limitations to r/t: usually understood and slurred speech. Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• Karl will maintain current communication abilities through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026 • Karl will be able to make basic needs known on a daily basis through the review date Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• PRIMARY LANGUAGE: Karl primary language is English. He is able to speak/understand English. Revision on: 04/06/2021 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 04/06/2021 Revision by: Jenny Liu (RAI Coord Back-up) • INSTRUCTION GUIDANCE: Karl needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• FALLS, at risk/potential for falling r/t Gait disturbance, Stroke, Cataracts, Hx of falls. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)	• Karl will be free from fall related injury through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026 • Karl will be free from falls through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it Revision on: 11/16/2022 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: high/low bed, wheelchair Revision on: 11/15/2024 Revision by: Jenny Liu (RAI Coord Back-up) • ALARMS: Requires Chair alarm. Check placement and working order. Has a history of removing his chair alarm. Revision on: 11/16/2022 Revision by: Chelsea Campbell-Wright (IPAC LEAD)	PCA PCA PCA	D/E/N D/E/N

Allergies	Peanut	D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses				
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Resident	Dembach, Karl (922131003784)	Admission Date	06/24/2013	Location	8 815 A
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Care Plan Report

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<ul style="list-style-type: none"> Potential for CONSTIPATION related to hx of problem to defecate, hard stool, decreased mobility, etc.) Revision on: 11/23/2023 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Karl will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	<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		
<ul style="list-style-type: none"> Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA) 	<ul style="list-style-type: none"> To treat and minimize signs/ symptoms or complications associated with CVA through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	<ul style="list-style-type: none"> MEDICATION: Administer medication as per MD order. Monitor effectiveness and for side effects. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> 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: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up)			
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension 	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	<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. BP MONITORING: Monitor BLOOD PRESSURE as ordered. Notify MD of abnormalities as needed. PACEMAKER Insitu: Resident has pacemaker. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff		
<ul style="list-style-type: none"> Potential to experience (Specify; rash, hives, anaphylaxis, etc.) related to ALLERGY of Peanut. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Karl will be protected from exposure to allergen each day through next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status and complications mortality. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> ALLERGY ALERT: Karl has ALLERGY to Peanut. Prevent contact with and report if 			
Allergies	Peanut	D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses				
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Resident	Dembach, Karl (922131003784)	Admission Date	06/24/2013	Location	8 815 A
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Back-up) Target Date: 01/26/2026	noted to experience symptoms (Specify; rash, hives, swelling, difficulty breathing, etc.). Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Karl Allergy to Peanut and minimize risk for exposure to allergen. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up)			
• Use of PASD two 1/4 bedrails to assist Karl with Activity of Daily Living- turning and repositioning while in bed. Tilt function on wheelchair is a PASD to support with ADLs (Prevention of skin breakdown/discomfort, & repositioning) Revision on: 05/12/2022 Revision by: Haley Cadarian (Quality Lead)		• Karl will be effectively supported with use of two 1/4 bedrails to optimize Activity of Daily Living each day through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of monitoring Karl for continued benefit to use two 1/4 bedrails as to support turning and repositioning in bed. Revision on: 10/25/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • BED RAIL (TWO PARTIAL): 1/4 bedrails in USE as a PASD to assist Karl with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 11/16/2022 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • TILTED CHAIR in USE as a PASD to support resident with ADL and positioning Monitor every shift. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC)		PCA	D/E/N
• POTENTIAL FOR PAIN r/t Stroke, Hepatic Cirrhosis, HIV infection, Emphysema, Neuropathy (as per Karl). Pain score is 0/3 Revision on: 03/13/2022 Revision by: Jenny Liu (RAI Coord Back-up)		• Karl's pain will be at a tolerable level through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026 • Karl will maintain his PAIN Score of 0/3 through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• 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: 06/30/2021 Revision by: Jenny Liu (RAI Coord Back-up)		RN Registered Practical Nurse Registered Practical Nurse RN	
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Dembach, Karl (922131003784)		Admission Date	06/24/2013	Location	8 815 A
Last Care Plan Review Completed:		08/07/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• POTENTIAL FOR PAIN r/t Stroke, Hepatic Cirrhosis, HIV infection, Emphysema, Neuropathy (as per Karl). Pain score is 0/3 Revision on: 03/13/2022 Revision by: Jenny Liu (RAI Coord Back-up)							
• Expressed Wishes and Beliefs related to Karl Medical Treatment and End of Life Care Revision on: 04/06/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• To support and honor Karl expressed wishes and beliefs through to the End of Life. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• 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)				
• Potential for RISK OF/IMPAIRED SKIN INTEGRITY/Pressure Ulcer r/t Incontinence, Fragile Skin (aging process), HIV, Herpes Viral Infection, left foot pitting edema. Revision on: 03/16/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• 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 at least every 2 hours or bed/wheelchair as per Karls preference to offload pressure. Revision on: 05/18/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA PCA	 Q2h
• Altered ability to complete Activities of Daily Living (ADLs) related to: Limited Mobility, Stroke, HIV infection, Hx of falls. Revision on: 12/02/2020		• Karl will feel supported in coping with changing functional abilities through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord	• BATHING: Karl prefers (shower/bath) on (Tuesdays and Saturdays on Day shift). Two staff (Maximal to TOTAL) assistance for bathing. Maxi lift for transfer with two staff to assist. Nail care to be provided on shower/bath day.			PCA	
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses						
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Care Plan Report

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Revision by: Maryola Perion (RN)		Back-up) Target Date: 01/26/2026	<p>Continue to encourage as he refuse. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED MOBILITY: Maximal assist- Karl requires maximal assistance from one to two PCA team members to turn and reposition in bed. Karl will self adjust the height of his bed. Bedrails in place aim bed mobility. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DRESSING: Maximal Assist: Karl is able to help with upper extremities by guide PCA through the clothes. Staff member to provide Maximal 1-2 assist to dress him from head to toe. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Karl requires supervision due to eat in the room often. PCA</p> <p>May requires one team member to feed him when he is tired or he cannot make the coordinated movements.</p> <p>He attends the main floor Bistro for his meals when he does not stay in his room. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Total assistance- Karl is using a wheelchair as his main mode of PCA locomotion and requires one staff to porter him on/off the unit. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: 1-2 team members maximal to total assistance with PCA personal hygiene. Level varies due to his cognition and ability to sequence and follow task directions. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: Total assistance with his hand hygiene care needs. PCA Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: A MAXI LIFT and 2 staff maximal assistance is required while PCA changing in bed.</p>				
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses						
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Resident	Dembach, Karl (922131003784)		Admission Date	06/24/2013	Location	8 815 A	
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Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Shayna Lee Wonsch (Activation Manager)	Back-up) Target Date: 01/26/2026	• CUE TASKS: Break tasks into manageable subtasks, Karl can comprehend and follow. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Bowel Continence Revision on: 07/29/2017 Revision by: Maryola Perion (Registered Nurse)	• Karl will have bowel incontinence managed every shift through to the next review period. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• Bowel Protocol: Per policy Revision on: 07/29/2017 Revision by: Maryola Perion (Registered Nurse) • BOWEL Continence level is (Total Incontinence). Report change to level as noted. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • Bowel Pattern: At least 1 bowel movement every 3 days. Revision on: 04/28/2017 Revision by: Clarisa Amir (Registered Practical Nurse)	Registered Staff PCA PCA PCA			
• Urinary Incontinence Revision on: 07/29/2017 Revision by: Maryola Perion (Registered Nurse)	• Karl will receive the appropriate support, he will be encouraged to use the toilet, and assist him if required to manage incontinence through the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is (TOTAL Incontinent). Report change to level as noted. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • CHECK and CHANGE: Karl experiences TOTAL incontinence and requires checks every 2 hours and change each time noted to be soiled. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • Continence products: Karl wears a blue color brief per prevail sheet. Revision on: 02/17/2025 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA PCA			
• Nutrition Risk Level (diet details)	• Karl will be adequately	• LABELLED SNACK HS: ice cream cup daily	PCA	E		
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses					
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		nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse RN PCA	D
		• Will weigh within Realistic weight range of 70-80kg through to next review date. Revision on: 10/29/2025 Revision by: Debora Choi (Dietitian (RD)) Target Date: 01/26/2026	• LABELLED SNACK PM: pudding daily Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse RN Dietitian (RD)	
			• NUTRITION RISK: Karl is HIGH risk level. Revision on: 10/29/2025 Revision by: Debora Choi (Dietitian (RD))					
			• DIET ORDER: Karl will receive regular diet, minced texture Revision on: 04/29/2024 Revision by: Anna Slack (Registered Dietitian)				PCA	
			• FLUID CONSISTENCY: Karl drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/15/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)				Diet PCA	
			• FLUID TARGET: Encourage Karl to drink a minimum of 1415 mL/day. Likes to drink milk and coffee. Revision on: 10/29/2025 Revision by: Debora Choi (Dietitian (RD))				PCA	
			• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.				Dietary aide PCA	
			• DINING INSTRUCTIONS: Offer a "combo" plate at lunch and supper Do not serve potato chips, nacho chips, rice itself, or small dry/loose food particles Encourage at least 2 sippy cups of fluids (500 ml) at each meal Revision on: 05/08/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse	
			• ADAPTIVE AIDS: Karl requires sippy cups and rimmed plate at all meals Revision on: 03/31/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)				Diet PCA	
			• Karl has ALLERGY to nuts reacting to this food by develops a rash Revision on: 02/19/2016				Diet PCA	
Allergies	Peanut		D.O.B.	04/05/1945		Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses							
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level (diet details)			Revision by: Anna Slack (Registered Dietitian) • MEDPASS SUPPLEMENTS: 120ml Resource 2.0 three times a day Revision on: 01/10/2025 Revision by: Rachelle Ly (Dietitian (RD)) • LABELLED SNACK AM: applesauce daily Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			Restorative Care Aide	PCA
• SLEEP PATTERNS Revision on: 01/05/2016 Revision by: Clarisa Amir (Registered Practical Nurse)		• To promote adequate rest/sleep for Karl based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• Melatonin is taking by Karl for sleeping Revision on: 02/25/2016 Revision by: Clarisa Amir (Registered Practical Nurse) • REST PATTERN: bedtime is as desire, usually 9:00 pm usual wake time is 8:00 am Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up) • SLEEPWEAR: night attire for Karl is his own street clothes, and just pull-ups briefs at times Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)			Registered Staff	PCA
• Karl is IMMUNITY IMPARED related to HIV Infection, and Herpes viral infection(onset date unknown) Revision on: 11/17/2015 Revision by: Clarisa Amir (Registered Practical Nurse)		• To have infection adequately managed and treated without further complications by target date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• HEALTH EDUCATION: Engage with resident/SDM to enhance their knowledge of infection control practices (hand hygiene, visitation, PPEs, isolation, transmission) Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up) • PPE PRECAUTIONS: Precaution identified as (CONTACT/droplet) for HIV and requires use of the following PPEs (Gloves, Gown, Mask, Faceshield.) when (providing direct care, handling soiled clothes and linens, disposing of incontinent product, etc.).				
Allergies	Peanut		D.O.B.	04/05/1945	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Dembach, Karl (922131003784)		Admission Date	06/24/2013	Location	8 815 A	
Last Care Plan Review Completed:		08/07/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATIONS: medications as prescribed by MD. Monitor for side effects. Revision on: 02/15/2024 Revision by: Jenny Liu (RAI Coord Back-up)		
• Karl has potential for complications, s/sx related to diagnosis of EMPHYSEMA, ASTHMA. Revision on: 11/17/2015 Revision by: Clarisa Amir (Registered Practical Nurse)	• To treat and minimize signs/symptoms or complications associated with (EMPHYSEMA, ASTHMA) each day through to next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Emphysema and asthma for changes to health status and alteration or complications affecting respiratory function. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • BREATHING EXERCISE: Encourage coughing and deep breathing Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • OXYGEN: Administer Oxygen as per MD order. Revision on: 12/02/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication (inhalers) as per MD order and monitor for side effects. Revision on: 03/13/2022 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	

Allergies	Peanut	D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Dembach, Karl (922131003784)	Admission Date	06/24/2013	Location	8 815 A
Last Care Plan Review Completed:		08/07/2025			


Care Plan Report

Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunodeficiency virus [HIV] disease(B24), Depressive episode, unspecified(F32.9), Emphysema, unspecified(J43.9), Other and unspecified cirrhosis of liver(K74.6), Presence of cardiac pacemaker(Z95.00), Unspecified dementia(F03), Malignant neoplasm colon, unspecified (C18.9), Other acute renal failure(N17.8), Sepsis, unspecified(A41.9), Hyperosmolality and hypernatraemia(E87.0), Zoster without complication(B02.9)

Allergies	Peanut	D.O.B.	04/05/1945	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Other specified cataract(H26.8), Asthma, unspecified, without stated status asthmaticus(J45.90), Human immunod...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Dembach, Karl (922131003784)	Admission Date	06/24/2013	Location	8 815 A
Last Care Plan Review Completed:		08/07/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Altered Mood.</p> <p>ISE Score: 3/6 Revision on: 10/15/2025 Revision by: Megan Pipe (Recreation Aide)</p>		<p>• To support Lionel's Psycho-Social well being through to the next review.</p> <p>Revision on: 02/13/2025 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/27/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; Friendly/1: 1 visits, comedy corner, discussion groups, games - Bingo & trivia, music, special events, spiritual programs, sports highlights (Soccer, basketball, baseball, cricket, football), TV/movies, virtual visits, etc. Revision on: 12/04/2023 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV (enjoys watching sports such as baseball, basketball, soccer, cricket, football), listening to music (enjoys reggae/reggaeton, dance music, contemporary folk) visiting with residents/team members, family/friend visits, etc. Revision on: 12/20/2021 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• ASSISTANCE: Provide assistance/encouragement to get him to scheduled activities - Cue Direction, Walk with, Guide to, Reminders, etc. Revision on: 12/20/2021 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• ONE to ONE: Provide him with individual visits for conversation (sports - soccer, cricket, Toronto Raptors (favorite NBA team) NFL [favorite team is the Minnesota Vikings], Barbados [his home country]), reminiscing, music (Bob Marley), (enjoys talking about cooking and food (fish/rice/chicken recipes) etc. Revision on: 12/20/2021 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• FAMILY INVOLVEMENT: High involvement. Revision on: 12/20/2021 Revision by: Mitchell Atkinson (Recreation Aide)</p>			ACT	
<p>• Potential for (Acute/Persistent) PAIN and alteration in comfort level related to Dx of pain and Osteoarthritis. Most Current RAI Pain Score is (0) Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator)</p>		<p>• Promote RAI Pain Score of 0 through to the next review. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/27/2026</p>	<p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 11/12/2024</p>			RN Registered Practical Nurse Registered Practical Nurse RN	
Allergies	No Known Allergies		D.O.B.	07/08/1936	Physician	Wallace Liang	
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis(M15.0), Ab...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Eastmond, Lionel ((92213101027)		Admission Date	10/05/2017	Location	8 814 C	
Last Care Plan Review Completed:		10/27/2025					

Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to COPD, Anxiety, Osteoarthritis, Dementia, Pain, HTN and Anemia.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>		<div>• PERSONAL HYGIENE:Maximal assist. Lionel remains capable of completing his oral hygiene/washing his face though needs the team to assist with providing peri care. Level of assistance may vary some days due to residents disease dx, ADL needs may fluctuate. No male caregivers for personal hygiene and treatment, per family request.</div> <div>Revision on: 05/04/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div>	PCA			
		<div>• HAND HYGIENE: 1 staff to provide total assistance to using hand sanitizer wipes for hand hygiene.</div> <div>Revision on: 01/29/2025</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA			
		<div>• TOILET USE: Total assistance- Lionel requires two staff to change him in bed due to incontinence</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA			
		<div>• TRANSFERRING: Maxi lift used with two team member assist for transferring</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA			
		<div>• TRANSFER LIFT/SLING: green sling needed for transfer.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	All			
		<div>• ORAL CARE: Lionel has no teeth at all and doesn't use dentures.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA			
		<div>• FOOT CARE: Footcare to be completed by registered staff/foot care nurse on shower days and PRN.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA Registered Staff			
		<div>• SHAVING - Lionel will be shaved on his bath days.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA	D		
		<div>• Potential for pain, discomfort related to Dx of Osteoarthritis.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	<div>• To treat and minimize signs/symptoms or complications associated with Osteoarthritis through to the</div>	<div>• MEDICATION: Administer medication for management of Osteoarthritis as per MD order. Monitor effectiveness and for side effects.</div> <div>Revision on: 11/12/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	Registered Staff	
		Allergies	No Known Allergies		D.O.B.	07/08/1936
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Eastmond, Lionel ((92213101027)		Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	next review date. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • PAIN MANAGEMENT for Osteoarthritis prescribed and in place; refer to Pain Care Plan. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff Registered Staff			
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026	• 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. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff			
• Urinary Incontinence r/t Dementia. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• (Resident name) will have urinary incontinence managed every shift through to the next review period. Target Date: 01/27/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 06/04/2024 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is Total Incontinence. Report change to level as noted Revision on: 10/31/2024 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Lionel wears white color brief. Revision on: 01/29/2025 Revision by: Jenny Liu (RAI Coord Back-up) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed.	Registered Staff PCA PCA PCA			
• Risk for/Impaired Skin Integrity r/t incontinence and Dementia. Revision on: 11/12/2024	• To protect and maintain skin integrity each day through to the next review.	• SKIN CHECK: Check skin condition twice daily with AM and PM care. Report new or different observance than the residents' usual skin condition to Registered Staff immediately as noted.	PCA	D/E		
Allergies	No Known Allergies		D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Eastmond, Lionel ((92213101027)		Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Jenny Liu (RAI Coord Back-up)		Target Date: 01/27/2026	Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • EQUIPMENT: Lionel requires Roho cushion to offload pressure. PCA Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • POSITIONING: Turn, reposition at least every 2 hours when in bed as per Lionel preference to offload pressure. PCA Q2h Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • BARRIER CREAM: Apply skin barrier Hydraguard to perineal area to safeguard against excessive moisture. Specify frequency each peri-care. PCA Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • GARMENT: Clean right hand daily and apply hand Posey to reduce risk for skin breakdown related to his contracture. To be applied all the time. PCA D/E/N Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)				
• Altered Communication r/t Usually understands. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• Lionel will maintain current communication abilities (SPECIFY: communication with others, understanding others, engaging in every day decision making) by (SPECIFY: making sounds, using appropriate gestures, responding to yes/no questions appropriately) through the review date. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026 • Lionel will be able to make basic needs known on a daily basis through the review date	• PRIMARY LANGUAGE: Lionel primary language is English. He is able to speak/understand English. All Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. All Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)				
Allergies	No Known Allergies			D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Eastmond, Lionel ((92213101027)			Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Altered Communication r/t Usually understands. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026					
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Dementia, Depression and Anxiety. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• Lionel will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Lionel is feeling lost or in confused state. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routines and activities. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ITEMS: Keep personal items in a consistent place. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	All PCA PCA			
• Increased risk for FALLS related to Dementia, HTN, Pain, History of Falls and Osteoarthritis. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up) • FOOTWEAR: Ensure resident wears appropriate footwear (non-slip) for transfers. Revision on: 11/12/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA	D/E/N		
• Potential for Expressive Behaviour of (VERBAL, PHYSICAL, yelling, RESISTANCE to care/showers) nature related to Dementia, Pain and Anxiety. Revision on: 09/06/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To promote safety for Lionel and/or others during each episode of (PHYSICAL/verbal, yelling, RESISTANCE to care need) through to the next review date.	• Spiritual needs identified and provided for Lionel with his music player in his room. Lionel enjoys listening to cultural music and watching tv Revision on: 08/10/2024 Revision by: Leslie Meloche (Recreation Aide) • Support Lionel/family/caregivers to cope with changing functional ability and behavioural symptoms.				
Allergies	No Known Allergies		D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Eastmond, Lionel ((92213101027)		Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision on: 03/06/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026 • To decrease episodic frequency of (PHYSICAL/verbal, yelling, RESISTANCE to care need) by next review date. ABS score will be less than (0). Revision on: 03/06/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/27/2026	Revision on: 08/10/2024 Revision by: Leslie Meloche (Recreation Aide) • COMMUNICATION: Involve/collaborate with Lionel about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 08/10/2024 Revision by: Leslie Meloche (Recreation Aide) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk. Physical: Hitting, punching Explain tasks to be done prior to care, obtain consent. Use stop and go approach. Reapproach when resident is calm/ready. Report to registered staff Revision on: 09/04/2024 Revision by: Leslie Meloche (Recreation Aide) • Triggers; invasion of space, loss of control, confusion, and change in environment. Noise and other residents. Revision on: 09/17/2025 Revision by: Leslie Meloche (Recreation Aide) • PHYSICAL Behaviour: Personal care to be provided by 2 staff members. Staff are to use the stop and go approach when providing care to Lionel. Revision on: 09/17/2025 Revision by: Leslie Meloche (Recreation Aide) • TRIGGERS leading to VERBAL (yelling, screaming) as expression of behaviour include (loss of control, frustration, misunderstanding care intention, etc.) Revision on: 09/17/2025 Revision by: Leslie Meloche (Recreation Aide) • VERBAL Behaviour: If Lionel 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: 09/17/2025 Revision by: Leslie Meloche (Recreation Aide) • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to eat, etc.) as expression of behaviour include (Specify cause; confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)	BSO - Internal Social Worker		
Allergies	No Known Allergies	D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Eastmond, Lionel ((92213101027)	Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none">• Potential for Expressive Behaviour of (VERBAL, PHYSICAL, yelling, RESISTANCE to care/showers) nature related to Dementia, Pain and Anxiety. Revision on: 09/06/2024 Revision by: Jenny Liu (RAI Coord Back-up)		Revision on: 09/17/2025 Revision by: Leslie Meloche (Recreation Aide) <ul style="list-style-type: none">• RESISTANCE to Care Need: If Lionel is refusing to bathe, change clothes. Staff is to approach slowly and to tell Lionel that "Its time" to change his clothes, do not argue but to agree with him that clothes are clean but needs to be changed. Revision on: 09/17/2025 Revision by: Leslie Meloche (Recreation Aide) <ul style="list-style-type: none">• ENVIRONMENT: Lionel is not to be disturbed during his sleep and to allow him to wake up on his own time. He does not like other residents wandering into his room, getting into his space, and saying negative or inappropriate words to him. This can be a trigger for him and he may strike out. If Lionel strikes out move away from his reach and notify registered staff. Lionel is involved in self-directed activities and programs. BSO recommends playing music for Lionel in his room as he enjoys music or putting his tv on and it can help if he is agitated. Lionel likes to attend Happy hour and Church. At times he may refuse. Revision on: 10/13/2025 Revision by: Leslie Meloche (Recreation Aide) <ul style="list-style-type: none">• MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. Revision on: 01/03/2021 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Practical Nurse RN			
<ul style="list-style-type: none">• Potential for BOWEL INCONTINENCE related to decreased mobility and Dementia. Revision on: 12/20/2021 Revision by: Mitchell Atkinson (Recreation Aide)	<ul style="list-style-type: none">• Lionel will have bowel incontinence managed every shift through to the next review period. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/27/2026	<ul style="list-style-type: none">• BOWEL Continence level is Total Incontinence. Report change to level as noted. Revision on: 10/01/2021 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none">• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. <ul style="list-style-type: none">• INCONTINENCE PRODUCT: Lionel wears white color brief. Revision on: 01/29/2025 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA PCA			
<ul style="list-style-type: none">• Potential to experience alteration in MOOD as exhibited by (persistent anger with self or others) related to Depression, Dementia and Anxiety.	<ul style="list-style-type: none">• To decrease episodic frequency of (persistent anger with self or others, repetitive questions, unpleasant in the AM,	<ul style="list-style-type: none">• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lionel for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 01/03/2021 Revision by: Jenny Liu (RAI Coord Back-up)				
Allergies	No Known Allergies		D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Eastmond, Lionel ((92213101027)		Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 04/07/2021 Revision by: Jenny Liu (RAI Coord Back-up)		and repetitive physical movements) by next review date. DRS score will be less than (1). Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/27/2026	<ul style="list-style-type: none"> • RESIDENT STRENGTHS: Build on Lionel effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 01/03/2021 Revision by: Jenny Liu (RAI Coord Back-up) <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: 01/03/2021 Revision by: Jenny Liu (RAI Coord Back-up)			
<ul style="list-style-type: none"> • Expressed Wishes and Beliefs related to Lionel Medical Treatment and End of Life Care Revision on: 01/07/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> • To support and honor Lionel expressed wishes and beliefs through to the End of Life. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/27/2026	<ul style="list-style-type: none"> • CPR: Lionel wishes express NO CPR and NO TRANSFER to hospital. Revision on: 01/03/2021 Revision by: Jenny Liu (RAI Coord Back-up)			
<ul style="list-style-type: none"> • Sleep Patterns r/t not sleeping at night. Revision on: 09/13/2020 Revision by: Leslie Meloche (Activities/Rec Therapy)		<ul style="list-style-type: none"> • To promote adequate rest/sleep for Lionel based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/20/2024 Revision by: Maryola Perion (RN) Target Date: 01/27/2026	<ul style="list-style-type: none"> • REST PATTERN: Usual bedtime and usual wake time: Lionel only get up for meal and stays in bed between meals. Revision on: 09/09/2024 Revision by: Ranjita Yadav (RPN) <ul style="list-style-type: none"> • SLEEPWEAR: Preferred night attire own PJ Revision on: 01/03/2021 Revision by: Jenny Liu (RAI Coord Back-up)		PCA	PCA
<ul style="list-style-type: none"> • SPIRITUAL BELIEFS: Lionel is of the Christian Faith. Revision on: 01/08/2020 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		<ul style="list-style-type: none"> • To provide Lionel spiritual support as interested through to the next review date. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/27/2026	<ul style="list-style-type: none"> • SPIRITUAL PROGRAMS: Encourage him to attend spiritual programs of his choice including church service (Parkwood), bible study, spiritual music, etc. Revision on: 07/13/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		ACT	
• Nutrition Risk Level (diet details)		• Lionel will be adequately	• Labelled Item Dinner: ice cream cup (115 ml fluid) - assist resident to eat		PCA	E
Allergies	No Known Allergies		D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Eastmond, Lionel ((92213101027)		Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/27/2026</p> <p>• Will weigh within realistic GWR of 60-70 kg through to next review date. Revision on: 10/17/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/27/2026</p> <p>• Lionel will be adequately hydrated aeb drinking at least 75% of total fluid requirement: 1572 ml/day (25 ml/kg using 62.9 kg weight) through to next review date. Revision on: 07/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/27/2026</p>	<p>Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• Labelled Item Lunch: ice cream cup (115 ml fluid) - assist resident to eat Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Lionel is moderate risk level. Revision on: 04/24/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Lionel will receive regular diet, pureed texture. Revision on: 05/01/2023 Revision by: Anna Slack (Registered Dietitian)</p> <p>• FLUID CONSISTENCY: Lionel drinks REGULAR/THIN Level 0 Fluids. Revision on: 03/13/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID TARGET: Encourage Lionel to drink a minimum of 1179 ml/day. Likes to drink apple juice, gingerale, and milk. Revision on: 07/15/2025 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>• LABELLED SNACK: 1 x 355 ml can of gingerale at AM snack on Tuesday, Thursday, Saturday Assist resident to drink Revision on: 07/15/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Registered Practical Nurse RN PCA Registered Practical Nurse RN Dietitian (RD)</p> <p>Diet Food Services Aide PCA PCA</p> <p>PCA</p> <p>Dietary aide PCA</p> <p>PCA PCA</p>	D

Allergies	No Known Allergies	D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Eastmond, Lionel ((92213101027)	Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025			

Care Plan Report

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Diagnosis

Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis(M15.0), Abnormal weight loss(R63.4), Delusional disorder(F22.0), Urinary tract infection, site not specified(N39.0), Pneumonia, unspecified(J18.9)

Allergies	No Known Allergies	D.O.B.	07/08/1936	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Pain, unspecified(R52.9), Benign hypertension(I10.0), Anaemia, unspecified(D64.9), Anxiety disorder, unspecified(F41.9), Primary generalized (osteo)arthrosis (M15.0), Ab...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Eastmond, Lionel ((92213101027)	Admission Date	10/05/2017	Location	8 814 C
Last Care Plan Review Completed:		10/27/2025			

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.</p> <p>Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</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: 01/15/2026</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: 01/15/2026</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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location 8 822 A
Last Care Plan Review Completed:		10/15/2025			



Care Plan Report

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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.</p> <p>Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	8 822 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: 01/15/2026	<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: 07/07/2025 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, etc. Revision on: 04/17/2022 Revision by: Mitchell Atkinson (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)	ACT	
<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: 01/15/2026 <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: 01/15/2026	<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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	8 822 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report

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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: 01/15/2026	• 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: 01/15/2026	• 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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location	8 822 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: 01/15/2026	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: 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	
• 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: 01/15/2026	• 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	Wallace Liang	
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location	8 822 A	
Last Care Plan Review Completed:		10/15/2025					

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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: 01/15/2026	<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: 01/15/2026	<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: 01/15/2026	<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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022		Location	8 822 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: 01/15/2026	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: 01/15/2026	• 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: 01/15/2026	• 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
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		Physician	Wallace Liang
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location 8 822 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: 01/15/2026	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: 01/15/2026	• 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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	8 822 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: 01/15/2026	• 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: 01/15/2026	• 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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)		Admission Date	04/11/2022	Location	8 822 A
Last Care Plan Review Completed:		10/15/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 04/11/2022 Revision by: Maryola Perion (RN)		Revision by: Maryola Perion (RN) Target Date: 01/15/2026	<ul style="list-style-type: none"> • ORIENTATION: Gently reorient to (person, place, time) as needed when Robin is feeling lost or in confused state. Revision on: 07/11/2025 Revision by: Maryola Perion (RN) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Encourage resident to follow her routine . Revision on: 11/30/2023 Revision by: Kuljeet Kaur (RN) 			PCA	
<ul style="list-style-type: none"> • 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)		<ul style="list-style-type: none"> • Robyn 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: 06/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/15/2026 	<ul style="list-style-type: none"> • BATHING: Robyn prefers (shower/tub bath) on (Mondays and Friday Evening shift). Robyn participates by (providing a washcloth and cues). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. Staff will continue to encourage Robyn to accept bath/shower as she refused to. Revision on: 10/29/2025 Revision by: Alyssa Egan (ADOC) • BED MOBILITY: Robyn is able to reposition self independently. Revision on: 08/29/2025 Revision by: Chelsea Campbell-Wright (ADOC) • DRESSING: Robyn is able to assist minimally by lifting her arms and legs. One staff to provide EXTENSIVE assistance for dressing UPPER & LOWER body. Revision on: 07/11/2025 Revision by: Maryola Perion (RN) • EATING: Robyn is able to eat Independently with cueing, supervision and set up from staff. Eats in the unit dining room. 5th floor. Revision on: 07/11/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Robyn is using a wheelchair as a mode of locomotion and she is able to propel it independently. She may require one staff assistance at times. Staff is monitoring Robyn as she will get up from her wheelchair and will try to ambulate which is not safe due to unsteady gait. She is encouraged to ask for assistance when needed. Revision on: 09/28/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Robyn requires one team member with extensive assistance with washing face, applying lotion, brushing hair and areas of hygiene 			PCA	
Allergies	No Known Allergies			D.O.B.	01/18/1968	Physician	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)			Admission Date	04/11/2022	Location	8 822 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 Dementia, ABI, HOH, History of drug abuse. Revision on: 04/11/2022 Revision by: Maryola Perion (RN)			care. Revision on: 07/11/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">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) <ul style="list-style-type: none">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) <ul style="list-style-type: none">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) <ul style="list-style-type: none">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) <ul style="list-style-type: none">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)				
			PCA				
Nutrition Risk Level		<ul style="list-style-type: none">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)	<ul style="list-style-type: none">NUTRITION RISK: Robyn is moderate risk level. Revision on: 04/11/2025 Revision by: Brittany Hyde (Registered Dietitian) <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))				
Allergies	No Known Allergies			D.O.B.	01/18/1968	Physician	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)			Admission Date	04/11/2022	Location	8 822 A
Last Care Plan Review Completed:		10/15/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>Target Date: 01/15/2026</p> <p>• 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: 01/15/2026</p> <p>• 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: 01/15/2026</p> <p>• 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: 01/15/2026</p>	<p>• FLUID CONSISTENCY: Robyn drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/11/2022 Revision by: Anna Slack (Registered Dietitian)</p> <p>• FLUID TARGET: Encourage Robyn to drink a minimum of 1168ml per day. Revision on: 02/10/2025 Revision by: Brittany Hyde</p> <p>• DINING INSTRUCTIONS: Encourage softer options, cut food into small pieces Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• HIGH CALORIE/PROTEIN PM SNACK: assorted sandwich daily Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• LABELLED SNACK AM: Banana Mon/Wed/Fri Greek yogurt Tues/Thurs/Sat/Sun Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Diet PCA</p> <p>PCA</p> <p>Registered Practical Nurse</p> <p>PCA</p> <p>PCA</p>	<p></p> <p>D</p> <p>D/E</p>

Allergies	No Known Allergies	D.O.B.	01/18/1968	Physician	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	8 822 A
Last Care Plan Review Completed:		10/15/2025			

Care Plan Report

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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	Wallace Liang
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	10/30/2025
Resident	Gelinas, Robyn (922131005461)	Admission Date	04/11/2022	Location	8 822 A
Last Care Plan Review Completed:		10/15/2025			

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 #43 - Skin Tear - Total Flap Loss Right Buttock Revision on: 10/07/2025 Revision by: Janina Lucero (RN)	<ul style="list-style-type: none"> • To promote optimal healing of #43 - Skin Tear - Total Flap Loss Right Buttock within the next review date. Revision on: 10/07/2025 Revision by: Janina Lucero (RN) Target Date: 11/27/2025	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with #43 - Skin Tear - Total Flap Loss Right Buttock for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/07/2025 Revision by: Janina Lucero (RN) <ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for #43 - Skin Tear - Total Flap Loss Right Buttock as per MD Order. Revision on: 10/07/2025 Revision by: Janina Lucero (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: 10/07/2025 Revision by: Janina Lucero (RN)			
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to #42 - Open Lesion - Right Shin Revision on: 08/19/2025 Revision by: Janina Lucero (RN)	<ul style="list-style-type: none"> • To promote optimal healing of #42 - Open Lesion - Right Shin within the next review date. Revision on: 08/19/2025 Revision by: Janina Lucero (RN) Target Date: 11/27/2025	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with #42 - Open Lesion - Right Shin for changes to health status and alteration or complications affecting skin integrity. Revision on: 08/19/2025 Revision by: Janina Lucero (RN) <ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for #42 - Open Lesion - Right Shin as per MD Order. Revision on: 08/19/2025 Revision by: Janina Lucero (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: 08/19/2025 Revision by: Janina Lucero (RN)			
<ul style="list-style-type: none"> • Ron DECLINES PARTICIPATION in structured programs related to personal choice. 	<ul style="list-style-type: none"> • Ron participates in Independent/Self-Directed activities monthly through to the next review date. Revision on: 03/19/2024	<ul style="list-style-type: none"> • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, listening to music/radio, family/friend visits, computer use, reading independently, etc. Revision on: 09/18/2023 Revision by: Mitchell Atkinson (Recreation Aide)			
Allergies	No Known Allergies	D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)	Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
ISE Score: 1/6 Revision on: 08/19/2025 Revision by: Megan Pipe (Recreation Aide)	Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• 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: 01/28/2020 Revision by: Mitchell Atkinson (Activities/Rec Therapy) • INVITATION: Offer friendly invite to structured programs scheduled in the home. Ron enjoys the tuck shop, etc. Revision on: 07/15/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	ACT		
• Alteration in skin integrity with risk for infection or complications related to #41 OPEN LESION TO LEFT KNEE Revision on: 06/08/2025 Revision by: Kenya Mosely (RPN)	• To promote optimal healing of #41 OPEN LESION TO LEFT KNEE Revision on: 06/08/2025 Revision by: Kenya Mosely (RPN) Target Date: 11/27/2025	• TREATMENT PLAN: Administer treatment for #41 OPEN LESION TO LEFT KNEE as per MD Order. Revision on: 06/08/2025 Revision by: Kenya Mosely (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: 06/08/2025 Revision by: Kenya Mosely (RPN)			
• Potential for PAIN and alteration in comfort level related to Rheumatoid Arthritis, Pressure Ulcers and complaints of headache. Most Current Pain Score is (0) Revision on: 06/02/2025 Revision by: Jenny Liu (RAI Coordinator)	• Promote MDS Pain Score of 0 through to the next review. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• COMMUNICATION: Involve/collaborate with Ronald about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 10/13/2020 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/13/2020 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse Registered Practical Nurse RN		
• Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy.	• To monitor effectiveness and for side effects of medication used each day through to the	• COMMUNICATION: Involve/collaborate with Ron H. in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 05/21/2022			
Allergies	No Known Allergies	D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)	Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
Revision on: 12/11/2024 Revision by: Jenny Liu (RAI Coord Back-up)		next review date. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	Revision by: Katherine Arca (RPN) • 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: 01/16/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.				Registered Staff
• Potential for altered skin healing, infection or complications related to SKIN TEAR to left buttock (onset: Oct. 22, 2024) Revision on: 10/22/2024 Revision by: Janina Lucero (RN)		• To promote optimal healing of SKIN TEAR within the next review date. Revision on: 10/22/2024 Revision by: Janina Lucero (RN) Target Date: 11/27/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to left buttock for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/22/2024 Revision by: Janina Lucero (RN) • TREATMENT PLAN: Administer treatment for SKIN TEAR to left buttock as per MD Order. Revision on: 10/22/2024 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/22/2024 Revision by: Janina Lucero (RN)				
• Potential for Expressive Behaviour of (RESISTANCE to care need: meds, dressing change, get up and bowel protocol, ect.. Revision on: 06/14/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To decrease episodic frequency of (resist care) by next review date. ABS score will be less than (2). Revision on: 06/14/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 11/27/2025	• 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 RESISTANCE to Care Needs of (refusal to eat, refusing medication, etc.) as expression of behaviour per his choices. Revision on: 06/23/2023 Revision by: Jenny Liu (RAI Coord Back-up) • RESISTANCE to Care Need: If Ronald is refusing to (Specify: bathe, change dressing, take medications, eat, bowel protocol, get up, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.				Registered Staff
Allergies	No Known Allergies			D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)			Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			Revision on: 09/30/2022 Revision by: Jenny Liu (RAI Coord Back-up) • BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction) Refusing care:Refusing care from some staff. Triggers: Wanting his choice of staff for care. Recommendations: Use stop and go for care. Reapproach when the resident is calm/ready. While providing care talk to the resident about his interests, such as his computer use or his daughter. Revision on: 03/06/2024 Revision by: Leslie Meloche (Recreation Aide)			
• Increased risk for FALLS related to: Decreased Mobility and Rheumatoid Arthritis. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 06/08/2020 Revision by: Clarisa Amir (RPN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment:(urinal at the bedside, high/low bed, wheelchair) Revision on: 01/16/2021 Revision by: Jenny Liu (RAI Coord Back-up) • UPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries. Revision on: 01/16/2021 Revision by: Jenny Liu (RAI Coord Back-up)		PCA	D/E/N
• Potential for IMPAIRED SKIN INTEGRITY related to: Fragile Skin (aging process), Decreased Mobility, Incontinence, ROHO Cushion Deflation, Fragile Skin (buttocks), Impaired Circulation and Lower Leg Inflammation, current wounds to Left and right buttocks. Revision on: 03/31/2022 Revision by: Jenny Liu (RAI Coord Back-up)		• To protect and maintain skin integrity each day through to the next review. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• 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. • Ronald has fragile skin due to the ageing process. Preventative dressings are applied to his bilateral buttocks as per ETAR treatment. Revision on: 10/16/2024 Revision by: Janina Lucero (RN) • EQUIPMENT: Ronald requires a air mattress and roho to offload pressure. Monitor electric wheelchair ROHO Cushion daily for inflation before and after use; inflate PRN.- Resident often refusing to allow team to inflate ROHO team continue to re-approach Revision on: 05/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		PCA Registered Staff	
Allergies	No Known Allergies		D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)		Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			• POSITIONING: Turn, reposition at least every 2 hours or when in bed/wheelchair as per Rolands preference to offload pressure Resident often refuses, continue to approach and encourage then provide health teaching. Revision on: 09/26/2023 Revision by: Janina Lucero (RN)		PCA	Q2h
• Expressed Wishes and Beliefs related to Ronald Medical Treatment and End of Life Care Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• To support and honor Ronald expressed wishes and beliefs through to the End of Life. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• CPR: Ronald wishes to have CPR and TRANSFER to hospital Revision on: 03/20/2023 Revision by: Kenya Mosely (RPN)			
• Potential for altered hematologic symptoms or complications related to diagnosis of ANEMIA Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• To treat and/or minimize complications associated with ANEMIA each day through to the next review date. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with ANEMIA for complications or changes to health status. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up) • LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for ANEMIA as per MD Order. Monitor effectiveness and for side effects. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up)			
• URINARY (Functional) INCONTINENCE related to altered mobility Revision on: 01/16/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• Ronald will receive support to (urinal) and promote urinary continence each shift through to the next review. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is (Occasionally incontinent). Report change to level as noted. uses urinal daily. Revision on: 12/11/2024 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: resident uses BAR B brief per prevail sheet.		PCA	
Allergies	No Known Allergies		D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)		Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• URINARY (Functional) INCONTINENCE related to altered mobility Revision on: 01/16/2021 Revision by: Jenny Liu (RAI Coord Back-up)			Revision on: 02/26/2025 Revision by: Jenny Liu (RAI Coord Back-up)			
• Use of PASD (bedrails) to assist resident with Activity of Daily Living (TURNING & REPOSITIONING) Revision on: 01/16/2021 Revision by: Jenny Liu (RAI Coord Back-up)		• Ronald will be effectively supported with use of (bedrails) to optimize Activity of Daily Living (turning and repositioning) each day through to the next review date. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL). • BED RAIL (TWO PARTIAL): Two 1/2 Rails in USE as a PASD to assist Ronald with bed mobility. Monitor every shift. Revision on: 10/28/2019 Revision by: Joe Albano (RAI Coordinator)		Registered Staff PCA	 D/E/N
• Altered ability to complete Activities of Daily Living (ADLs) related to: Rheumatoid Arthritis Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Ronald will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care tasks are met each day through to the next review date. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• BATHING: Ronald prefers (shower) on (Tuesdays and Fridays on Day shift). Two staff (TOTAL) assistance for bathing. Maxi lift for transfer with two staff to assist. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Maximal Assist: Ronald is able to grip on the side rails to help him in bed. Revision on: 06/02/2025 Revision by: Jenny Liu (RAI Coordinator) • DRESSING: Maximal Assist: Ronald is able to assist staff by lifting his arms and legs though needs assistance with pulling up his pants and pulling his shirt down. However he has been Bedfast all of the time, Ronald chose to not wear any clothes, brief on the bottom only. Revision on: 06/02/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA PCA PCA	
Allergies	No Known Allergies			D.O.B.	04/18/1957	Physician Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)			Admission Date	06/13/2014	Location 8 819 C
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none"> • EATING: Ronald is able to feed himself independently, but supervision provided from staff due to eating on his bed, refusing to get up and go down stairs for meals. Revision on: 03/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) • LOCOMOTION: Independent with Electric Wheelchair. Has been bedfast all of time per Ronald's choices. Revision on: 06/02/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL HYGIENE: Maximal Assist: Ronald is able to comb his hair, shave and wash/dry his face & hands. requires weight bearing assistance from two staffs with pericare. He refuses to have his personal items labelled. Revision on: 06/02/2025 Revision by: Jenny Liu (RAI Coordinator) • HAND HYGIENE: Ronald Hamilton is able to independently complete task of Hand Hygiene each day. Revision on: 08/19/2021 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • TOILET USE: A MAXI LIFT and 2 staff assistance is required while changing in bed. Urinal is used daily. Revision on: 08/17/2023 Revision by: Kenya Mosely (RPN) • TRANSFERS: Total Assistance x 2 with Maxi Lift - Ronald likes to be seated close to the front of his electric wheelchair and then he will adjust himself. Revision on: 11/19/2015 Revision by: Kenya Mosely (Registered Practical Nurse) • TRANSFER LIFT/SLING: large sling Revision on: 07/01/2022 Revision by: Jenny Liu (RAI Coord Back-up) • ORAL CARE: Independent - Own Teeth and is able to provide oral care himself. • FOOT CARE: Personal Care Aides/foot care nurse 	PCA	
• SPIRITUAL BELIEFS: Ron is of the	• To provide Ron spiritual	• PERSONAL CHOICE: Respect Ron's right to decline participation in Spiritual	ACT	
Allergies	No Known Allergies		D.O.B.	04/18/1957
Physician	Wallace Liang			
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)	Admission Date	06/13/2014	Location 8 819 C
Last Care Plan Review Completed:		08/27/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Christian Faith. Revision on: 07/15/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	support as interested through to the next review date. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	Programs. Does not partake in faith programs as per his choice. Revision on: 07/15/2020 Revision by: Shayna Lee Wonsch (Activation Manager)				
• Nutrition Risk Level (diet details)	<p>• Ronald will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025</p> <p>• Weight will be stable or decrease towards realistic GWR 115-125 kg through to next review date. Revision on: 02/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/27/2025</p> <p>• Ronald will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2526 ml/day (20 ml/kg using 126.3 kg weight) through to next review date. Revision on: 05/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/27/2025</p>	<p>• LABELLED SNACK PM: Powerade daily (591 ml) Revision on: 06/24/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• Ronald reviews the weekly menu and if he dislikes both choices at an upcoming meal, he requests a substitute (e.g., cheese and deli meat to make a sandwich) by emailing FSM. Revision on: 05/23/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Ronald is moderate risk level. Revision on: 05/23/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Ronald will receive regular diet, regular texture Revision on: 05/23/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID CONSISTENCY: Ronald drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/15/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)</p> <p>• FLUID TARGET: Encourage Ronald to drink a minimum of 2021 ml/day. Likes to drink milk, tomato juice. He also has his own fluids in his room. Revision on: 05/23/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 09/10/2020 Revision by: Anna Slack (Registered Dietitian)</p> <p>• MEDPASS SUPPLEMENTS: offer 1 bottle Boost Carb Smart on M/W/F with 1600 medpass to supplement meal refusals and support skin healing</p>	<p>PCA Registered Practical Nurse RN</p> <p>Dietitian (RD)</p> <p>PCA</p> <p>Diet PCA</p> <p>PCA</p> <p>Dietary aide PCA</p>	D		
Allergies	No Known Allergies		D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Hamilton, Ronald (922131003956)		Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details)		Revision on: 09/25/2025 Revision by: Holly Laasanen (Dietitian (RD))		
• BOWEL INCONTINENCE related to: Lack of Motivation and Decreased Mobility Revision on: 02/05/2016 Revision by: Kenya Mosely (Registered Practical Nurse)	• Ronald will have bowel incontinence managed every shift through to the next review period. Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• BOWEL Continence level is (Total Incontinence). Report change to level as noted. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA	
• SLEEP PATTERNS Revision on: 11/19/2015 Revision by: Kenya Mosely (Registered Practical Nurse)	• To promote adequate rest/sleep for Ronald based on identified sleep patterns/preferences each night through to the next review date. Current Revision on: 03/19/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• PREFERENCE: Ronald likes to only have his bedside light turned on in the middle of the night, not the light to his room, as per his request. Revision on: 06/08/2021 Revision by: Meghan Sears (ADOC) • REST PATTERN: Ronald has been bedfast all of time per his choice. Revision on: 06/23/2023 Revision by: Jenny Liu (RAI Coord Back-up) • SLEEPWEAR: Ronald prefers to wear Johnny Shirt/T-Shirt/Brief Only. Revision on: 01/17/2021 Revision by: Jenny Liu (RAI Coord Back-up)	 PCA PCA	

Allergies	No Known Allergies	D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)	Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025			

Care Plan Report


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Diagnosis

Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport accidents(V49.8), Other hypertrophic osteoarthropathy, unspecified site(M89.49), Anaemia, unspecified(D64.9), Peripheral vascular disease, unspecified(I73.9)

Allergies	No Known Allergies	D.O.B.	04/18/1957	Physician	Wallace Liang
Diagnosis	Rheumatoid arthritis, unspecified(M06.9), Obesity, unspecified(E66.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Car occupant [any] injured in other specified transport acci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Hamilton, Ronald (922131003956)	Admission Date	06/13/2014	Location	8 819 C
Last Care Plan Review Completed:		08/27/2025			

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 WOUND Stage 2 to Left Ischial Tuberosity secondary to Pressure Injury Revision on: 10/27/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To minimize risk of WOUND Stage 2 to Left Ischial Tuberosity infection each day until fully healed. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) Target Date: 01/26/2026 • To promote optimal healing of WOUND Stage 2 to Left Ischial Tuberosity within the next review date. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) Target Date: 01/26/2026 	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for WOUND Stage 2 to Left Ischial Tuberosity as per MD Order. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with WOUND Stage 2 to Left Ischial Tuberosity for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) 					
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to WOUND Stage 1 to Right Ischial Tuberosity secondary to Pressure Injury Revision on: 10/27/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To minimize risk of WOUND Stage 1 to Right Ischial Tuberosity infection each day until fully healed. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) Target Date: 01/26/2026 • To promote optimal healing of WOUND Stage 1 to Right Ischial Tuberosity within the next review date. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) Target Date: 01/26/2026 	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for WOUND Stage 1 to Right Ischial Tuberosity as per MD Order. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with WOUND Stage 1 to Right Ischial Tuberosity for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/27/2025 Revision by: Janina Lucero (RN) 					
<ul style="list-style-type: none"> • Potential to experience discomfort/complications, including, pain, impaired mobility, embolism related to a 	<ul style="list-style-type: none"> • To promote optimal healing of FRACTURE of left hip by next review date 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of fracture to (acute left hip fracture) for discomfort/ complications or changes to health status. 					
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang		
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhe...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre			Print Date	10/30/2025		
Resident	Helman, Sharon (922131005293)		Admission Date	10/23/2019	Location	8 806 A	
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
nondisplaced intertrochanteric fracture left hip diagnosed on Bone scan May 28th 2025 no operable Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • PAIN MANAGEMENT for fracture prescribed and in place; refer to Pain Care Plan.		Registered Staff	
• Potential for Acute PAIN and alteration in comfort level related to Dementia, stroke, left leg pain. a nondisplaced intertrochanteric fracture left hip note on bone scan May 28th 2025 Most Current Pain Score is 0/3. Revision on: 05/29/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote resident comfort and effectively manage Acute pain as episode occurs through to the next review. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026 • Promote MDS Pain Score of 0 through to the next review. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• COMMUNICATION: Involve/collaborate with Sharon/SDM about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 11/16/2019 Revision by: Maryola Perion (Registered Nurse) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.		Registered Staff RN Registered Practical Nurse Registered Practical Nurse RN	
• Increased risk for FALLS related to: unsteady gait, Alcohol Dementia, psychotropic medication, Vit. D deficiency, History of Falls. Revision on: 05/23/2025 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. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• Purposeful rounding to check resident position and location every shift to prevent fall. • COMMUNICATION: Involve/collaborate with Sharon/SDM in decision making in fall prevention Plan of Care. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022		PCA	D/E/N
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Helman, Sharon (922131005293)		Admission Date	10/23/2019	Location	8 806 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		<p>Revision by: Haley Cadarian (Quality Lead)</p> <ul style="list-style-type: none"> • BED: place bed in lowest position to lower risk for injury. PCA <p>Revision on: 10/16/2021</p> <p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • SPECIAL CONSIDERATION to PREVENT FALLS: Resident will put herself on the floor and get back up. Monitor resident for lowering herself to ground. If able try to redirect. PCA <p>Follow fall policy for getting her up if she cannot on her own.</p> <p>Revision on: 12/04/2024</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> • FLOOR MAT: Position floor mat on floor next to left, side of bed to lower risk of injury. PCA <p>Revision on: 05/13/2025</p> <p>Revision by: Sonpreet Gurm (Registered Nurse)</p> <ul style="list-style-type: none"> • ALARMS: provide bed pad alarm while resident in bed and clip alarm when resident in chair. Check placement and working order. Staff respond when alarm is heard. PCA <p>Revision on: 08/11/2025</p> <p>Revision by: Gurjit Kaur (RN)</p>		D/E/N		
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Rest/Sleep Patterns.</p> <p>ISE 3/6.</p> <p>Revision on: 05/19/2025</p> <p>Revision by: Megan Pipe (Recreation Aide)</p>	<p>• To support Sharon's Psycho-Social well being through to the next review.</p> <p>Revision on: 11/20/2024</p> <p>Revision by: Laura Morris (Restorative Care Aide)</p> <p>Target Date: 01/26/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; 1:1 visits, comedy, exercise, music, reminiscing, sensory, virtual visits, etc.</p> <p>Previous recreation/leisure interests: crocheting, colouring.</p> <p>Revision on: 12/01/2023</p> <p>Revision by: Mitchell Atkinson (Recreation Aide)</p> <ul style="list-style-type: none"> • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading independently, watching/listening to TV (crime shows), listening to music (rock), visiting with residents/team members, etc. ACT <p>Revision on: 05/04/2020</p> <p>Revision by: Shayna Lee Wonsch (Activation Manager)</p> <ul style="list-style-type: none"> • HELPFUL HINTS: Identify Helpful Hints to ease communication while providing care/interactions for babies, animals (especially cats), enjoys organizing things, graphic design, etc. ACT <p>Revision on: 10/28/2019</p> <p>Revision by: Shayna Lee Wonsch (Activation Manager)</p>				
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Helman, Sharon (922131005293)	Admission Date	10/23/2019	Location	8 806 A	
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

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<p>• Risk for/Impaired Skin Integrity r/t: Thin fragile Skin, use of containment product, rosacea</p> <p>Revision on: 03/31/2025</p> <p>Revision by: Kenya Mosely (RPN)</p>	<p>• To protect and maintain skin integrity each day through to the next review.</p> <p>Revision on: 12/05/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>Target Date: 01/26/2026</p>	<p>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.</p> <p>• HEALTH EDUCATION: Engage resident/SDM in health education regarding prevention of skin impairment and management of swollen Rt. foot. Encourage to elevate foot when in bed.</p> <p>Revision on: 03/16/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• POSITIONING: Turn, reposition every 2 hours when in bed to offload pressure.</p> <p>Revision on: 05/29/2025</p> <p>Revision by: Chelsea Campbell-Wright (ADOC)</p>	PCA		
<p>• Potential for Expressive Behaviour of Verbal abuse, Physical (hx of pushed a resident and fell, threw sanitizer wall units at the team/police officer, verbally expressive and WANDERING, clogging toilet, swearing, threatening, insulting, throwing food/water, throwing/ripping papers and RESISTING CARE/showers, put herself on the floor nature related to: diagnosis of alcohol dementia, Delirium (hospitalization November 2021).</p> <p>Revision on: 11/30/2024</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p>	<p>• To decrease episodic frequency of expressive behavior by next review date. ABS score will be less than 1.</p> <p>Revision on: 12/05/2023</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>Target Date: 01/26/2026</p>	<p>• COMMUNICATION: Involve/collaborate with Sharon/SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</p> <p>Revision on: 09/22/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Sharon for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 09/22/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <p>• TRIGGERS leading to PHYSICAL (with care, others/team entering into her personal space) as expression of behaviour include (anger, frustration, confusion, invasion of personal space, etc.)</p> <p>Revision on: 08/19/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: Staff to explain to Sharon to call for assistance if other resident is invading her personal space.</p> <p>Revision on: 07/17/2025</p> <p>Revision by: Kenya Mosely (RPN)</p> <p>• PHYSICAL Behaviour: Provide personal space to allow resident to safely calm down. Ensure other residents safety surrounding resident.</p> <p>Revision on: 11/22/2021</p> <p>Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (yelling, calling names, etc.) as expression of</p>	BSO - Internal BSO - External Social Worker	Q2h	
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
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		<p>behaviour include (frustration, limitation in self expression, misunderstanding care intention, etc.)</p> <p>Revision on: 09/22/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <ul style="list-style-type: none"> • VERBAL Behaviour: If Sharon 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: 09/22/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe, refusal to eat, etc) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process, etc.) <p>Revision on: 09/22/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Sharon is refusing to (bathe, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. <p>Revision on: 09/22/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <ul style="list-style-type: none"> • MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. <p>Revision on: 11/16/2019</p> <p>Revision by: Maryola Perion (Registered Nurse)</p> <ul style="list-style-type: none"> • SPECIAL CONSIDERATIONS: The resident is High Intensity for preferred accommodation. <p>Revision on: 09/29/2024</p> <p>Revision by: Ranjita Yadav (RPN)</p> <ul style="list-style-type: none"> • BSO RECOMMENDATIONS: Physical: Striking out, hitting, Verbal: Yelling, swearing, calling others names. Triggers: Residents entering her room/personal space, misunderstanding care needs. <p>RECOMMENDATIONS:</p> <p>1 As per staff report and documentation, expressions are usually triggered when another person is occupying the residents personal space. She also exhibits resistance to care, she requires cueing and redirection from team members.</p> <p>A. Introduce yourself, explain step by step in a calm voice what is happening, and obtain consent. Use short, simple and easily understandable sentences. Be aware of</p>	Registered Practical Nurse RN		
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Helman, Sharon (922131005293)	Admission Date	10/23/2019	Location	8 806 A
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Care Plan Report

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<p>• Potential for Expressive Behaviour of Verbal abuse, Physical (hx of pushed a resident and fell, threw sanitizer wall units at the team/police officer, verbally expressive and WANDERING, clogging toilet, swearing, threatening, insulting, throwing food/water, throwing/ripping papers and RESISTING CARE/showers, put herself on the floor nature related to: diagnosis of alcohol dementia, Delirium (hospitalization November 2021). Revision on: 11/30/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p>		<p>your body language, tone of voice and facial expressions, as the resident can be more sensitive to non-verbal cues or signals. Use non-defensive body language. B. During personal care, encourage independence as much as possible. Offer choices and lay out clothes for the day or shower. C. If the resident exhibits verbal expressions, do not take them personally, keep calm, remain warm, supportive and respectful. Do not argue as this will just aggravate the behaviour. Validate emotions e.g., I can see that this is upsetting, and offer to help. Then, if necessary, distract from there. D. Recommend to communicate with resident using validation therapy. Utilize empathetic listening skills such as a soft voice and matching the residents emotions by linking the expression to the unmet need (loneliness, pain etc.). Consider pain for a possible trigger for behaviors and utilize PRN as ordered if resident is showing signs of pain.</p> <p>when refusing care to use stop and go, remind her staff will return at a later time. The resident likes to watch TV in her room and enjoys some social visits with staff Revision on: 03/26/2025 Revision by: Leslie Meloche (Recreation Aide)</p>			
<p>• Potential to experience alteration in MOOD as exhibited by (persistent anger with self or others, repetitive physical movement) related to Alcohol Dementia, Agitation. Revision on: 08/28/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p>	<p>• To decrease episodic frequency of negative mood by next review date. DRS score will be less than 0. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>• COMMUNICATION: Involve/collaborate with SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Sharon for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</p>			
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
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Focus	Goal	Interventions	Position	Freq/Resolved	
	Target Date: 01/26/2026	Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Sharon's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 01/22/2021 Revision by: Maryola Perion (RN)			
• Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Dementia, Acute pancreatitis, Diverticular disease of intestine, Delusional disorder Revision on: 07/06/2023 Revision by: Elsie Calumpang (RN)	• Sharon will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care tasks are met each day through to the next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• BATHING: Sharon prefers (shower/bath) on (Tuesdays and Fridays on Day shift). PCA Sharon participates with (transfer). Two staff (MAXIMAL) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Maximal Assist: Sharon requires Extensive assistance from one or PCA two team members with turning and repositioning in bed. Two 1/4 bedrails to be used when in bed to aid in turning and repositioning. Revision on: 05/23/2025 Revision by: Jenny Liu (RAI Coordinator) • DRESSING: Maximal Assist: Sharon requires one or two team members to provide PCA weight bearing assistance to dress her upper and lower body. she is able to guide her arms and legs through clothes. Revision on: 05/23/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Sharon is able to eat independently with staff to provide cueing, reminders PCA and encouragement. She requires setup from staff to cut her food. Care level varies and she may require the team to assist her to complete her meal. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Wheelchair used for locomotion and requires one staff to porter her PCA on the unit. Revision on: 05/23/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
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Focus		Goal	Interventions				Position	Freq/Resolved
<ul style="list-style-type: none">Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Dementia, Acute pancreatitis, Diverticular disease of intestine, Delusional disorder Revision on: 07/06/2023 Revision by: Elsie Calumpang (RN)			<ul style="list-style-type: none">PERSONAL HYGIENE: Maximal Assist: Sharon needs assistance to brush/comb her hair, brush her teeth, wash/dry her face, hands. Team member to provide peri care. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator)				PCA	
			<ul style="list-style-type: none">HAND HYGIENE: 1 staff to provide REMINDER & ENCOURAGMENT, at times limited assistance is required to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 09/14/2021 Revision by: Haley Cadarian (Quality Lead)				PCA	
			<ul style="list-style-type: none">TOILET USE: Total assist: Sharon requires Maxi lift to transfer her from the chair to bed. Then two staff members to clean her, re-apply brief and adjust her clothes after. Revision on: 05/23/2025 Revision by: Jenny Liu (RAI Coordinator)				PCA	
			<ul style="list-style-type: none">TRANSFERRING: Two staff present with a MAXI lift.				PCA	
			Revision on: 06/17/2025 Revision by: Gurjit Kaur (RN)					
<ul style="list-style-type: none">Potential to experience FOOT/FEET complications related to diabetic diagnosis. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN)		<ul style="list-style-type: none">To maintain adequate Foot/Feet/Toenail care and minimize episodes of inflammation, infection or complications through to the next review date.	<ul style="list-style-type: none">COMMUNICATION: Involve/collaborate with Sharon in decision making for footcare treatment plan. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN)				Footcare Nurse - Internal	
			<ul style="list-style-type: none">TREATMENT PLAN: Sharon requires footcare/treatment during shower days and PRN.					
Allergies	Penicillin, Sulfa Antibiotics			D.O.B.	08/17/1951	Physician	Wallace Liang	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhe...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Helman, Sharon (922131005293)			Admission Date	10/23/2019	Location	8 806 A	
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	Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	Revision on: 12/28/2022 Revision by: Katherine Arca (RPN) • PREFERENCE: Sharon likes to have footcare during shower days by registered staff. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN)	Footcare Nurse - Internal	
• Potential for CONSTIPATION related to decreased mobility, etc. Revision on: 09/18/2022 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026 • Sharon will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Sharon/SDM) for decision making regarding constipation management. Revision on: 09/18/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order 	Registered Staff Registered Staff Registered Staff	
• Use of PASD two 1/4 bedrails to assist Sharon with Activity of Daily Living turning and repositioning in bed. Revision on: 06/24/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> • Sharon will be effectively supported with use of two 1/4 bedrails to optimize Activity of Daily Living each day through to the next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of monitoring Sharon for continued benefit to use two 1/4 bedrails as to support appropriate turning and repositioning and transferring. Revision on: 05/05/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • BED RAIL (TWO PARTIAL): 1/4 bedrails in USE as a PASD to assist resident with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 11/16/2022 Revision by: Haley Cadarian (Quality Lead) 	PCA	D/E/N
• Potential for BOWEL INCONTINENCE	• Sharon will receive support to	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for	Registered	
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses			
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Resident	Helman, Sharon (922131005293)	Admission Date	10/23/2019	Location 8 806 A
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related to Alcohol Dementia Revision on: 10/16/2021 Revision by: Maryola Perion (RN)	(use toilet) and promote optimal bowel continence each day through to the next review. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Totally incontinent. Report change to level as noted. CHECK and CHANGE: Sharon experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: resident uses white color brief per prevail sheet. Revision on: 02/23/2025 Revision by: Jenny Liu (RAI Coord Back-up)	Staff PCA PCA PCA		
• URINARY (Functional) INCONTINENCE related to Alcohol Dementia Revision on: 10/16/2021 Revision by: Maryola Perion (RN)	• Sharon will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/16/2021 Revision by: Maryola Perion (RN) • URINARY Continence level is Totally INCONTINENT. Report change to level as noted. Revision on: 02/23/2025 Revision by: Jenny Liu (RAI Coord Back-up) • TOILETING PREFERENCE: toilet resident before supper Revision on: 08/07/2025 Revision by: Gurjit Kaur (RN) • CHECK and CHANGE: Sharon experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: resident uses white color brief per prevail sheet. Revision on: 02/23/2025 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff PCA PCA PCA PCA		
• Potential to experience complications and side effects impacting quality of life related	• To promote Sharon's understanding of treatment regime and possible side effects	• COMMUNICATION: Involve/collaborate with Sharon/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 04/20/2021			
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
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to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 04/20/2021 Revision by: Maryola Perion (RN)		of medication taken through to the next review. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026 • To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	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: 04/20/2021 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.		Registered Staff	
• Expressed Wishes and Beliefs related to Sharon Medical Treatment and End of Life Care Revision on: 01/27/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)		• To support and honor Sharon expressed wishes and beliefs through to the End of Life. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• CPR: Sharon/SDM wishes express NO CPR and NO TRANSFER to hospital Revision on: 07/03/2023 Revision by: Kenya Mosely (RPN)			
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA)		• To treat and minimize signs/symptoms or complications associated with CEREBROVASCULAR ACCIDENT (CVA) through to the next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• COMMUNICATION: Involve/ collaborate with SDM in decision making of neurological care management for CEREBROVASCULAR ACCIDENT (CVA). Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for CEREBROVASCULAR ACCIDENT (CVA) as per MD order. Monitor effectiveness and for side effects. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with CEREBROVASCULAR ACCIDENT (CVA) for changes to health status and alteration or complications affecting neurological function.		PCA	
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses					
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Resident	Helman, Sharon (922131005293)		Admission Date	10/23/2019	Location	8 806 A
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Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none">• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA)		Revision on: 01/22/2021 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none">• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY to Penicillin, Sulfa Antibiotics. Revision on: 01/22/2021 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Sharon will be protected from exposure to allergen each day through next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about ALLERGY to Penicillin, Sulfa Antibiotics Revision on: 01/22/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications mortality. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• ALLERGY ALERT: Sharon has ALLERGY to Penicillin, Sulfa Antibiotic. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 01/22/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MD/PHARMACY ALERT: Notify the MD and Pharmacy of Sharon's Allergy and minimize risk for exposure to allergen. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• RESCUE MEDICATION: Administer EPINEPHRINE as per MD/NP Order. Monitor effectiveness and immediately notify MD/NP of use.	Registered Staff		
<ul style="list-style-type: none">• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Alcohol Dementia. Revision on: 01/22/2021 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Sharon will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date.	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with SDM for decision making about strategies needed to support effective communication. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• PRIMARY LANGUAGE: Sharon's primary language is English. She is able to speak/understand English.			
Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Helman, Sharon (922131005293)	Admission Date	10/23/2019	Location	8 806 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026 • Sharon will be able to make basic needs known each day through to the review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Sharon needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 10/16/2021 Revision by: Maryola Perion (RN)	ACT			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Alcohol Dementia. Revision on: 01/22/2021 Revision by: Maryola Perion (RN)	• Sharon will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making of Cognitive Loss for Alcohol Dementia. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • ORIENTATION: Gently reorient to person, place, time as needed when Sharon is feeling lost or in confused state. Revision on: 01/22/2021 Revision by: Maryola Perion (RN) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 01/22/2021 Revision by: Maryola Perion (RN)	PCA			
• SPIRITUAL BELIEFS: Sharon is of the Protestant Faith. Revision on: 05/04/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	• To provide Sharon spiritual support as interested through to the next review date. Revision on: 12/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/26/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of his/her choice including spiritual discussions, prayer circle, spiritual music, etc. Revision on: 05/04/2020 Revision by: Shayna Lee Wonsch (Activation Manager) • SELF-DIRECTED SPIRITUAL Activities: Sharon engages in praying, etc. Revision on: 10/28/2019 Revision by: Shayna Lee Wonsch (Activation Manager)	ACT ACT			
• Sleep Patterns Revision on: 11/14/2019	• To promote adequate rest/sleep for Sharon based on	• REST PATTERN: Preferred bedtime: Between 1900-2000, usual wake time: Between 6:00-7:00	PCA			
Allergies	Penicillin, Sulfa Antibiotics		D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Helman, Sharon (922131005293)		Admission Date	10/23/2019	Location	8 806 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

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Care Plan Report


[illegible]

Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere(F02.8), Diverticular disease of intestine, part unspecified, without perforation or abscess(K57.9), Rosacea, unspecified(L71.9), Tinea unguium(B35.1), Vitamin D deficiency, unspecified(E55.9), Delusional disorder(F22.0), Other acute renal failure(N17.8), Hyperosmolality and hypernatraemia(E87.0)

Allergies	Penicillin, Sulfa Antibiotics	D.O.B.	08/17/1951	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Acute pancreatitis, unspecified(K85.9), Personal history of alcohol abuse(Z86.40), Dementia in other specified diseases classified elsewhere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Helman, Sharon (922131005293)	Admission Date	10/23/2019	Location	8 806 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for Persistent PAIN and alteration in comfort level related to chronic pain, skin ca, Osteomyelitis, Stroke, Right Radial Nerve Palsy, discomfort in his right rib area. Most Current Pain Score is (0) Revision on: 06/02/2025 Revision by: Jenny Liu (RAI Coordinator)		• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• COMMUNICATION: Involve/collaborate with (Said)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 03/15/2023 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 (Specify if topical) as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.			RN Registered Practical Nurse Registered Practical Nurse RN	
• Said has potential to experience a safety hazard/burn injury related to personal SMOKING habits, Fentanyl use, potentially smoking in room and burning incense (December 26th 2024). Revision on: 12/26/2024 Revision by: Danielle Loreto (RAI Coordinator)		• Said will be safe when choosing to smoke through to the next review Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• COMMUNICATION: Involve (Said/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: 11/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • SMOKING CONTRACT: Said has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Said has been advised that he is not permitted to smoke prohibited substances onsite and must leave the property. Naloxone kit is encouraged when he leaves. Revision on: 11/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			Social Worker Social Worker	
• Potential risk for safety related to history of illicit drug use. Revision on: 05/09/2024 Revision by: Alyssa Egan (Interim ADOC)		• To lower risk of infection and prevent transmission of identified Antibiotic Resistant Organism through to the next review. Target Date: 11/27/2025	• PPE PRECAUTIONS: Precaution identified as CONTACT for risk of possible exposure to illicit drugs and requires use of the following PPEs NITRO Gloves, Gown, Mask when providing direct care, handling soiled clothes and linens, disposing of incontinent product, etc Revision on: 11/20/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATIONS: Administer medication/treatment as per MD/NP order. Revision on: 12/19/2023 Revision by: Jenny Liu (RAI Coord Back-up)				
• Increased risk for FALLS related to		• To promote safety, minimize	• COMMUNICATION: Involve/collaborate with (Said)/SDM in decision making in fall				
Allergies	No Known Allergies		D.O.B.	12/27/1975	Physician	Wallace Liang	
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023	Location	8 812 A	
Last Care Plan Review Completed:		08/27/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
History of falls, Impaired Mobility, Stroke, Chronic Pain. Revision on: 03/05/2024 Revision by: Jenny Liu (RAI Coord Back-up)	risk for falls and/or fall related injury each day through to the next review period. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	prevention Plan of Care. Revision on: 03/15/2023 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: 03/15/2023 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair, walker Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Said. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	PCA PCA PCA	D/E/N
• Saiid has potential for recurrence of SUBSTANCE ABUSE, withdrawal symptoms, mood/behaviour disturbances related to use of drugs/weeds/narcotic Revision on: 11/11/2023 Revision by: Maryola Perion (RN)	• Said will remain free of non-prescribed narcotics/marijuana through next review date. Revision on: 11/11/2023 Revision by: Maryola Perion (RN) Target Date: 11/27/2025	• SET BOUNDARIES: Discuss behavioural limits and expectations with Said. Be very clear with limits to establish behaviour boundaries. Revision on: 11/11/2023 Revision by: Maryola Perion (RN) • ROOM CHECK: Check Said's room/belongings for narcotics, drug paraphernalia, etc. each shift. If any found report to Charge Nurse/DOC/ED/SW. Revision on: 11/11/2023 Revision by: Maryola Perion (RN) • MEDICATIONS: Administer medications as ordered and monitor for side effects/effectiveness. Report to MD as necessary. Narcan if needed for signs of Opioid overdose as needed. Revision on: 11/11/2023 Revision by: Maryola Perion (RN)	Social Worker Director of Care Executive Director	
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to (use of diuretic) Revision on: 09/21/2023 Revision by: Jenny Liu (RAI Coord Back-up)	• To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• 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: 09/21/2023 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff	
Allergies	No Known Allergies	D.O.B.	12/27/1975	Physician Wallace Liang
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre	Print Date	10/30/2025	
Resident	Khanafer, Said (922131005503)	Admission Date	03/15/2023	Location 8 812 A
Last Care Plan Review Completed:		08/27/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Target Date: 11/27/2025					
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by (Insomnia and anger toward staff) related to new environment. Revision on: 09/21/2023 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Said will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Said for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 03/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) <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: 03/28/2023 Revision by: Jenny Liu (RAI Coord Back-up)				
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Skin Ca, CHF, A-Fib, Chronic Pain Revision on: 08/17/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	<ul style="list-style-type: none"> Said 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: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025 <ul style="list-style-type: none"> Said have ALL ADL care tasks met each day through the next review date. Revision on: 12/19/2023 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 11/27/2025	<ul style="list-style-type: none"> BATHING: Said prefers (shower/bath) on (Wednesdays and Sundays on Day shift after breakfast). Said is able to do his own shower. One staff (Set up) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> BED MOBILITY: Said is able to turn and reposition himself Independently while in bed without assistance or oversight from the staff. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> DRESSING: Said is able to dress himself independent but may require one staff assistance to assist him in putting on his pants and socks after showers Revision on: 09/21/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> EATING: Said is Independent with set up from staff. Eats in the unit dining room - 8th floor. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> LOCOMOTION: Said is walking through the building without his walker. Wheelchair is also available for use if needed. Resident can go out from the building and take Naloxone kit on LOA. Revision on: 08/27/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
Allergies	No Known Allergies	D.O.B.	12/27/1975	Physician	Wallace Liang	
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Skin Ca, CHF, A-Fib, Chronic Pain Revision on: 08/17/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)			• PERSONAL HYGIENE: Said is Independent with combing his hair, washing/drying his face and hands, doing his own peri care. Revision on: 03/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) • HAND HYGIENE: 1 staff to provide REMINDER assistance to apply sanitizer, use hand wipes for hand hygiene. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • TOILET USE: Said is able to go to the toilet by himself, transfers on/off the toilet, adjusts clothes, cleanses independently without any help or oversight from staff. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • TRANSFERRING: Said is able to Transfer Independently from a sit to stand position. Revision on: 03/16/2023 Revision by: Kenya Mosely (RPN) • ORAL CARE: Said has some teeth missing and broke. He is able to do his own oral hygiene. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • SHAVING - Said will have his mustache shaven on shower days and as needed. Revision on: 01/07/2024 Revision by: Kenya Mosely (RPN)			PCA	
• Sleep Patterns; Potential for alteration in sleep patterns related to insomnia. Revision on: 06/28/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To promote adequate rest/sleep for Said based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/17/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• REST PATTERN: Preferred bedtime: 11pm-12MN, usual wake time: 8:00-9:00 Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • SLEEPWEAR: Said prefers to wear his own clothes Revision on: 03/15/2023 Revision by: Maryola Perion (RN)			PCA	
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being		• To support Said's Psycho-Social well being through to the	• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; Friendly/1: 1 visits, sports, comedy corner, games - Bingo, reading - daily chronicles, patio				D
Allergies	No Known Allergies			D.O.B.	12/27/1975	Physician	Wallace Liang
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Khanafer, Said (922131005503)			Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
related to disinterest. ISE Score: 4/6 Revision on: 06/26/2023 Revision by: Mitchell Atkinson (Recreation Aide)	next review. Revision on: 11/26/2024 Revision by: Laura Morris (Restorative Care Aide) Target Date: 11/27/2025	programs, music programs, special events, etc. Revision on: 05/28/2025 Revision by: Megan Pipe (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as; Watching/listening to TV, listening to music/radio, visiting with residents/team members, patio socializing/enjoying outdoors, etc. Revision on: 06/19/2023 Revision by: Mitchell Atkinson (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation, reading, reminiscing, music, humor, etc. Revision on: 03/23/2023 Revision by: Mitchell Atkinson (Recreation Aide) • SOCIAL INTERACTION: Promote the opportunity for Said to make friendships and sit with friends during activities. Revision on: 03/23/2023 Revision by: Mitchell Atkinson (Recreation Aide)	ACT	
• Said is experiencing episode of INFECTION (HCV antibody positive). Onset date (Apr. 4, 2023) Revision on: 04/05/2023 Revision by: Jenny Liu (RAI Coord Back-up)	• To have infection adequately managed and treated without further complications by target date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• MONITORING: Utilize holistic perspective of monitoring resident for (signs/symptoms, hydration status, overall health condition, process of healing, secondary infections.) until stable. Revision on: 04/05/2023 Revision by: Jenny Liu (RAI Coord Back-up) • PPE PRECAUTIONS: Precaution identified as CONTACT for HCV and requires use of the following PPEs (Gloves, Gown) when (providing direct care, handling soiled clothes and linens, disposing of incontinent product, etc.). Revision on: 04/05/2023 Revision by: Jenny Liu (RAI Coord Back-up)		
• SPIRITUAL BELIEFS: Said is Non-Religious. Revision on: 03/23/2023 Revision by: Mitchell Atkinson (Recreation Aide)	• To provide Said spiritual support as interested through to the next review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• PERSONAL CHOICE: Respect Said's right to decline participation in Spiritual Program. Revision on: 03/23/2023 Revision by: Mitchell Atkinson (Recreation Aide)	ACT	
• Expressed Wishes and Beliefs related to	• To support and honor	• CPR: Said wishes to have CPR and TRANSFER to hospital.		
Allergies	No Known Allergies		D.O.B.	12/27/1975
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses		Physician	Wallace Liang
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023
			Location	8 812 A
Last Care Plan Review Completed:		08/27/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Said Medical Treatment and End of Life Care Revision on: 03/19/2023 Revision by: Mitchell Atkinson (Recreation Aide)	(resident's name) expressed wishes and beliefs through to the End of Life. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	Revision on: 03/15/2023 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> Potential for Expressive Behaviour of VERBAL, RESISTANCE to care need related to Inability to COPE Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Said will be supported to adjust to his new environment to lower risk of triggering former (VERBALLY inappropriate, resisting care) behaviour episodes through to the next review. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Said)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk. <ul style="list-style-type: none"> TRIGGERS leading to VERBAL (yelling, screaming, etc.) as expression of behaviour include (loss of control, frustration, pain, misunderstanding care intention, etc.) Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> VERBAL Behaviour: If Said is heard yelling, swearing or calling others names; calmly remind him to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expression of behaviour includes (care needs, poor judgement, etc.) Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> RESISTANCE to Care Need: If Said is refusing to (Specify: bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. 	BSO - Internal BSO - External Social Worker Registered Staff			
Allergies	No Known Allergies	D.O.B.	12/27/1975	Physician	Wallace Liang	
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> Potential for Expressive Behaviour of VERBAL, RESISTANCE to care need related to Inability to COPE Revision on: 03/15/2023 Revision by: Maryola Perion (RN)		Revision on: 03/15/2023 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> Said has Chronic Renal Failure (CRF) and is on HEMODIALYSIS related to diagnosis of Renal Failure Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To treat and minimize complications associated with Chronic Renal Failure through to next review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Said)/SDM in decision making for CRF care management. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with CRF for changes to health status and alteration or complications affecting renal function. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> DIALYSIS: Said has dialysis on Mondays, Wednesdays, Fridays pick up at 17:30 by PCA Crown Transportation. Revision on: 01/08/2024 Revision by: Jenny Liu (RAI Coord Back-up)				
<ul style="list-style-type: none"> Nutrition Risk Level 	<ul style="list-style-type: none"> Said will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	<ul style="list-style-type: none"> Labelled Item Lunch: Said receives one can of ginger ale as per preference. Revision on: 02/21/2025 Revision by: Ronnie Fung (FSM - Food Services Manager) <ul style="list-style-type: none"> NUTRITION RISK: Said is moderate risk level. Revision on: 08/25/2025 Revision by: Brittany Hyde (Registered Dietitian) <ul style="list-style-type: none"> DIET ORDER: Said will receive Regular diet, Regular texture 	PCA Registered Practical Nurse RN Dietitian (RD)	D		
Allergies	No Known Allergies	D.O.B.	12/27/1975	Physician	Wallace Liang	
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Nutrition Risk Level		Revision by: Holly Laasanen (Dietitian (RD)) • RENAL CARE: - Do not serve bananas, oranges, orange juice, tomatoes- ok to serve pizza and cabbage rolls- resident will remove tomato sauce - Do not serve potatoes of any kind. Provide double portion of rice/2 slices of bread and butter in place of potatoes. - Do not serve salt with meals Revision on: 12/02/2024 Revision by: Lexi Dakin (Dietitian (RD))	PCA			
• Potential to experience alteration in CARDIAC FUNCTION related to: Atrial Fibrillation , Chronic Heart Failure (CHF), Hypotension. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Atrial Fibrillation , Chronic Heart Failure (CHF), Hypotension through to the next review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• COMMUNICATION: Involve/collaborate with (Said)/SDM in decision making of Cardiac Care Management for Atrial Fibrillation , Chronic Heart Failure (CHF), Hypotension. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Atrial Fibrillation , Chronic Heart Failure (CHF), Hypotension for changes to health status and alteration or complications affecting cardiac function. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication as per MD Order and monitor for side effects. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • OXYGEN: Administer Oxygen as per MD order as needed. Revision on: 08/27/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Practical Nurse RN Registered Practical Nurse RN			
• Potential to experience complications and side effects impacting quality of life related	• To monitor effectiveness and for side effects of medication used each day through to the	• COMMUNICATION: Involve/collaborate with (Said)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 03/15/2023				
Allergies	No Known Allergies	D.O.B.	12/27/1975	Physician	Wallace Liang	
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
to use of (multi-pharmacy, etc.) Revision on: 03/15/2023 Revision by: Maryola Perion (RN)		next review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	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: 03/15/2023 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.				Registered Staff	
• Potential for bruising, bleeding, clotting or other complications related to use of ANTICOAGULANT medication. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)		• To monitor for bleeding and minimize complications related to use of Coumadin through the review date. Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• COMMUNICATION: Involve/collaborate with (Said)/SDM in decision making and health teaching of Anti-coagulation medication use. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using Anticoagulant therapy for changes to health status and complications causing bleeding or clotting issues. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • BLEEDING ALERT: Notify nurse immediately if Said is bleeding (noted blood in urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • FOOD/MEDICATION ALERT: Said to avoid consumption of large amounts of leafy green vegetables or other dietary sources of VITAMIN K which can interfere with Coumadin effect. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • LAB WORK: Monitor lab and report results to MD as needed. Follow up as indicated. Revision on: 03/15/2023 Revision by: Maryola Perion (RN) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.				PCA 	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential for bruising, bleeding, clotting or other complications related to use of ANTICOAGULANT medication. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)		• RESCUE MEDICATION: Administer Vitamin K injection (treatment of anticoagulant overdose) as per MD Order. Monitor its effectiveness and for side effects. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	RN			
• BOWEL Continence - Said is continent and has self recognition of urge to defecate. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	• Said to remain continent of bowels through next review date Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Said toilets self for bowel movements. Each shift ask if he/she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	PCA PCA			
• URINARY Continence - Said is continent and has self recognition of urge to void. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	• Said will maintain continence level through next review date Revision on: 09/25/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• URINARY Continence Level is: CONTINENT • SELF TOILETING: Said toilets self. Each shift ask if he has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	PCA PCA			
• Risk for Impaired SKIN INTEGRITY related to Skin Ca, Mycosis fungoides Revision on: 03/15/2023 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Revision on: 09/25/2023	• 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.	12/27/1975	Physician	Wallace Liang
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Khanafer, Said (922131005503)		Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025				

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved
	Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 11/27/2025	• HEALTH EDUCATION: Engage resident/SDM in health education regarding prevention of skin impairment. Revision on: 09/21/2023 Revision by: Jenny Liu (RAI Coord Back-up)		

Diagnosis

Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hypotension, unspecified(I95.9), Malignant neoplasm of skin, unspecified(C44.9), Stroke, not specified as haemorrhage or infarction(I64), Congestive heart failure(I50.0), Mycosis fungoides(C84.0), Haemorrhage of anus and rectum(K62.5), Other and unspecified injury of unspecified nerves at wrist and hand level(S64.98), Hyperkalaemia(E87.5), Phlebitis and thrombophlebitis of other deep vessels of lower extremities(I80.2), Peripheral T-cell lymphoma, not elsewhere classified(C84.4), Nonrheumatic tricuspid (valve) insufficiency(I36.1), Mitral (valve) insufficiency(I34.0)

Allergies	No Known Allergies	D.O.B.	12/27/1975	Physician	Wallace Liang
Diagnosis	Other specified myopathies(G72.8), Acute renal failure, unspecified(N17.9), Osteomyelitis, unspecified, other site(M86.98), Atrial fibrillation, unspecified(I48.90), Other chronic pain(R52.2), Hy...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Khanafer, Said (922131005503)	Admission Date	03/15/2023	Location	8 812 A
Last Care Plan Review Completed:		08/27/2025			

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 Spinal Stenosis with fusion to L4-S1, Arthritis, complaints of back pain, hip pain, neuropathic pain, headache. Most current pain score is 3. Revision on: 08/31/2025 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: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025 	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Roxanne)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 09/18/2022 Revision by: Maryola Perion (RN) MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. PREFERENCES: Resident has refused to change PRN pain meds to be scheduled. Her preference for pain management is to leave prn as it is. Health teaching given. Revision on: 11/03/2023 Revision by: Ranjita Yadav (RPN) MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) 	RN Registered Practical Nurse Registered Practical Nurse RN			
<ul style="list-style-type: none"> Potential Risk for accusations surrounding the team putting crack pipes in her bed/straws and drinks. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> To promote early identification of changes in Roxanne's condition and prevent onset of Delirium through to targeted date. Revision on: 04/25/2024 Revision by: Katie Savo Target Date: 12/18/2025 	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Roxanne for indications of DELIRIUM including dehydration, poor appetite, vomiting, diarrhea, blood loss, acute flare up of chronic condition Revision on: 04/25/2024 Revision by: Katie Savo ORIENTATION: Gently reorient to place and time as needed when Roxanne is feeling lost or in confused state. Revision on: 04/25/2024 Revision by: Katie Savo 	PCA			
<ul style="list-style-type: none"> Nutrition Risk Level Revision on: 02/15/2025 Revision by: Holly Laasanen 	<ul style="list-style-type: none"> Roxanne will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025 	<ul style="list-style-type: none"> Labelled Item Dinner: salad topped with protein daily (encourage Roxanne to try items from the dinner menu in addition to salad) Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD)) NUTRITION RISK: Roxanne is HIGH risk level. Revision on: 08/23/2024 Revision by: Anika Dhalla (Dietitian (RD)) DIET ORDER: Roxanne will receive Regular diet, Regular texture 	PCA Registered Practical Nurse RN Dietitian (RD) PCA	E		
Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang	
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022	Location	
Last Care Plan Review Completed:		09/18/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<ul style="list-style-type: none">• Will weigh within realistic GWR 85-95 kg through to next review date. Revision on: 02/15/2025 Revision by: Holly Laasanen Target Date: 12/18/2025• Roxanne will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2175 ml/day (25 ml/kg using 87 kg weight) through to next review date. Revision on: 05/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/18/2025	<p>Revision on: 08/23/2024 Revision by: Anika Dhalla (Dietitian (RD))</p> <ul style="list-style-type: none">• FLUID CONSISTENCY: Roxanne drinks REGULAR/THIN Level 0 Fluids. Revision on: 06/09/2022 Revision by: Anna Slack (Registered Dietitian)• FLUID TARGET: Encourage Roxanne to drink a minimum of 1740 ml per day. Revision on: 05/08/2025 Revision by: Holly Laasanen (Dietitian (RD))• EXTRA FLUIDS: Offer a minimum of 175 ml (1 Kennedy cup) extra fluids outside of meals and snacks daily. Roxanne is sent special-labelled ice to encourage drinking. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))• DINING INSTRUCTIONS: Limit coffee to 1 cup per meal. Encourage Roxanne to eat well from all food groups at meals. Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))• ADAPTIVE AIDS: Roxanne requires a Kennedy cup with straw at meals and snacks. Revision on: 05/08/2025 Revision by: Holly Laasanen (Dietitian (RD))• HIGH PROTEIN AM SNACK: Blueberry yogurt daily Revision on: 09/22/2025 Revision by: Brittany Hyde (Registered Dietitian)• HIGH CALORIE/PROTEIN SNACK PM: Blueberry yogurt daily Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD))• MEDPASS SUPPLEMENTS: 120 ml Resource 2.0 once daily in afternoon as per resident's preference (240 kcal, 10 g pro) Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))	Diet PCA PCA PCA Registered Practical Nurse PCA Diet PCA PCA	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Jenny Liu (RAI Coord Back-up)	Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<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 Roxanne to consume fluids; amount as per Nutrition Care Plan. 	Registered Staff			
<ul style="list-style-type: none"> • Risk for Impaired SKIN INTEGRITY related to history of falls, Tremors, Peripheral Neuropathy, swelling of legs. 	<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. 	<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. • POSITIONING: Turn, reposition at least every 2 hours or when in bed/wheelchair to offload pressure. 	PCA	Q2h		
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of RESISTANCE to care need, Socially inappropriate behaviors- accusatory of the team, hoarding jams, peanut butter and sugar packets in her drawer, hoarding medications, verbally abusive, accusing staff of stealing her belongings, staff planting things in her room (crack pipe, white stuff, etc.), threatening staff, Hallucinating - stated that someone putting cracks in her food, drinks even in straws as well, someone is whispering about her related to Depression, Anxiety and Bipolar Disorder, history of low mood, Paranoia. 	<ul style="list-style-type: none"> • To promote safety for Roxanne and/or others during each episode of expressive behaviour through to the next review date. • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 2. 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Roxanne about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Roxanne for indications to change in or for escalating expressive behaviour risk. • TRIGGERS leading to VERBAL yelling, calling names, threatening, etc. as expression of behaviour include (loss of control, frustration, pain, misunderstanding care intention, etc.) • VERBAL Behaviour: If Roxanne is heard yelling or calling others names, threatening; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. 	BSO - Internal BSO - External Social Worker			
Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang	
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of refusing medication, refusing to be changed and peri care, refuse to eat, etc. as expression of behaviour include misunderstanding care needs, etc. <p>Revision on: 02/28/2024 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Roxanne is refusing medication, refusing to be changed and peri care, refuse to eat, re-approach in 10-15 minutes. Report episode to Registered Staff. <p>Revision on: 02/06/2024 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to SOCIALLY Inappropriate (hoarding jams, peanut butter, and sugar packets in her drawer, hoarding medications, etc) as expression of behaviour include decreased insight, poor judgement, etc.)Nurses to make sure Roxanne swallows her medications. <p>Revision on: 04/14/2023 Revision by: Elsie Calumpang (RN)</p> <ul style="list-style-type: none"> • SOCIALLY Inappropriate Behaviour: health teachings provided that we cannot be keeping foods in the drawer or self medication for health and safety reasons. <p>Revision on: 04/14/2023 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • HALLUCINATION: Hallucinating - stated that someone putting cracks in her food, drinks even in straws as well, someone is whispering about her. <p>Administer medication as per MD/NP order. Inform Registered staff of Roxanne's behavior and document accordingly.</p> <p>Revision on: 04/24/2024 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • SPECIAL CONSIDERATIONS: Upon approach please introduce yourself and gain consent to providing care. Two team members to provide care at all times related to accusatory statements.The resident is High Intensity for preferred accommodation. <p>Revision on: 09/29/2024 Revision by: Ranjita Yadav (RPN)</p> <ul style="list-style-type: none"> • BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction) <p>Verbal: Yelling, swearing, threatening, calling others names. Triggers: Pain,</p>	Registered Practical Nurse RN		
Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphera...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)	Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of RESISTANCE to care need, Socially inappropriate behaviors- accusatory of the team, hoarding jams, peanut butter and sugar packets in her drawer, hoarding medications, verbally abusive, accusing staff of stealing her belongings, staff planting things in her room (crack pipe, white stuff, etc.), threatening staff, Hallucinating - stated that someone putting cracks in her food, drinks even in straws as well, someone is whispering about her related to Depression, Anxiety and Bipolar Disorder, history of low mood, Paranoia.</p> <p>Revision on: 04/24/2024 Revision by: Maryola Perion (RN)</p>		<p>misunderstanding care intentions. Roxanne can be accusatory toward staff therefore 2 staff must be present at all times in her room. Socially Inappropriate: Hoarding, accusing staff of theft, planting items in her room (illegal substances). Resident will hoard food items such as peanut butter, jam etc. and will keep her own medications in her room</p> <p>Triggers: Environment, loss of control, following policies within the facility.</p> <p>Interventions: Education on health teaching regarding hoarding food and self medicating for health and safety reasons. Refusing Care: Refusing showers, care.</p> <p>Triggers: some staff, misunderstanding care intentions, paranoia. Recommendations: Use stop and go approach if resident is refusing care or agitated. Reapproach when the resident is calm/ready. Roxanne enjoys attending main floor programs, going out of the facility with her friend and going outside for fresh air. If staff find any illegal substances, contraband report to registered staff DOC immediately</p> <p>Revision on: 03/26/2025 Revision by: Leslie Meloche (Recreation Aide)</p>			
<p>• Roxanne has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Unable to get down to the smoking area on her own, Unable to light her own cigarette, smoking</p>	<p>• Roxanne will be safe when choosing to smoke through to the next review</p> <p>Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>• COMMUNICATION: Involve Roxanne in review of smoking legislation No smoking inside the home or within 9 meters from any doorway. Roxanne has been deemed unsafe to smoke on the homes property. Family/friends are able to take her out to smoke but off of the homes property.</p> <p>Revision on: 07/04/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	Social Worker		
Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)	Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
crack in her room. Revision on: 02/28/2024 Revision by: Maryola Perion (RN)	Target Date: 12/18/2025	<ul style="list-style-type: none"> • HEALTH TEACHING: engage with Roxanne and support their effort to explore smoking cessation options. Revision on: 07/04/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • SMOKING CONTRACT: Roxanne has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) 	Social Worker Administrator		
<ul style="list-style-type: none"> • Potential to experience alteration in MOOD as exhibited by repetitive verbalizations, persistent anger with self or others, health and non health complaints, unpleasant mood in the morning, sad, pained, worried facial expressions, insomnia/unusual sleep pattern, repetitive physical movements related to Depression, Complaints of pain, Anxiety and Bipolar Disorder, history of low mood, Paranoia. Revision on: 02/28/2024 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 5. Revision on: 05/28/2024 Revision by: Katie Savo Target Date: 12/18/2025 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Roxanne about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Roxanne for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • RESIDENT STRENGTHS: Build on Roxanne's effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) • FRIEND SUPPORT: Roxanne enjoys visits from her friend Lou Lou, Johnny. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) • SLEEP/REST: Promote adequate sleep and rest to stability of Roxanne's mood. Report changes in sleeping habits to Registered Staff as noted. Revision on: 02/28/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) 			
• Roxanne has potential for SUBSTANCE	• Roxanne will remain free of	• SET BOUNDARIES: Discuss behavioural limits and expectations with Roxanne. Be	Social Worker		
Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)	Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
ABUSE mood/behaviour disturbances related to drinking alcohol (vodka) in her room brought by her friend (John), intoxication, smoking marijuana, smoking crack in her room. Revision on: 02/20/2024 Revision by: Maryola Perion (RN)		non-prescribed alcohol/drugs through next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	very clear with limits to establish behaviour boundaries. Revision on: 01/12/2023 Revision by: Maryola Perion (RN) • ROOM CHECK: Check Roxanne's room/belongings for alcohol, marijuana, drug paraphernalia, each day. If any found report to Charge Nurse/DOC/ED/SW immediately. Revision on: 02/20/2024 Revision by: Chelsea Campbell-Wright (ADOC) • ALCOHOL USE SUPERVISED: Roxanne has an order of One beer once a day as needed. Monitor for and report concerns of intoxication. SUBSTANCES: Call the police if illegal substances are found in residents room. paraphernalia found follow precautions for safe removal-Nitrile gloves gown, n95 and face shield if there is any risk of getting the substances in eyes. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • BEHAVIOUR CONTRACT: Roxanne has agreed to follow a personalized Behavioural Contract and accepts the consequences of breaking those agreed upon rules (2/20/24). Revision on: 02/21/2024 Revision by: Maryola Perion (RN)			Director of Care Executive Director	
• Increased risk for FALLS related to History of falls, Tremors, Spinal Stenosis, Peripheral Neuropathy. Revision on: 01/26/2024 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	• COMMUNICATION: Involve/collaborate with (Roxanne)/SDM in decision making in fall prevention Plan of Care. Revision on: 09/18/2022 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within Roxanne's reach, check that it is in working order and remind/encourage to use it. Roxy wants her call bell clipped to her clothes where she can reach it with her left hand. Revision on: 11/16/2022 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 12/04/2023 Revision by: Chelsea Campbell-Wright (ADOC)			PCA PCA	D/E/N
Allergies	Keflex		D.O.B.	08/29/1958	Physician	Wallace Liang	
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphera...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022	Location	8 808 A	
Last Care Plan Review Completed:		09/18/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Increased risk for FALLS related to History of falls, Tremors, Spinal Stenosis, Peripheral Neuropathy. Revision on: 01/26/2024 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> ENVIRONMENT: Ensure environment clean and clear of clutter to reduce fall risk for Roxanne. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> FOOTWEAR: Ensure Roxanne is wearing appropriate footwear at all times. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA	
<ul style="list-style-type: none"> At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest. ISE Score: 4/6 Revision on: 09/04/2023 Revision by: Mitchell Atkinson (Recreation Aide)	<ul style="list-style-type: none"> Team members will support Roxy in decreasing social isolation by participating in activities of personal choice 10-20 times per month by the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1: ACT 1 visits, comedy corner, physiotherapy group exercises, games - Bingo, patio time, reading - library cart, Happy Hour, special events, etc. Revision on: 09/12/2022 Revision by: Mitchell Atkinson (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, reading independently, visiting with residents/team members, etc. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none"> ONE to ONE: Provide her with individual visits for conversation, bedside activity, reading, reminiscing, music, humor, etc. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none"> FAMILY INVOLVEMENT: Roxanne has a friend named Johnny who visits the home on a almost daily basis bringing the resident on outings such as outdoor time, visiting restaurants, etc. Revision on: 04/16/2024 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"> SOCIAL INTERACTION: Promote the opportunity for Roxy to make friendships and sit with friends during activities. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide)	ACT	

Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)	Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<ul style="list-style-type: none">• Potential to experience complications and side effects impacting quality of life related to use of of multi-pharmacy. Revision on: 08/30/2023 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: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Roxanne in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of Roxanne using polypharmacy for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 08/30/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff				
<ul style="list-style-type: none">• COGNITIVE LOSS; alteration in thought processes memory loss, poor judgement related to Short term memory loss. Revision on: 05/31/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Roxanne will be supported to make independent choice and safe decisions each day through to the review date. Current CPS is 2/6 Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Roxanne in decision making of Cognitive Loss. Revision on: 06/28/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none">• ORIENTATION: Gently reorient to place, time as needed when Roxanne is feeling lost or in confused state. Revision on: 06/28/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)					
<ul style="list-style-type: none">• Use of PASD (Two 1/4 bedrails) to assist Roxanne with Activity of Daily Living of turning and repositioning in bed. Revision on: 05/31/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Roxanne will be effectively supported with use of two 1/4 bedrails as a PASD to optimize Activity of Daily Living each day through to the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of monitoring Roxanne for continued benefit to use of two 1/4 bedrails to aid in turning and repositioning while in bed. Revision on: 05/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none">• BED RAIL (TWO PARTIAL): Two 1/4 bedrails to be used as a PASD to assist Roxanne with turning and repositioning while in bed. Monitor every shift and communicate any concerns to the Registered team lead. Revision on: 05/05/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	Registered Staff PCA	 D/E/N			
<ul style="list-style-type: none">• Altered VISION related to wears glasses for reading. Revision on: 05/31/2023	<ul style="list-style-type: none">• Roxanne will use glasses for vision correction daily through to the next review date.	<ul style="list-style-type: none">• EYEGLASSES: Roxanne wears eyeglasses "cheaters" for reading. Assist to clean eyeglasses as needed and store on night table when sleeping. Revision on: 06/09/2022	PCA				
Allergies	Keflex		D.O.B.	08/29/1958	Physician	Wallace Liang	
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022	Location	8 808 A	
Last Care Plan Review Completed:		09/18/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Maryola Perion (RN)	Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Roxanne's Medical Treatment and End of Life Care Revision on: 05/31/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To support and honor Roxanne's expressed wishes and beliefs through to the End of Life. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none"> CPR: Roxanne wishes to have CPR and TRANSFER to hospital. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> Sleep Patterns. Revision on: 03/24/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> To promote adequate rest/sleep for Roxanne based on identified sleep patterns/preferences each night through to the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none"> REST PATTERN: Per progress on 8/1/2024, Roxanne stated like to get up at 10:10 PCA am in the morning everyday, unless otherwise told by Roxanne and resides between 2200/2300hrs. She does take naps periodically throughout the day. Roxanne prefers to not be woken up during the night as it disrupts her sleep pattern. Revision on: 08/02/2024 Revision by: Jenny Liu (RAI Coord Back-up)			
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Tremors, Arthritis, Spinal Stenosis, Peripheral Neuropathy Pain. Revision on: 03/03/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Roxanne will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none"> BATHING: Roxanne prefers (shower/bath) on (Sundays and Thursdays on Evening PCA shift). Two staff (TOTAL) assistance for bathing. Maxi lift for transfer with two staff to assist. Nail care to be provided on shower/bath day. Two team members to be present during care all the times due to her expressions/behaviors. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator)			
	<ul style="list-style-type: none"> Roxanne will have ALL ADL care tasks met each day through 	<ul style="list-style-type: none"> BED MOBILITY: Maximal Assist: Roxanne requires weight bearing assist from two PCA team members to turn and reposition in bed. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphere...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)	Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none"> • DRESSING: 1 team member extensive assistance with upper body and total for lower body. PCA 2 team present if resident is fatigued or has behaviours present. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • EATING: Roxanne can eat with set up assistance. Team to monitor and offer hands on support when resident is not able to feed herself. PCA Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Roxanne has a wheelchair as her primary mode of locomotion and is dependent of the team to push her on and off the unit. PCA Revision on: 08/30/2023 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Maximal Assist to total assistance: Roxanne requires two team members to complete pericare and brief change. She is able to wash her hands, face independently once set up by a staff member. PCA Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: One staff to provide total assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. PCA Revision on: 09/20/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • TOILET USE: Roxanne requires two team members to assist with checking and changing her incontinence product while in bed when incontinent. Sit to stand lift utilized to transfer onto and off of the toilet for toileting task. Roxanne prefers to be checked and changed during first and third rounds during the night. She prefers to remain asleep during second rounds. Roxanne will call if she requires assistance inbetween that time. PCA Revision on: 03/25/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • TRANSFERRING: Roxy requires the use of sit to stand to transfer her to and from bed to wheelchair with two staff assistance. PCA Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) 		
Allergies	Keflex		D.O.B.	08/29/1958
Physician			Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphera...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022
			Location	8 808 A
Last Care Plan Review Completed:		09/18/2025		

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 Tremors, Arthritis, Spinal Stenosis, Peripheral Neuropathy Pain. Revision on: 03/03/2023 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none"> TRANSFER LIFT/SLING: Maxi lift/Blue sling. Sit to stand lift/Medium size sling. Revision on: 12/20/2023 Revision by: Chelsea Campbell-Wright (ADOC) ORAL CARE: Roxanne has her own teeth and is missing some. She is able to do her own oral hygiene with staff or her friend Johnny to set her up. Uses a clothing protector when brushing her teeth. Revision on: 03/24/2023 Revision by: Maryola Perion (RN) Two staff to provide care at all times. Revision on: 02/28/2024 Revision by: Maryola Perion (RN) 			PCA	
<ul style="list-style-type: none"> SPIRITUAL BELIEFS: Roxy is of the Salvation Army Faith. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide)		<ul style="list-style-type: none"> To provide Roxy spiritual support as interested through to the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	<ul style="list-style-type: none"> PERSONAL CHOICE: Respect Roxy's right to decline participation in Spiritual Program. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide)			ACT	
<ul style="list-style-type: none"> Potential to experience rash, hives, anaphylaxis, etc. related to ALLERGY of Keflex. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide)		<ul style="list-style-type: none"> Roxanne will be protected from exposure to allergen each day through next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with Roxanne in decision making and health teaching about ALLERGY to Keflex. Revision on: 03/03/2023 Revision by: Maryola Perion (RN)				
Allergies	Keflex			D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphera...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)			Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 12/18/2025	Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • ALLERGY ALERT: Roxanne has ALLERGY to Keflex. Prevent contact with and report if noted to experience symptoms of rash, hives, swelling, difficulty breathing, etc.. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Roxanne's Allergy to Keflex and minimize risk for exposure to allergen. Revision on: 03/03/2023 Revision by: Maryola Perion (RN)			
• Potential for BOWEL INCONTINENCE related to altered mobility, peripheral neuropathy, tremors and spinal stenosis. Revision on: 06/13/2022 Revision by: Mitchell Atkinson (Recreation Aide)		• Roxanne will have bowel incontinence managed every shift through to the next review period. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of Roxanne for changes to health status, alteration of continence level or bowel function. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • BOWEL Continence level is incontinent. Report change to level as noted. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor Roxanne for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • INCONTINENCE PRODUCT: Roxanne wears GREY color brief per prevail sheet. Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
• URINARY (Mixed) INCONTINENCE related to altered mobility, peripheral neuropathy, tremors and spinal stenosis. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Roxanne will have urinary incontinence managed every shift through to the next review period. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of Roxanne for toileting needs, changes to health status and alteration of continence level. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • URINARY Continence level is Frequent to total Incontinence. Report change to level as noted. Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • SCHEDULED TOILETING: Roxanne is requesting to be changed at these times additional times.		PCA	
Allergies	Keflex		D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic peripherea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			Everyday. Time 02:00 Everyday. Time 04:00 Everyday. Time 07:00 Everyday. Time 10:00 Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Roxanne wears GREY color brief per prevail sheet. Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator)				PCA	
• Potential for CONSTIPATION related to history of constipation, medication with binding effect, impaired mobility. Revision on: 06/09/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To minimize the potential for episodes and complications of constipation through to the next review date. Revision on: 03/04/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 12/18/2025	• need to help the resident to use the bathroom immediately when she requests it.if she is not allowed to go at the proper time,she may not able to have a proper bowel movement • COMMUNICATION: Involve/collaborate with Roxanne for decision making regarding constipation management. Revision on: 03/03/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order				Registered Staff Registered Staff Registered Staff	
Allergies	Keflex		D.O.B.	08/29/1958		Physician	Wallace Liang	
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic peripherea...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Lafontaine, Roxanne (922131005470)		Admission Date	06/09/2022		Location	8 808 A	
Last Care Plan Review Completed:		09/18/2025						

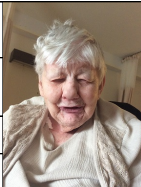
Care Plan Report

Diagnosis

Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic peripheral autonomic neuropathy(G90.0), Spinal stenosis, unspecified site(M48.09), Constipation(K59.0), Other seasonal allergic rhinitis(J30.2), Anxiety disorder, unspecified(F41.9), Personal history of other psychoactive substance abuse(Z86.48), Depressive episode, unspecified(F32.9), Bipolar affective disorder, unspecified(F31.9), Pain, unspecified(R52.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Chronic obstructive pulmonary disease, unspecified(J44.9), Post-traumatic stress disorder(F43.1), Paranoid personality disorder(F60.0)

Allergies	Keflex	D.O.B.	08/29/1958	Physician	Wallace Liang
Diagnosis	Other and unspecified injury of muscle(s) and tendon(s) of the rotator cuff of shoulder(S46.08), Arthritis, unspecified, unspecified site(M13.99), Tremor, unspecified(R25.1), Idiopathic periphera...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lafontaine, Roxanne (922131005470)	Admission Date	06/09/2022	Location	8 808 A
Last Care Plan Review Completed:		09/18/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE Score: 6/6 Revision on: 10/26/2025 Revision by: Laura Morris (Restorative Care Aide)</p>		<p>• Rita will be supported to maintain participation in activities 10-15 times per month by the next review date. Revision on: 10/26/2025 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/18/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest. Friendly/1: 1 visits, patio visits, comedy corner, discussion group, pet visits, games (bingo), Montessori, music, reading, Resident Council & Food Committee, reminiscing groups, sensory programs, socials (happy hour), special events and spiritual. She also loves listening to Gene Autry or Stevie Wonder on Youtube. Revision on: 05/07/2025 Revision by: Megan Pipe (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as listening to music on her radio in her room, and socializing with residents & team members. Revision on: 10/27/2022 Revision by: Nick Carroll</p> <p>• ASSISTANCE: Provide assistance/encouragement to get Rita to scheduled activities. Accompany in the elevator, porter and reminders. Revision on: 10/27/2022 Revision by: Nick Carroll</p> <p>• ONE to ONE: Provide Rita with individual visits for; conversation (loves animals, talks about her family) and music (Gene Autry or Stevie Wonder) Revision on: 10/27/2022 Revision by: Nick Carroll</p> <p>• SENSORY STIMULATION: Provide Rita with Sensory Stimulation for; Hand Massage, Snoezelen Activity, Reading Aloud and Sensory Sounds. Revision on: 10/27/2022 Revision by: Nick Carroll</p>				
<p>• Alteration in skin integrity with risk for infection or complications related to open lesions on right Dorsum Hand. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse)</p>		<p>• To promote optimal healing of open lesions within the target date. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse) Target Date: 01/18/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with open lesions for changes to health status and alteration or complications affecting skin integrity. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse)</p> <p>• TREATMENT PLAN: Administer treatment for open lesions as per MD Order. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse)</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>				
Allergies	No Known Allergies		D.O.B.	03/22/1934	Physician	Wallace Liang	
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Lavallee, Rita Marie (922131003008)		Admission Date	04/03/2008	Location	8 821 B	
Last Care Plan Review Completed:		08/04/2025					

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 open lesions on right Dorsum Hand. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse)		Revision on: 09/03/2025 Revision by: Jane Del Rosario (RPN)			
<ul style="list-style-type: none"> • Alteration in skin integrity related to BRUISE to left outer arm. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse)	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of BRUISE by the target date. Revision on: 09/23/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Rita)/SDM in decision making for treatment of bruise as skin issue. Revision on: 09/23/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with bruise for changes to health status and alteration or complications affecting skin integrity. Revision on: 08/29/2025 Revision by: Sonpreet Gurm (Registered Nurse) <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: 09/23/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> • Potential for chronic PAIN and alteration in comfort level related to dx with osteoarthritis. Most Current LTCF Pain Score is 0. Revision on: 05/09/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> • Promote RAI Pain Score of 0 through to the next review. Revision on: 08/04/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/18/2026	<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"> • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 11/11/2022 Revision by: Jenny Liu (RAI Coord Back-up)	RN Registered Practical Nurse Registered Practical Nurse RN		
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for 	<ul style="list-style-type: none"> • To minimize risk of #9 - Open 	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for #9 - Open Lesion - Face as per MD 			
Allergies	No Known Allergies	D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
infection or complications related to #9 - Open Lesion Face Revision on: 04/21/2025 Revision by: Janina Lucero (RN)	Lesion - Face infection each day until fully healed. Revision on: 04/21/2025 Revision by: Janina Lucero (RN) Target Date: 01/18/2026 • To promote optimal healing of #9 - Open Lesion - Face within the next review date. Revision on: 04/21/2025 Revision by: Janina Lucero (RN) Target Date: 01/18/2026	Order. Revision on: 04/21/2025 Revision by: Janina Lucero (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with #9 - Open Lesion - Face for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 04/21/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 04/21/2025 Revision by: Janina Lucero (RN)			
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Hard of hearing to (both side) Revision on: 02/07/2025 Revision by: Jenny Liu (RAI Coord Back-up)	• Rita will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026 • Rita will be able to make basic needs known each day through to the review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• PRIMARY LANGUAGE: Rita primary language is English. She is able to speak/understand English. Revision on: 09/01/2021 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, adjust voice, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 09/01/2021 Revision by: Jenny Liu (RAI Coord Back-up)			
• Altered ability to complete Activities of Daily Living (ADLs) related to Cerebral Palsy, Legally Blind, OA, Epilepsy,	• Rita will have ALL ADL care tasks met each day through the next review date.	• BATHING: Rita prefers (shower) on (Tuesday and Saturdays on Evening shift). Two PCA (TOTAL) assistance for bathing. Maxi lift for transfer with two staff to assist. Nail care to be provided on shower/bath day.			
Allergies	No Known Allergies	D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025			

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
Schizophrenia and Depression Revision on: 08/05/2024 Revision by: Laura Seibel (Dietitian (RD))		Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	Revision on: 10/30/2025 Revision by: Alyssa Egan (ADOC) • BED MOBILITY: Rita requires Total Assistance from team member to turning and repositioning. Revision on: 08/08/2023 Revision by: Jenny Liu (RAI Coord Back-up) • DRESSING: Maximal Assist: Rita requires two staff members to dress her lower/upper body. She is able to lift her right hand a bit. She would like to wear a sweater in the warmer months when she is cold. Revision on: 05/09/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Extensive assistance - Rita eats on the assistive table in the main dining room. She is able to feed herself once she has been set up by staff, given a rimmed plate & sippy cup and oriented to items. Staff to assist with feeding to ensure she eats her whole meal Revision on: 02/10/2024 Revision by: Jenny Liu (RAI Coord Back-up) • LOCOMOTION: Total Assistance-wheelchair dependent, and requires one staff to porter her on/off the unit. Revision on: 11/11/2022 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL HYGIENE: Total Assistance x 2 - Staff to wash/dry her hands, face and provide peri-care. Rita may try to help clean her hands and face with staff cuing, but she can't clean it properly Revision on: 08/08/2023 Revision by: Jenny Liu (RAI Coord Back-up) • HAND HYGIENE: 1 staff to provide total assistance to use hand sanitizer wipes for hand hygiene. Revision on: 02/10/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TOILET USE: A MAXI LIFT and 2 staff assistance is required while changing in bed. Revision on: 08/17/2023 Revision by: Kenya Mosely (RPN) • TRANSFERRING: MAXI lift is to be used for all transfer such as from bed to chair,				PCA	
Allergies	No Known Allergies		D.O.B.	03/22/1934		Physician	Wallace Liang	
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Lavallee, Rita Marie (922131003008)		Admission Date	04/03/2008		Location	8 821 B	
Last Care Plan Review Completed:		08/04/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Cerebral Palsy, Legally Blind, OA, Epilepsy, Schizophrenia and Depression</div> <div>Revision on: 08/05/2024</div> <div>Revision by: Laura Seibel (Dietitian (RD))</div>		<div>chair to bed and to toilet.</div> <div>Revision on: 06/15/2023</div> <div>Revision by: Emmanuel Okoronkwo (RN)</div> <div>• TRANSFER LIFT/SLING: Green/yellow sling. Black transfer sling to be used as resident prefers to have sling left underneath her when in wheelchair due to difficulties removing post transfer.</div> <div>Revision on: 07/26/2023</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• ORAL CARE: Extensive Assistance x 1 - Complete Tooth Loss; no dentures.</div> <div>Revision on: 12/09/2015</div> <div>Revision by: Kenya Mosely (Registered Practical Nurse)</div> <div>• FOOT CARE: Personal Care Aides.</div> <div>Revision on: 12/09/2015</div> <div>Revision by: Kenya Mosely (Registered Practical Nurse)</div> <div>• HAIR CARE: Call Diane Lesak PG&T (finance) for approval.</div> <div>Revision on: 12/09/2015</div> <div>Revision by: Kenya Mosely (Registered Practical Nurse)</div>	PCA		
<div>• RISK FOR FALLS related to: Cerebral Palsy, Legally Blind, Osteoarthritis and Epilepsy.</div> <div>Revision on: 01/29/2024</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• Rita will be free from falls through the review date.</div> <div>Revision on: 02/19/2025</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>Target Date: 01/18/2026</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: 11/16/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• FOOTWEAR: Ensure resident wears appropriate footwear (non-slip footwear) for transfers.</div> <div>Revision on: 12/05/2021</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.</div> <div>Revision on: 11/11/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA	D/E/N	
<div>• Potential to experience complications and side effects impacting quality of life related</div>	<div>• To monitor effectiveness and for side effects of medication</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status</div>			
Allergies	No Known Allergies	D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthritis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 11/11/2022 Revision by: Jenny Liu (RAI Coord Back-up)	used each day through to the next review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	and alteration or complications affecting functioning or quality of life. Revision on: 11/11/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff		
• BOWEL INCONTINENCE related to: Lack of Sensation, Cerebral Palsy, Legally Blind, Osteoarthritis, Epilepsy and Depression Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up)	• Rita will receive support to (SPECIFY: use toilet, commode, bedpan) and promote optimal bowel continence each day through to the next review. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up) • BOWEL Continence level is totally incontinent. Report change to level as noted. Revision on: 05/08/2024 Revision by: Jenny Liu (RAI Coord Back-up) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Rita wears blue color brief per prevail sheet. Revision on: 02/07/2025 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff PCA PCA PCA		
• Potential for IMPAIRED SKIN INTEGRITY related to: Fragile Skin, Decreased Mobility, Incontinence. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Rita will maintain skin integrity through the review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026 • To protect and maintain skin integrity each day through to the next review. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up)	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. • EQUIPMENT: Black transfer sling to be used as resident prefers to have sling left underneath her when in wheelchair due to difficulties removing post transfer. Revision on: 07/26/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA PCA		
Allergies	No Known Allergies	D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthritis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential for IMPAIRED SKIN INTEGRITY related to: Fragile Skin, Decreased Mobility, Incontinence. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)		Target Date: 01/18/2026				
• URINARY INCONTINENCE related to: Lack of Sensation, Cerebral Palsy, Legally Blind Revision on: 09/28/2020 Revision by: Joe Albano (RAI Coordinator)		• Rita will maintain current level of bladder function (frequently incontinent) through the review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• Rita's urine is often foul smelling, cloudy, without temperature or responsive behaviours. Treatment required when symptomatic. Revision on: 04/26/2016 Revision by: POC_Go_Live • MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 11/08/2023 Revision by: Jenny Liu (RAI Coord Back-up) • URINARY Continence level is (TOTAL Incontinent). Report change to level as noted. Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up) • CHECK and CHANGE: Rita experiences TOTAL incontinence and requires checks every 2 hours and change each time noted to be soiled. Revision on: 03/17/2022 Revision by: Kelly June (ADOC) • INCONTINENCE PRODUCT: Rita wears blue color brief per prevail sheet. Revision on: 02/07/2025 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff		
• MOOD PROBLEM related to: repetitive question and verbalizations, repetitive anxious complaints and Depression. Revision on: 06/23/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		• To decrease episodic frequency of (repetitive question and verbalizations, repetitive anxious complaints) by next review date. Revision on: 02/19/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Rita for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Rita's effort to maintain control. Encourage her			
Allergies	No Known Allergies		D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)		Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	to express self, state preferences and make safe choices for care and activities. Revision on: 09/28/2020 Revision by: Joe Albano (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up)		
• ALTERED VISION related to: Legally Blind and Epilepsy Revision on: 06/23/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	• Rita will be able to function safely in her environment through next review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• Adapt environment to Rita's individual needs to ensure she is able to recognize objects (radio, CDs, call bell) because she is Legally Blind. Revision on: 12/09/2015 Revision by: Kenya Mosely (Registered Practical Nurse) • Rita's vision is severely impaired with decreased peripheral vision. Identify location, describe environment and ensure Rita turns head side to side when moving about to ensure safety. Revision on: 12/09/2015 Revision by: Kenya Mosely (Registered Practical Nurse)	PCA	
• COGNITIVE LOSS related to: Epilepsy and Cognitive Impairment Revision on: 06/23/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	• Rita will maintain current cognitive abilities through the review date. CPS score is 3/6. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Marie is feeling lost or in confused state. Revision on: 06/04/2021 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 06/04/2021 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	
• Expressed Wishes and Beliefs related to Rita Medical Treatment and End of Life Care Revision on: 12/21/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)	• To support and honor Rita expressed wishes and beliefs through to the End of Life. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• CPR: Rita wishes express NO CPR and NO TRANSFER to hospital. Revision on: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up)		
• SPIRITUAL BELIEFS: Rita is of the	• To provide Rita spiritual	• SPIRITUAL PROGRAMS: Encourage Rita to attend spiritual programs of her choice	ACT	
Allergies	No Known Allergies		D.O.B.	03/22/1934
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses		Physician	Wallace Liang
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location 8 821 B
Last Care Plan Review Completed:		08/04/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Catholic Faith. Revision on: 12/06/2019 Revision by: Judy Woods (Activation aide)		support as interested through to the next review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	including; Church Service (Parkwood, Heritage Park, Catholic Service), bible study, spiritual music. Revision on: 10/27/2022 Revision by: Nick Carroll			
• Nutrition Risk Level (diet details)		• Rita will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026 • Will weigh within realistic GWR of 50-60 kg through to next review date. Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026 • Rita will be adequately hydrated aeb drinking at least 77% of total fluid requirement: 1300 ml/day (25 ml/kg using 52 kg weight) through to next review date. Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026	• NUTRITION RISK: Rita is moderate risk level. Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD))		Dietitian (RD)	
			• DIET ORDER: Rita will receive Regular diet, Pureed texture Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA	
			• FLUID CONSISTENCY: Rita drinks REGULAR/THIN Level 0 Fluids. Revision on: 07/31/2023 Revision by: Anna Slack (Registered Dietitian)		Diet PCA	
			• FLUID TARGET: Encourage Rita to drink a minimum of 1000 ml/day. Revision on: 10/25/2025 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: 09/10/2020 Revision by: Anna Slack (Registered Dietitian)		Dietary aide PCA	
			• DINING INSTRUCTIONS: No coffee at supper/HS snack daily (for sleep). Allow a regular soup spoon to eat per her preference. Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD))		Registered Practical Nurse	
			• ADAPTIVE AIDS: Rita requires rimmed/lip plate, non-slip mat, and sippy cup for hot beverages only. Revision on: 02/06/2025 Revision by: Holly Laasanen		PCA	
		• FOOD INTOLERANCE: milk beverage. Provide Lactaid milk. Revision on: 02/04/2025 Revision by: Holly Laasanen		PCA Restorative Care Aide		
Allergies	No Known Allergies		D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)		Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details) 		• FOOD PREFERENCES: Rita likes hot cereal and chocolate Lactaid milk. Revision on: 02/04/2025 Revision by: Holly Laasanen • Encourage and assist Rita to eat standard, pureed PM/HS snack options from the snack cart Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 1 scoop of Beneprotein once daily around 14:00 - mix in pureed snack from the PM snack cart, apple sauce, or 200 ml Lactaid milk Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH FIBRE: Offer fruit rite at breakfast daily Revision on: 10/25/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA PCA Diet PCA	D/E
• SLEEP PATTERN Revision on: 01/20/2016 Revision by: Kenya Mosely (Registered Practical Nurse)	• To meet Rita's personal preferences for sleep patterns through the next review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• Rita prefers to get up at 0630-0700 and return back to bed at 2000-2030; she does not take naps during the day. Revision on: 12/09/2015 Revision by: Kenya Mosely (Registered Practical Nurse) • Preferred night attire: Johnny Shirt. Revision on: 12/09/2015 Revision by: Kenya Mosely (Registered Practical Nurse)	PCA PCA	
• Potential for seizure activity, injury related to: EPILEPSY Revision on: 12/09/2015 Revision by: Kenya Mosely (Registered Practical Nurse)	• Rita will be/remains free of seizure activity through next review date. Revision on: 02/19/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/18/2026	• Notify nurse ASAP if seizure activity occurs. Revision on: 01/13/2016 Revision by: Kenya Mosely (Registered Practical Nurse) • Administer medication as ordered and monitor for side effects, effectiveness. Assess, record & report to MD; During a seizure, document body parts involved movement patterns, length and type of seizure activity. Revision on: 03/29/2018 Revision by: Joe Albano (RAI Coordinator)	PCA Registered Staff	

Allergies	No Known Allergies	D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025			

Care Plan Report

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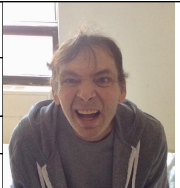
Diagnosis

Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspecified(F32.9), Schizophrenia, unspecified(F20.9), Constipation(K59.0), Post-traumatic wound infection, not elsewhere classified(T79.3)

Allergies	No Known Allergies	D.O.B.	03/22/1934	Physician	Wallace Liang
Diagnosis	Cerebral palsy, unspecified(G80.9), Blindness, binocular(H54.0), Primary generalized (osteo)arthrosis(M15.0), Epilepsy, unspecified, not stated as intractable(G40.90), Depressive episode, unspeci...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lavallee, Rita Marie (922131003008)	Admission Date	04/03/2008	Location	8 821 B
Last Care Plan Review Completed:		08/04/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• FALLS at risk/potential for falling r/t Gait disturbance, use of assistive device (walker/wheelchair as a walker), Dx of Ataxia, Schizophrenia, Psychotropic Drug Use, Seizures and Hx of falls Revision on: 10/28/2025 Revision by: Alyssa Egan (ADOC)</p>	<p>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026</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: 05/27/2024 Revision by: Gursharan Kaur (Registered Practical Nurse)</p> <p>• ENVIRONMENT: Secure environment reduce clutter to reduce fall risk for John Revision on: 04/16/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• BED: place bed at knee length to lower risk for injury and monitor for blankets being tangled around resident. Revision on: 02/15/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)</p> <p>• ACTIVITY: Engage John in meaningful activity to decrease boredom and or restlessness. Revision on: 07/19/2022 Revision by: Haley Cadarian (Quality Lead)</p> <p>• TOILETING: Offer to assist to washroom Care) to minimize unsafe self attempts to use toilet. Revision on: 05/25/2021 Revision by: Danielle Loreto (RPN)</p> <p>• Ensure non-slip footwear worn prior to (transfer, ambulation) and allow John to wake up on his own to decrease falls. Revision on: 11/23/2021 Revision by: Kenya Mosely (RPN)</p> <p>• HIP PROTECTORS: John wears hip protectors at all times to safeguard against injury. Report immediately to Registered Staff if not wearing. Revision on: 01/22/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• 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, reaching exercises, standing balance unsupported reaching, perturbations 10 reps; H/S stretches 30s, 3 reps bilateral, with PT- 3x week; participates with group exs classes-3x week Revision on: 09/02/2025 Revision by: Courtney Cipparone (PT - Physiotherapist)</p>	<p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>PCA</p>	<p>D/E/N</p> <p></p> <p></p> <p></p> <p></p> <p></p> <p></p> <p>D/E/N</p> <p></p>	
Allergies	No Known Allergies	D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Matthews, John (922131005046)	Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• FALLS at risk/potential for falling r/t Gait disturbance, use of assistive device (walker/wheelchair as a walker), Dx of Ataxia, Schizophrenia, Psychotropic Drug Use, Seizures and Hx of falls Revision on: 10/28/2025 Revision by: Alyssa Egan (ADOC)</p>		<p>• Provide Vitamin D and calcium supplement daily if ordered by MD. Revision on: 01/26/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• PURPOSEFUL ROUNDING: Conduct purposeful rounding every 2 hours to assess residents needs; for pain, positioning, peri-needs or possessions for safety. Revision on: 07/19/2025 Revision by: Kenya Mosely (RPN)</p>	PCA Registered Practical Nurse RN			
<p>• Alteration in skin integrity with risk for infection or complications related to SKIN TEAR to Right big Toe #24. Revision on: 10/26/2025 Revision by: Jane Del Rosario (RPN)</p>	<p>• To promote optimal healing of SKIN TEAR within the next review date. Revision on: 10/26/2025 Revision by: Jane Del Rosario (RPN) Target Date: 01/22/2026</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to Right big Toe #24 for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/26/2025 Revision by: Jane Del Rosario (RPN)</p> <p>• TREATMENT PLAN: Administer treatment for SKIN TEAR to Right big Toe #24 as per MD Order. Revision on: 10/26/2025 Revision by: Jane Del Rosario (RPN)</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. Revision on: 10/26/2025 Revision by: Jane Del Rosario (RPN)</p>				
<p>• At Risk for SOCIAL ISOLATION and/or</p>	<p>• Team members will support</p>	<p>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; friendly/1:</p>				
Allergies	No Known Allergies		D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Matthews, John (922131005046)		Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
alteration to PSYCHO-SOCIAL well-being related to Disinterest, Altered Mood. ISE Score: 4/6 Revision on: 10/22/2025 Revision by: Laura Morris (Restorative Care Aide)	John in decreasing social isolation by participating in activities of personal choice 5-10 times per month by the next review date. Revision on: 01/09/2025 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/22/2026	1 visits, Resident Council & Food Committee, discussion group, exercise programs, Montessori - iPad, music appreciation, patio time, reminiscing group, special events, etc. Revision on: 06/24/2025 Revision by: Megan Pipe (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as smoking on the patio, watching/listening to TV (hockey, Toronto Maple Leafs), family/friend visits, listening to music (rock, 101.9 FM), patio socializing/enjoying outdoors, family/friends phone call, etc. Revision on: 04/10/2024 Revision by: Laura Morris (Restorative Care Aide) • ASSISTANCE: Provide assistance/encouragement to get him to scheduled activities - Calendar posted in room, Reminders, etc. Revision on: 10/24/2022 Revision by: Mitchell Atkinson (Recreation Aide) • ONE to ONE: Provide John with individual visits for conversations (he enjoys talking to others about any topics, he does enjoy hockey). Revision on: 10/24/2022 Revision by: Mitchell Atkinson (Recreation Aide)	ACT			
• Potential for Acute PAIN and alteration in comfort level related to HTN, GERD, mouth pain from denture Most Current LTCF Pain score is 0 Revision on: 07/03/2025 Revision by: Jenny Liu (RAI Coordinator)	• Promote LTCF Pain Score of 0 through to the next review. Revision on: 07/03/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/22/2026	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 04/22/2022 Revision by: Jenny Liu (RAI Coord Back-up)	RN Registered Practical Nurse Registered Practical Nurse RN			
• Potential for Expressive Behaviour of refuse shower, yelling at staff to change him right away, pacing the floor, removing his clothes r/t Cognitive decline and Dx of Schizophrenia.	• John will no longer exhibit (resisting care) by review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of John for indications to change in or for escalating expressive behaviour risk. Revision on: 07/19/2022 Revision by: Haley Cadarian (Quality Lead) • TRIGGERS leading to VERBAL (yelling, etc.) as expression of behaviour include				
Allergies	No Known Allergies		D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Matthews, John (922131005046)		Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 08/18/2024 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be maintained to 0. Revision on: 08/18/2024 Revision by: Maryola Perion (RN) Target Date: 01/22/2026	(misunderstanding care intention, etc.) Revision on: 08/18/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> VERBAL Behaviour: If John is heard yelling; 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: 08/18/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 10/16/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> RESISTANCE to Care Need: If John is refusing to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/27/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. Revision on: 10/27/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> HALLUCINATION: (sees and hears a 16 year old girl. Sees the girl in his window and says that she talks to him constantly. Not to harm himself but does has him sexual things) Revision on: 03/27/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> Potential for BOWEL INCONTINENCE Revision on: 07/09/2024 Revision by: Mitchell Atkinson (Recreation Aide)		<ul style="list-style-type: none"> John will have bowel incontinence managed every shift through to the next review period. Revision on: 04/22/2024 Revision by: Katie Savo Target Date: 01/22/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of John for changes to health status, alteration of continence level or bowel function. Revision on: 04/22/2024 Revision by: Katie Savo <ul style="list-style-type: none"> BOWEL Continence level is Usually continent. Report change to level as noted. Revision on: 01/16/2025 Revision by: Jenny Liu (RAI Coord Back-up)			
Allergies	No Known Allergies		D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Matthews, John (922131005046)		Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			• BOWEL MOVEMENT: Monitor John for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 04/22/2024 Revision by: Katie Savo • INCONTINENCE PRODUCT: Resident wears a white brief. Revision on: 01/16/2025 Revision by: Jenny Liu (RAI Coord Back-up)		PCA PCA	
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications) Revision on: 01/16/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• John will continue to tolerate all his medications as prescribed. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026 • To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (Specify; anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.		Registered Staff	
• John has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 03/27/2023 Revision by: Maryola Perion (RN)		• John will be safe when choosing to smoke through to the next review Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• COMMUNICATION: Involve (John/SDM) in review of smoking legislation (No smoking inside the home or within 9 meters from any doorway) and identify the designated area/s where smoking is permitted. Revision on: 03/27/2023 Revision by: Maryola Perion (RN) • SMOKING SUPERVISION: If a staff member is available and willing to go with him and watch him. But if resident wants to smoke and there is no available staff member, then the nurse has to give him his cigarettes and lighter and when he comes back, to return his supplies, the nurse on the floor has to assess him for any new blisters or burns. Two cigarettes and a lighter can be given to John twice during the day shift. Assess his clothing/bilateral hands and no burns holes or new skin issues.		Social Worker 	

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> John has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 03/27/2023 Revision by: Maryola Perion (RN)		Revision on: 03/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> SMOKING CONTRACT: John has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Revision on: 03/27/2023 Revision by: Maryola Perion (RN)	Social Worker Administrator		
<ul style="list-style-type: none"> Potential to experience alteration in NEUROLOGICAL FUNCTION related to: Epilepsy. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with epilepsy through to the next review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> LAB WORK: Monitor lab and diagnostic results for (dilantin level) and report results to MD as needed. Follow up as indicated. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> MEDICATION: Administer medication for Epilepsy as per MD order. Monitor effectiveness and for side effects. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Epilepsy for changes to health status and alteration or complications affecting neurological function. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway. <ul style="list-style-type: none"> SEIZURE Disorder: John has potential for seizure activity, injury related to seizure disorder. Inform MD as it occurs. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up)	PCA Registered Staff All		
<ul style="list-style-type: none"> Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension 	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with HTN through to the next review date. 	<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. <ul style="list-style-type: none"> MEDICATION: Administer medication for HTN as per MD Order and monitor for 	Registered Staff Registered		
Allergies	No Known Allergies	D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Matthews, John (922131005046)	Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	side effects. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) • BP MONITORING: Monitor BLOOD PRESSURE as ordered. Notify MD of abnormalities as needed. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up)		Practical Nurse RN	
• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility and transfer). Revision on: 11/11/2022 Revision by: Suzanne Azar (RN)		• John 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: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• 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: 11/11/2022 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: 11/11/2022 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: 11/16/2022 Revision by: Jenny Liu (RAI Coord Back-up)		PCA	D/E/N
• Expressed Wishes and Beliefs related to John Medical Treatment and End of Life Care Revision on: 07/23/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• To support and honor John expressed wishes and beliefs through to the End of Life. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• CPR: John wishes express NO CPR, however TRANSFER to hospital decision will be made at the time Revision on: 10/18/2023 Revision by: Kenya Mosely (RPN)			
• Potential to experience alteration in MOOD related to Dx of Schizophrenia. Revision on: 07/23/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• John will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of John for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 04/30/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on John effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities.			
Allergies	No Known Allergies		D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Matthews, John (922131005046)		Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 01/22/2026	Revision on: 04/30/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 04/30/2021 Revision by: Jenny Liu (RAI Coord Back-up) • SUICIDAL IDEATIONS: History of cutting self. Hears voices in his head telling him to burn himself. Report any ideations or complaints of voices to the charge nurse immediately. Revision on: 03/26/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Episode of Psychosis related to hearing voices in his head (1/31/21) DELIRIUM secondary to diagnosis of Schizophrenia. Revision on: 04/26/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		• To manage symptoms of Delirium and prevent secondary complications by targeted date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• COMMUNICATION & EDUCATION: Involve/collaborate with POA/John about episodic DELIRIUM, discuss contributing factors, possible treatment, and plan of care needs/options as needed. Revision on: 02/02/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of John for indications of DELIRIUM including dehydration, poor appetite, vomiting, diarrhea, blood loss, acute flare up of chronic condition- CHF, DM, infection, etc.. Revision on: 02/02/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 03/06/2021 Revision by: Maryola Perion (RN)		• To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026 • John will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 10/23/2023	• COMMUNICATION: Involve/collaborate with John/SDM for decision making regarding constipation management. Revision on: 03/06/2021 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.		Registered Staff Registered Staff Diet Registered Staff	
Allergies	No Known Allergies		D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Matthews, John (922131005046)		Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 03/06/2021 Revision by: Maryola Perion (RN)	Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> BOWEL PROTOCOL: In place as per MD order 	Registered Staff		
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) r/t Epilepsy, Schizophrenia, HTN, GERD, Ataxia. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> John will maintain current self sufficiency in ADL abilities in all ADLs through the review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> BATHING: Johns bath days will be Tuesday and Friday afternoon shift. One staff provide EXTENSIVE assistance by washing his back, lower extremities Nail care to be provided on shower/bath day. Please note at times John may require less/more assistance, encourage John to do as much as he is safely capable of doing to prevent decline. Provide increased support where/when needed Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> BED MOBILITY: set up help needed, may requires more assistance at times. John remains capable of turning and repositioning independently when in bed. Bedrails in place aim bed mobility. Revision on: 10/16/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA		
		<ul style="list-style-type: none"> DRESSING: Limited to extensive assistance from one staff. John requires one team member to assist with guiding Johns limbs through his clothing while he assists by lifting his limbs. 	PCA		
		Please note at times John may require less/more assistance, encourage John to do as much as he is safely capable of doing to prevent decline. Provide increased support where/when needed Revision on: 07/19/2022 Revision by: Haley Cadarian (Quality Lead)			
		<ul style="list-style-type: none"> EATING: set up help only and John eats in the main dining room, cut food to small 	PCA		
Allergies	No Known Allergies	D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Matthews, John (922131005046)	Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Altered ability to complete Activities of Daily Living (ADLs) r/t Epilepsy, Schizophrenia, HTN, GERD, Ataxia. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)			pieces and remind him to eat slowly- 1st floor. Revision on: 11/09/2022 Revision by: Jenny Liu (RAI Coord Back-up)				
			• LOCOMOTION: Independent with walker/W/C, sometimes he will push his wheelchair around. May requires cueing or reminder due to John walks with eyes close and walks too fast. Revision on: 10/18/2023 Revision by: Jenny Liu (RAI Coord Back-up)				
			• PERSONAL HYGIENE: Extensive assistance from one staff. John requires the team to assist with shaving and assisting with peri care due to occasional urinary incontinence. John will wash his face and hands once set up help done. Encourage John to do as much as he is able to, support where needed with personal hygiene when John cannot/will not participate Revision on: 04/19/2025 Revision by: Jenny Liu (RAI Coordinator)				
			• HAND HYGIENE: 1 staff to provide Reminder assistance to use hand sanitizer/hand sanitizer wipes for hand hygiene. Revision on: 08/19/2021 Revision by: Chelsea Campbell-Wright (IPAC LEAD)				
			• TOILET USE: Extensive assistance from one staff. to guide John onto and off of the toilet and assist with reapplying a incontinent product and adjusting clothing. Please note at times John may require less/more assistance with toileting, Provide increased support where/when needed Revision on: 10/16/2024 Revision by: Jenny Liu (RAI Coord Back-up)				
			• TRANSFERRING: Independent. with the use of his walker, may requires setup help. Please note at times John may require less/more assistance, encourage John to do as much as he is safely capable of doing to prevent decline. Provide increased support where/when needed Revision on: 01/16/2025 Revision by: Jenny Liu (RAI Coord Back-up)				
			• ORAL CARE: John has upper and lower dentures and he is able to take it out and put it on. Revision on: 10/17/2023				
Allergies	No Known Allergies			D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Matthews, John (922131005046)			Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) r/t Epilepsy, Schizophrenia, HTN, GERD, Ataxia. Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)			Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> SHAVING - John prefers face shaved on his bath days. Revision on: 08/26/2024 Revision by: Kenya Mosely (RPN)			PCA	D
<ul style="list-style-type: none"> SPIRITUAL BELIEFS: John is of the Anglican Faith. Revision on: 05/19/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		<ul style="list-style-type: none"> To provide John spiritual support as interested through to the next review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	<ul style="list-style-type: none"> PERSONAL CHOICE: Respect John's right to decline participation in Spiritual Programs. Attempt to actively engage him if he decides to attend spiritual programs. Revision on: 05/19/2020 Revision by: Shayna Lee Wonsch (Activation Manager)			ACT	
<ul style="list-style-type: none"> Cognitive Loss r/t short and long term memory problem, decision making moderately impaired. Revision on: 05/19/2020 Revision by: Shayna Lee Wonsch (Activation Manager)		<ul style="list-style-type: none"> John will maintain current cognitive abilities through the review date. Current CPS is 3/6. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026 <ul style="list-style-type: none"> John will be able to 	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when John is feeling lost or in confused state. Revision on: 10/27/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> PERSONAL ROUTINE: Provide consistency in care routine and activities Revision on: 10/27/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> PERSONAL ITEMS: Keep personal items in a consistent place. Revision on: 07/21/2023			PCA PCA	
Allergies	No Known Allergies			D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Matthews, John (922131005046)			Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	communicate basic needs through the review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	Revision by: Jenny Liu (RAI Coord Back-up)		
• Urinary Incontinence. Revision on: 12/21/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)	• John will receive the appropriate support to manage incontinence through the review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026 • John will have urinary incontinence managed every shift through to the next review period. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Monitoring for resident to voiding,report to nurse if residents does not have voided. Revision on: 06/12/2025 Revision by: Gurjit Kaur (RN) • URINARY Continence level is FREQUENTLY Incontinent. Report change to level as noted. level is Occasionally Incontinent. Revision on: 04/27/2023 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Resident wears a white brief. Revision on: 01/16/2025 Revision by: Jenny Liu (RAI Coord Back-up)	PCA <	

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Qiufeng Liu (Registered Practical Nurse)		next review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 01/28/2023 Revision by: Jenny Liu (RAI Coord Back-up)			
• Strength Revision on: 12/04/2018 Revision by: Milap Patel (Physiotherapist)		• To improve the strength of B/L UE≤ from 4/5 to 5/5 IN 3 MONTHS. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• Strength exe. with use of 1-3lbs.wt for B/L UE and IE.,1set,10reps.2-3/wk as tolerated. Sit to stand exs with the walker, cue to push up with hands, feet shoulder width apart, 3-5 reps, 2-3 x a week Revision on: 04/15/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)		PT - Physiotherapist PTA	
• Balance. Revision on: 12/04/2018 Revision by: Milap Patel (Physiotherapist)		• To improve the dynamic standing balance based on Tinetti from 16 to 18 in 3 months.. Revision on: 07/03/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/22/2026	• Dynamic balance exe. at rail +1A,1set,10rps.,2-3/week as tolerated. Revision on: 07/03/2025 Revision by: Shina Wadhwa (Physical Therapist)		PT - Physiotherapist PTA	
• Sleep Patterns. Revision on: 11/27/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)		• To meet John personal preferences for sleep patterns through the next review date. Revision on: 02/14/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026	• Usual bed time no specific time and usual wake time around 06:30 to 7:00. Revision on: 12/22/2018 Revision by: Qiufeng Liu (Registered Practical Nurse) • Preferred night attire regular clothes Revision on: 12/21/2018 Revision by: Qiufeng Liu (Registered Practical Nurse)		PCA PCA	
• Nutrition Risk Level (diet details)		• John will be adequately nourished aeb consuming >75% at meals and snacks through to next review date.	• NUTRITION RISK: John is moderate risk level. Revision on: 04/24/2023 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: John will receive regular diet, regular texture		Dietitian (RD) Dietary Manager Diet	
Allergies	No Known Allergies		D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Matthews, John (922131005046)		Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<p>Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026</p> <p>• Will weigh within GWR of 70-75kg through to next review date. Revision on: 10/23/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/22/2026</p> <p>• John will be adequately hydrated aeb drinking at least 1604ml per day based on 75% of total fluid requirement of 2139 ml @ 25ml/kg, 71.3kg through to next review date. Revision on: 01/09/2025 Revision by: Rachelle Ly (Dietitian (RD)) Target Date: 01/22/2026</p> <p>• Will meet estimated nutritional requirements of 1783-2139 kcal @ 25-30 kcal/kg, 71-86g protein @ 1.0-1.2g/kg through to next review date. Revision on: 01/09/2025 Revision by: Rachelle Ly (Dietitian (RD)) Target Date: 01/22/2026</p>	<p>Revision on: 11/08/2022 Revision by: Anna Slack (Registered Dietitian)</p> <p>• FLUID CONSISTENCY: John drinks REGULAR/THIN Level 0 Fluids. Revision on: 11/08/2022 Revision by: Anna Slack (Registered Dietitian)</p> <p>• FLUID TARGET: Encourage John to drink a minimum 1604mL/D Revision on: 01/09/2025 Revision by: Rachelle Ly (Dietitian (RD))</p> <p>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. Revision on: 03/04/2021 Revision by: Anna Slack (Registered Dietitian)</p> <p>• DINING INSTRUCTIONS: Lactaid milk only Remind/cue John to eat slowly and to swallow each biteful of food before putting more into his mouth. cut sandwich/hamburgers into quarter cut other food especially meat into small pieces Revision on: 11/08/2022 Revision by: Anna Slack (Registered Dietitian)</p> <p>• FOOD ALLERGY/INTOLERANCE: John has intolerance to lactose in milk, yogurt and ice cream. Reactions to this include GI upset. Revision on: 04/23/2021 Revision by: Anna Slack (Registered Dietitian)</p> <p>• HIGH FIBRE: 200mL prune juice at breakfast daily, nurse to provide fruit rite spread with medications. Encourage high fibre choices such as whole wheat bread, fruits and vegetables, beans,lentils at all meals Revision on: 12/21/2023 Revision by: Anna Slack (Registered Dietitian)</p>	<p>Food Services Aide PCA Diet PCA PCA Dietary aide PCA Diet Food Services Aide Registered Practical Nurse Diet PCA Restorative Care Aide PCA</p>	D/E

Allergies	No Known Allergies	D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Matthews, John (922131005046)	Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report


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Diagnosis

Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, unspecified(R27.0), Constipation(K59.0), Fracture of metatarsal bone, closed(S92.300), Seizure disorder, so described (R56.80), Chronic obstructive pulmonary disease, unspecified(J44.9), Acute upper respiratory infection, unspecified(J06.9), Polycystic kidney, unspecified (Q61.3)

Allergies	No Known Allergies	D.O.B.	03/01/1961	Physician	Wallace Liang
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Schizophrenia, unspecified(F20.9), Benign hypertension(I10.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Ataxia, uns...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Matthews, John (922131005046)	Admission Date	11/08/2018	Location	8 814 A
Last Care Plan Review Completed:		10/22/2025			

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
<div>• Alteration in skin integrity related to MASD RIGHT GLUTEAL FOLD Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN)</div>		<div>• To promote intact skin integrity through healing of MASD RIGHT GLUTEAL FOLD Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN) Target Date: 01/26/2026</div>	<div>• COMMUNICATION: Involve/collaborate with Linda Bedard (SDM/Daughter) in decision making for treatment of skin issues. Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN)</div> <div>• TOPICAL TX: Apply protectant paste to RIGHT GLUTEAL FOLD as MD Order. Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN)</div> <div>• 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: 10/29/2025 Revision by: Kenya Mosely (RPN)</div>				Registered Practical Nurse Registered Practical Nurse	
<div>• URINARY CONTINENCE related to: Catherization, impaired mobility, history of stroke/TIA 2005. Revision on: 10/07/2025 Revision by: Kenya Mosely (RPN)</div>		<div>• Kurt will have urinary continence managed every shift through to the next review period. Revision on: 10/07/2025 Revision by: Kenya Mosely (RPN) Target Date: 01/26/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of Kurt for toileting needs, changes to health status and alteration of continence level. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)</div> <div>• CHECK and CHANGE: Kurt experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• INCONTINENCE PRODUCT: Kurt wears a blue color brief per prevail sheet. Revision on: 02/24/2025 Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• CATHETER INSERTION/CHANGE: Kurt has #16Fr Catheter. Change catheter monthly and PRN as per MD Order and document procedure. Revision on: 10/07/2025 Revision by: Kenya Mosely (RPN)</div> <div>• CATHETER CARE: Provide routine care; wash with soap and water every shift.</div> <div>• CATHETER OUTPUT: Empty catheter bag and document output in mL every shift and as needed.</div>				PCA PCA RN PCA	D/E/N
Allergies	No Known Allergies		D.O.B.	03/15/1929	Physician	Wallace Liang		
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre				Print Date	10/30/2025		
Resident	Moltrassie, Kurt (922131005579)		Admission Date	08/19/2024	Location	8 805 A		
Last Care Plan Review Completed:		08/19/2025						

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • URINARY CONTINENCE related to: Catherization, impaired mobility, history of stroke/TIA 2005. Revision on: 10/07/2025 Revision by: Kenya Mosely (RPN)		<ul style="list-style-type: none"> • CATHETER MONITORING: Check catheter patency, tubing placement, monitor effect of catheter each shift and as needed. Report complaints of pain or discomfort. • CATHETER IRRIGATION: Irrigate with 200cc NS daily as per MD Order. • CATHETER BAG: Change BAG weekly on Tuesday and PRN Revision on: 10/07/2025 Revision by: Kenya Mosely (RPN)	PCA Registered Staff RN PCA		
<ul style="list-style-type: none"> • Moltrassie, kurt is experiencing episode of possible urinary tract infection. Revision on: 09/29/2025 Revision by: Sonpreet Gurm (Registered Nurse)	<ul style="list-style-type: none"> • To effectively treat and manage URINARY INFECTION without further complications by October Revision on: 09/30/2025 Revision by: Emma Rigakos (RPN) Target Date: 01/26/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with family with decision making for URINARY INFECTION treatment plan and update accordingly. • MEDICATIONS: Administer medication for (infection, pain, fever etc) as per MD/NP order. • MONITORING: Utilize holistic perspective of monitoring resident with Urinary tract infection such has confusion, painful urination, hematuria etc. Report if noted. Revision on: 10/01/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to ABRASION to #26 RIGHT HAND 1st DIGIT (Thumb). Revision on: 09/25/2025 Revision by: Kenya Mosely (RPN)	<ul style="list-style-type: none"> • To promote optimal healing of ABRASION to #26 RIGHT HAND 1st DIGIT (Thumb) Revision on: 09/25/2025 Revision by: Kenya Mosely (RPN) Target Date: 01/26/2026	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for ABRASION to #26 RIGHT HAND 1st DIGIT (Thumb) as per MD Order. • 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: 09/25/2025 Revision by: Kenya Mosely (RPN)			
Allergies	No Known Allergies	D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)	Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		Revision on: 09/25/2025 Revision by: Kenya Mosely (RPN)				
<ul style="list-style-type: none"> • Use of PASD TILT RECLINER and WHEELCHAIR to assist Kurt with Activity of Daily Living (Positioning). Revision on: 09/15/2025 Revision by: Kenya Mosely (RPN) 	<ul style="list-style-type: none"> • Kurt will be effectively supported with use of his tilt recliner to optimize Activity of Daily Living (positioning, prevention of skin breakdown/discomfort) each day through to the next review date Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026 	<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). • TILT RECLINER in USE as a PASD to support Kurt with ADL- positioning, prevention of skin breakdown & discomfort. Monitor every shift. Revision on: 10/28/2024 Revision by: Kenya Mosely (RPN) 	Registered Staff PCA	 D/E/N		
<ul style="list-style-type: none"> • Altered COMMUNICATION as exhibited by limitations to self expression, comprehension related to Hard of hearing, alternate Primary Language (German). 9/12/25: Only have the left hearing aid. Son brought with him the Rt. hearing aid to be checked by a hearing aid specialist. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) 	<ul style="list-style-type: none"> • Kurt will be supported to make basic needs known each day through to the review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Kurt/SDM for decision making about strategies needed to support effective communication. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • PRIMARY LANGUAGE: Kurts primary language is German. Secondary is English. He is able to communicate in both German and english. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • COMMUNICATION DEVICE: Adjust tone and quality of voice when communicating with Kurt. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored: in the Medication Room. Revision on: 05/19/2025 Revision by: Kenya Mosely (RPN) 	PCA			
<ul style="list-style-type: none"> • At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to adjusting to life in new environment. 	<ul style="list-style-type: none"> • To support Kurt's Psycho-Social well being through to the next review. Kurt will be encouraged to 	<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite Kurt to programs of personal interest; Happy hour, music programs, movies, men's club, special events. Revision on: 09/25/2024 Revision by: Laura Morris (Restorative Care Aide) • SELF-DIRECTED ACTIVITIES: Encourage Kurt to engage in self-directed activities 				
Allergies	No Known Allergies	D.O.B.	03/15/1929	Physician	Wallace Liang	
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Moltrassie, Kurt (922131005579)		Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
ISE score: 4/6 Revision on: 08/07/2025 Revision by: Megan Pipe (Recreation Aide)		participate in 15-20x group and/or 1:1 programs per month through to the next review date. Revision on: 08/07/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 01/26/2026	such as (watching TV, reading and visiting with other residents). Revision on: 09/25/2024 Revision by: Laura Morris (Restorative Care Aide)			
• Potential for (Persistent) PAIN and alteration in comfort level related to daily knee pain, Hypertension, Mobility impairment. Most Current Pain Score is 0 Revision on: 05/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• Promote MDS Pain Score of 0 through to the next review. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• 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. Crushed medications with apple sauce. Revision on: 08/19/2024 Revision by: Elsie Calumpang (RN)		RN Registered Practical Nurse Registered Practical Nurse RN	
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to use of diuretic. Revision on: 09/02/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. • PROMOTE FLUIDS: Promote Kurt to consume fluids; amount as per Nutrition Care Plan. Revision on: 09/02/2024 Revision by: Jenny Liu (RAI Coord Back-up)		Registered Staff	
• Nutrition Risk Level		• Kurt will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• Labelled Item Breakfast: apple sauce daily (99 ml fluid) Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Dinner: apple sauce daily (99 ml fluid) Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA Registered Practical Nurse RN PCA Registered Practical	D E
Allergies	No Known Allergies		D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)		Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		<p>• Will weigh within realistic GWR of 80-85 kg through to next review date. Revision on: 02/15/2025 Revision by: Holly Laasanen Target Date: 01/26/2026</p> <p>• Kurt will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1908 ml/day (25 ml/kg using 76.3 kg weight) through to next review date. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/26/2026</p>	<p>• Labelled Item Lunch: apple sauce daily (99 ml fluid) Revision on: 09/12/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>			Nurse RN PCA Registered Practical Nurse RN Dietitian (RD)	D
			<p>• NUTRITION RISK: Kurt is HIGH risk level. Revision on: 10/30/2025 Revision by: Debora Choi (Dietitian (RD))</p>				
			<p>• DIET ORDER: Kurt will receive regular diet, minced texture, no whole slices of bread/toast (use teaspoons only when feeding) Revision on: 10/30/2024 Revision by: Lexi Dakin (Dietitian (RD))</p>			PCA	
			<p>• THICKENED FLUIDS: Kurt drinks thickened fluids at mildly thick level 2 (nectar-like) consistency. Revision on: 05/29/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>			PCA	
			<p>• FLUID TARGET: Encourage Kurt to drink a minimum of 1526 ml/day Revision on: 08/19/2025 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>			Dietary aide PCA	
			<p>• ADAPTIVE AIDS: Kurt requires plate guard and built-up utensils at meals and snacks + 2 handled mug/spouted lid Revision on: 10/30/2024 Revision by: Lexi Dakin (Dietitian (RD))</p>			PCA	
			<p>• FOOD PREFERENCES: He prefers hot rather than cold food/fluids. Revision on: 05/29/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>			PCA	
			<p>• FLUID IN MEALS: Serve 2 bowls of soup at lunch if Kurt will accept. Revision on: 10/30/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>			PCA	BLD
			<p>• MEDPASS SUPPLEMENTS: 60 ml of Resource 2.0 TID</p>			Diet	
Allergies	No Known Allergies			D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)			Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level		Revision on: 10/30/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Serve 250 ml coffee/tea (thickened to level 2) in a sippy cup at AM snack daily. Revision on: 05/29/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	D/E
• ROM Exs Revision on: 08/19/2024 Revision by: Shina Wadhwa (Physical Therapist)	• Increased Lt shoulder AA flexion from 90 to 100 in next 3 months Revision on: 02/20/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/26/2026	• AA-PROM exs for B/L UE and LE, within pain limits. 10 reps or as best tolerated. 2 sets, 2-3 x a week; Provide Stretching exs for B/L Hams & Calf 1set,5rps.,hold 30 sec, 2-3/week as tolerated. Revision on: 02/20/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension, History of Stroke/TIA 2005. Revision on: 08/19/2024 Revision by: Shina Wadhwa (Physical Therapist)	• To treat and minimize signs/symptoms or complications associated with Hypertension through to the next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Kurt with Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • MEDICATION: Administer medication for HYPertension as per MD Order and monitor for side effects. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)	Registered Practical Nurse RN	

Allergies	No Known Allergies	D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)	Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Increased risk for FALLS related to impaired mobility. Revision on: 08/19/2024 Revision by: Shina Wadhwa (Physical Therapist)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• CALL BELL: Place call bell within Kurt's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)			PCA	D/E/N
• Potential for CONSTIPATION related to decreased mobility. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• Kurt will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation. • BOWEL PROTOCOL: In place as per MD order			Registered Staff Registered Staff	
• Risk for Impaired SKIN INTEGRITY related to impaired mobility, incontinence, left ankle edema. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• 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 at least every 2 hours when in bed/wheelchair to offload pressure. Revision on: 05/29/2025 Revision by: Chelsea Campbell-Wright (ADOC)			PCA PCA	 Q2h
• Potential to experience alteration in MOOD as exhibited by low mood secondary to wife's passing, grieving. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• Kurt will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Kurt for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	03/15/1929		Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)		Admission Date	08/19/2024		Location	8 805 A
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential to experience alteration in MOOD as exhibited by low mood secondary to wife's passing, grieving. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)						
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• To promote adequate rest/sleep for Kurt based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• REST PATTERN: Preferred bedtime 7:00pm, usual wake time 8:00am. May nap during the day. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		PCA	
• Potential to experience alteration in RESPIRATORY FUNCTION related to shortness of breath upon exertion. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• To treat and minimize signs/symptoms or complications associated with shortness of breath each day through to next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Kurt with shortness of breath for changes to health status and alteration or complications affecting respiratory function. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • POSITIONING: To manage shortness of breath (SOB) elevate head of the bed to improve breathing.		Registered Staff PCA	
• Potential for BOWEL INCONTINENCE related to occasional bowel incontinence, Impaired mobility, history of stroke/TIA 2005. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• Kurt will have bowel incontinence managed every shift through to the next review period. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of Kurt for changes to health status, alteration of continence level or bowel function. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • CHECK and CHANGE: Kurt experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
Allergies	No Known Allergies		D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)		Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		<ul style="list-style-type: none"> • BOWEL MOVEMENT: Monitor Kurt for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • INCONTINENCE PRODUCT: Kurt wears a blue color brief per prevail sheet. Revision on: 02/24/2025 Revision by: Jenny Liu (RAI Coord Back-up) 	PCA			
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of VERBAL, PHYSICAL, history of hallucinations (seeing soldiers in room), Resisting care nature related to History of CVA (2005) Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) 	<ul style="list-style-type: none"> • Kurt will be supported to adjust to his new environment to lower risk of triggering former PHYSICAL inappropriate, VERBALLY inappropriate, resistive to care behaviour episodes through to the next review. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Kurt/SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Kurt for indications to change in or for escalating expressive behaviour risk. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • TRIGGERS leading to PHYSICAL Hitting, Punching, slapping as expression of behaviour include frustration, fearfulness, confusion, invasion of personal space, waking him up abruptly. Revision on: 08/19/2024 Revision by: Elsie Calumpang (RN) • PHYSICAL Behaviour: If Kurt 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: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • TRIGGERS leading to VERBAL yelling, screaming, calling names, etc. as expression of behaviour include loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • VERBAL Behaviour: If Kurt 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: 08/19/2024 	BSO - Internal Social Worker			
Allergies	No Known Allergies		D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Moltrassie, Kurt (922131005579)	Admission Date	08/19/2024	Location	8 805 A	
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of VERBAL, PHYSICAL, history of hallucinations (seeing soldiers in room), Resisting care nature related to History of CVA (2005)</p> <p>Revision on: 08/19/2024</p> <p>Revision by: Katie Savo (RAI Coordinator)</p>		<p>Revision by: Katie Savo (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc. as expression of behaviour include confusion, misunderstanding care needs, poor judgement.</p> <p>Revision on: 08/19/2024</p> <p>Revision by: Katie Savo (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Kurt 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: 08/19/2024</p> <p>Revision by: Katie Savo (RAI Coordinator)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction)</p> <p>Physical: hitting, punching during care especially if care is unwanted or if he is just waking up.</p> <p>Triggers: Confusion when waking up, fearfulness, embarrassment, waking him up abruptly, pain, can have hallucinations of soldiers in his room especially after waking up. Daughter reports resident's cognition is worse upon waking or when he gets fatigued in the evening.</p> <p>Recommendations: Give Kurt time to wake up prior to care. Resident needs hearing aids/glasses prior to care. Introduce yourself, get consent, ensure there are 2 staff when providing care. One person to distract by explaining each task before care, offering reassurance. Obtain consent. If he becomes physical use stop and go approach. Reapproach when calm. Give pain medication 30 minutes prior to care.</p> <p>Verbal: yelling at staff upon waking or during care</p> <p>Resists care: Refusing care</p> <p>Triggers: Confusion, hallucinations</p> <p>Recommendations: Allow him to sleep until he is ready to get up. Ex. After breakfast. Provide reassurance and comfort. BSO recommends not playing violent war/news movies on TV as it may trigger resident. Monitor for pain, watch for facial grimacing and report to nurse. Kurt appears to keep his mouth open when sleeping. Swab mouth with a wet swab before cleaning. Apply dentures while he is still in bed.</p> <p>The resident enjoys listening to music and visits with his family. The resident also likes to attend some main floor programs such as Bingo, Happy hour and church.</p> <p>Revision on: 10/13/2025</p>			
Allergies	No Known Allergies	D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)	Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of VERBAL, PHYSICAL, history of hallucinations (seeing soldiers in room), Resisting care nature related to History of CVA (2005) Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)			Revision by: Leslie Meloche (Recreation Aide)			
<ul style="list-style-type: none"> • Altered VISION related to Glaucoma Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		<ul style="list-style-type: none"> • To treat and minimize complications of (Glaucoma) through to next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Kurt/SDM for decision making pertaining to change in visual status as needed. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) <ul style="list-style-type: none"> • EYEGLASSES: Kurt wears eyeglasses. Assist to clean eyeglasses as needed but PCA needs his eyeglasses on, even when he sleeps. Revision on: 08/19/2024 Revision by: Elsie Calumpang (RN)			
<ul style="list-style-type: none"> • COGNITIVE LOSS; alteration in thought processes memory loss related to orientated to person not time or place, history of CVA/TIA (2005). Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		<ul style="list-style-type: none"> • Kurt will be supported to maintain cognitive function through the review date. Current CPS is 3 Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Kurt/SDM in decision making of Cognitive Loss. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) <ul style="list-style-type: none"> • ORIENTATION: Gently reorient to person, place, time as needed when Kurt is feeling lost or in confused state. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> • CUE TASKS: Break tasks into manageable subtasks, (Resident's Name) can 			
Allergies	No Known Allergies		D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)		Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			comprehend and follow. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Atrial Fibrillation, Hypertension, Hyperlipidemia, history of stroke/TIA 2005, Visual impairment, Glaucoma, Non essential tremor, Syncope (if rushed), Mobility impairment. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)		• Kurt will have ALL ADL care needs met each day through the next review date. Revision on: 11/18/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	• BATHING: Kurts bath days are Monday and Wednesday on day shift. He prefers to have a bath. One team member provide Total assistance by washing him from head to toe. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Total Assist: Kurt requires two team members to turn and reposition in bed for him without his help Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • DRESSING: Total Assist: Kurt requires one or two team members to dress from head to toe. Revision on: 05/23/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Kurt requires one team member guided assist to eat. Cut up food. He eats on the floor dining room. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • LOCOMOTION: Kurt uses a wheelchair as his primary mode of locomotion and is dependent of the team to push him on and off the home area. Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator) • PERSONAL HYGIENE: Kurt requires two team member Total assist to complete pericare. One team member assist to wash face, brush teeth and hair. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: 1 staff to provide Total assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOILET USE: Kurt requires two team member assist with the use of a maxi lift to transfer back to bed for check and change and assist with changing incontinence product.			PCA	
Allergies	No Known Allergies			D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)			Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved					
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Atrial Fibrillation, Hypertension, Hyperlipidemia, history of stroke/TIA 2005, Visual impairment, Glaucoma, Non essential tremor, Syncope (if rushed), Mobility impairment.</div> <div>Revision on: 08/19/2024</div> <div>Revision by: Katie Savo (RAI Coordinator)</div>			Revision on: 08/19/2025										
			Revision by: Danielle Loreto (RAI Coordinator)										
			• TRANSFERRING: Kurt requires two team member assist with the use of a maxi lift to transfer from bed to wheelchair.										
			Revision on: 08/19/2024										
			Revision by: Katie Savo (RAI Coordinator)										
			• TRANSFER LIFT/SLING: Uses maxi lift and blue sling needed for transfer. Uses a comfort sling for safety and ease for resident.										
			Revision on: 08/19/2024										
			Revision by: Elsie Calumpang (RN)										
			• ORAL CARE: Kurt has his own upper and lower teeth with upper partial plate.										
			PCA										
			Ensure polident is used to adhere denture. 1 staff to provide oral care.										
			Revision on: 09/11/2024										
			Revision by: Chelsea Campbell-Wright (ADOC)										
			• SHAVING - Kurt prefers to be shaved on his bath days.										
			PCA										
			Revision on: 08/19/2024										
			Revision by: Katie Savo (RAI Coordinator)										
			• SPECIAL FAMILY REQUEST: Kurt is to be placed in the recliner in his room after lunch daily. Evening shift Kurt is to be put back into his wheelchair until after dinner.										
			PCA										
			Make sure resident has glasses, hearing aids, dentures, shoes on. Also make sure he dressed appropriately, not in johnny shirts specially on his showers day.										
			Put wheelchair cushion on recliner while resident sitting on recliner as per family request										
			**Place in bed after lunch on Wednesday, Friday and Sunday for prevention and to promote optimal wound healing and may use tilt function on recliner.										
			Revision on: 08/19/2025										
			Revision by: Gurjit Kaur (RN)										
			<div>• Expressed Wishes and Beliefs related to Kurt's Medical Treatment and End of Life Care</div> <div>Revision on: 08/19/2024</div> <div>Revision by: Katie Savo (RAI Coordinator)</div>		<div>• To support and honor Kurt's expressed wishes and beliefs through to the End of Life.</div> <div>Revision on: 11/18/2024</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>Target Date: 01/26/2026</div>	• CPR: Kurt wishes express NO CPR and NO TRANSFER to hospital.							
Revision on: 08/19/2024													
Revision by: Katie Savo (RAI Coordinator)													
Allergies		No Known Allergies			D.O.B.		03/15/1929		Physician		Wallace Liang		
Diagnosis		Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses											
Facility		Berkshire Care Centre								Print Date		10/30/2025	
Resident		Moltrassie, Kurt (922131005579)				Admission Date		08/19/2024		Location		8 805 A	
Last Care Plan Review Completed:		08/19/2025											

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Kurt's Medical Treatment and End of Life Care Revision on: 08/19/2024 Revision by: Katie Savo (RAI Coordinator)				

Diagnosis

Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction (I64), Transient cerebral ischaemic attack, unspecified(G45.9), Glaucoma, unspecified(H40.9), Tremor, unspecified(R25.1), Other and unspecified abnormalities of breathing(R06.8), Conjunctivitis, unspecified(H10.9)

Allergies	No Known Allergies	D.O.B.	03/15/1929	Physician	Wallace Liang
Diagnosis	Atrial fibrillation, unspecified(I48.90), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Stroke, not specified as haemorrhage or infarction(I64), Transient cerebral ischaemic at...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Moltrassie, Kurt (922131005579)	Admission Date	08/19/2024	Location	8 805 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• Potential for acute PAIN and alteration in comfort level related to Wernicke's, headache. Most Current RAI Pain Score is 2.</p> <p>Revision on: 10/27/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review.</p> <p>Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026</p> <p>• Promote RAI Pain Score of 0 through to the next review.</p> <p>Revision on: 07/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/27/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Darcy)/SDM) about pain management, goals of treatment, plan of care and treatment options.</p> <p>Revision on: 08/17/2024 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</p> <p>Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>RN Registered Practical Nurse</p> <p>Registered Practical Nurse RN</p>			
<p>• Strong Participation in Activities.</p> <p>ISE Score: 4/6 Revision on: 07/15/2025 Revision by: Megan Pipe (Recreation Aide)</p>	<p>• To support Darcy's Psycho-Social well being through to the next review.</p> <p>Revision on: 10/15/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 01/27/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; friendly/1: 1 visits, music programs, special events, patio visits etc.</p> <p>Revision on: 05/15/2024 Revision by: Laura Morris (Restorative Care Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, listening to music/radio, visiting with residents/team members, etc.</p> <p>Revision on: 02/16/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• ONE to ONE: Provide him with individual visits for conversation, reading, reminiscing, music, humor, etc.</p> <p>Revision on: 02/16/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Promote the opportunity for Darcy to make friendships and sit with friends during activities.</p> <p>Revision on: 02/16/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p>				
<p>• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS.</p>	<p>• To treat and minimize signs/symptoms or complications associated with</p>	<p>• COMMUNICATION: Involve/ collaborate with (Darcy)/SDM in decision making of musculoskeletal care management.</p> <p>Revision on: 02/28/2024</p>				
Allergies	Penicillin	D.O.B.	04/18/1978	Physician	Wallace Liang	
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Myles, Darcy (922131005553)		Admission Date	02/05/2024	Location	
Last Care Plan Review Completed:		10/27/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision on: 02/28/2024 Revision by: Maryola Perion (RN)	OSTEOARTHRITIS through to the next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects. Revision on: 02/28/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to health status. Revision on: 02/28/2024 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 02/28/2024 Revision by: Maryola Perion (RN)			
• SPIRITUAL BELIEFS: Darcy is of the Catholic Faith. Revision on: 02/16/2024 Revision by: Mitchell Atkinson (Recreation Aide)	• To provide Darcy spiritual support as interested through to the next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• PERSONAL CHOICE: Respect Darcy's right to decline participation in Spiritual Programs. Revision on: 02/16/2024 Revision by: Mitchell Atkinson (Recreation Aide)			
• Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension Revision on: 02/16/2024 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Hypertension through to the next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• COMMUNICATION: Involve/collaborate with (Darcy)/SDM in decision making of Cardiac Care Management for Hypertension. Revision on: 02/16/2024 Revision by: Maryola Perion (RN) • 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: 02/16/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hypertension as per MD Order and monitor for side effects. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN		
• Potential to experience (rash, hives,	• Darcy will be protected from	• COMMUNICATION: Involve/collaborate with (Darcy)/SDM in decision making and			
Allergies	Penicillin	D.O.B.	04/18/1978	Physician	Wallace Liang
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Myles, Darcy (922131005553)	Admission Date	02/05/2024	Location	8 802 B
Last Care Plan Review Completed:		10/27/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
anaphylaxis, etc.) related to ALLERGY of Penicillin. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)	exposure to allergen each day through next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	health teaching about ALLERGY to Penicillin. Revision on: 02/16/2024 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: 02/16/2024 Revision by: Maryola Perion (RN) • ALLERGY ALERT: Darcy has ALLERGY to Penicillin. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 02/16/2024 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Darcy's Allergy to Penicillin and minimize risk for exposure to allergen. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)			
• Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy, etc. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)	• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• COMMUNICATION: Involve/collaborate with (Darcy)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 02/16/2024 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: 02/16/2024 Revision by: Maryola Perion (RN) • PREFERENCE: Darcy prefers to receive medication whole with water Revision on: 02/16/2024 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff		
• Darcy has potential to experience a safety hazard/burn injury related to personal SMOKING habits, asking cigarettes from other resident when he	• Darcy will be safe when choosing to smoke through to the next review Revision on: 05/06/2024	• COMMUNICATION: Involve (Darcy)/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: 02/12/2024	Social Worker		
Allergies	Penicillin	D.O.B.	04/18/1978	Physician	Wallace Liang
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Myles, Darcy (922131005553)	Admission Date	02/05/2024	Location	8 802 B
Last Care Plan Review Completed:		10/27/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
goes to the patio with a staff member. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)		Revision by: Katie Savo Target Date: 01/27/2026	Revision by: Maryola Perion (RN) • SMOKING CONTRACT: Darcy has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Revision on: 02/12/2024 Revision by: Maryola Perion (RN)			Social Worker	
• Potential to experience alteration in MOOD as exhibited by sad, pained, worried facial expression related to Wernicke's, Pain. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be maintained to 0. Revision on: 05/16/2024 Revision by: Maryola Perion (RN) Target Date: 01/27/2026	• COMMUNICATION: Involve/collaborate with (Darcy)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 02/16/2024 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Darcy for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/16/2024 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Darcy's effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)				
• Nutrition Risk Level		• Darcy will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026 • Will weigh within realistic GWR 65-75 kg through to next review date. Revision on: 10/22/2025 Revision by: Holly Laasanen (Dietitian (RD))	• NUTRITION RISK: Darcy is moderate risk level. Revision on: 10/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Darcy will receive Regular diet, Regular texture Revision on: 10/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Darcy drinks REGULAR/THIN Level 0 Fluids. Revision on: 02/08/2024 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Darcy to drink a minimum of 1601 ml/day Revision on: 10/22/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)	
Allergies	Penicillin		D.O.B.	04/18/1978		Physician	Wallace Liang
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Myles, Darcy (922131005553)		Admission Date	02/05/2024		Location	8 802 B
Last Care Plan Review Completed:		10/27/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		Target Date: 01/27/2026 • Darcy will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2001 ml/day (30 ml/kg using 66.7 kg weight) through to next review date. Revision on: 10/22/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/27/2026					
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To promote adequate rest/sleep for Darcy based on identified sleep patterns/preferences each night through to the next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• REST PATTERN: Darcy wakes up at approximately 0700hrs. He resides around 2000hrs. He currently does not nap during the day. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)			PCA	
• BOWEL Continence - Darcy is continent and has self recognition of urge to defecate. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Darcy to remain continent of bowels through next review date Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Darcy 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: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)			PCA PCA	
• URINARY Continence - Darcy is continent and has self recognition of urge to void.		• Darcy will maintain continence level through next review date Revision on: 05/06/2024	• URINARY Continence Level is: CONTINENT • SELF TOILETING: Darcy toilets self. Each shift ask if he/she has voided and			PCA PCA	
Allergies	Penicillin		D.O.B.	04/18/1978	Physician	Wallace Liang	
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Myles, Darcy (922131005553)		Admission Date	02/05/2024	Location	8 802 B	
Last Care Plan Review Completed:		10/27/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		Revision by: Katie Savo Target Date: 01/27/2026	document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)				
<ul style="list-style-type: none"> • Risk for Impaired SKIN INTEGRITY Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> • To protect and maintain skin integrity each day through to the next review. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	<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"> • Increased risk for FALLS related to wandering, Wernicke's. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (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: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Darcy)/SDM in decision making in fall prevention Plan of Care. Revision on: 02/16/2024 Revision by: Maryola Perion (RN)			PCA	D/E/N
			<ul style="list-style-type: none"> • CALL BELL: Place call bell within Darcy's reach, check that it is in working order and remind/encourage to use it. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)			PCA	
			<ul style="list-style-type: none"> • ENVIRONMENT: Ensure environment is clean and clear of clutter. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)			PCA	
			<ul style="list-style-type: none"> • FOOTWEAR: Ensure Darcy wears appropriate footwear at all times. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (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: 02/10/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> • Altered COMMUNICATION as exhibited by limitations to comprehension related to Wernicke's. 		<ul style="list-style-type: none"> • Darcy will continue to freely express self and adequately comprehend information each 	<ul style="list-style-type: none"> • PRIMARY LANGUAGE: Darcys primary language is English. He is able to read and write in English. Revision on: 02/05/2024				
Allergies	Penicillin		D.O.B.	04/18/1978	Physician	Wallace Liang	
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Myles, Darcy (922131005553)		Admission Date	02/05/2024	Location	8 802 B	
Last Care Plan Review Completed:		10/27/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		day through to the next review period. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	Revision by: Katie Wolters-Savo (RAI Coordinator) • INSTRUCTION GUIDANCE: Darcy needs minimal cueing or demonstrative instruction in tasks and activities. Revision on: 05/16/2024 Revision by: Maryola Perion (RN)				
• COGNITIVE LOSS; alteration in thought processes memory loss (Short and long-term), difficulty concentrating, altered judgement related to progression of Wernicke's. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Darcy will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• ORIENTATION: Gently reorient to place and time as needed when Darcy is feeling lost or in confused state. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area (name plate) outside of room. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Wernicke's, History of ETOH and history of Delirium. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Darcy will have ALL ADL care needs met each day through the next review date. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• BATHING:Darcy prefers to have a shower. His shower days are on Monday and Friday on the evening shift. He is able to complete showering tasks independently with set up by the team. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Darcy is able to turn and reposition himself independently in bed. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • DRESSING: Darcy is able to dress himself from head to toe independently without any assistance from staff. Revision on: 07/27/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Darcy is able to eat independently. Eats in the main floor, first floor. Revision on: 05/05/2025 Revision by: Jenny Liu (RAI Coordinator)			PCA	PCA
Allergies	Penicillin		D.O.B.	04/18/1978	Physician	Wallace Liang	
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Myles, Darcy (922131005553)		Admission Date	02/05/2024	Location	8 802 B	
Last Care Plan Review Completed:		10/27/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none"> • LOCOMOTION: Darcy is able to ambulate independently within the facility. Revision on: 05/05/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL HYGIENE: Darcy is able to brush his own hair, wash his own face and complete his own pericare. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • HAND HYGIENE: 1 staff to provide REMINDERS to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • TOILET USE: Darcy is able to toilet himself independently. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • TRANSFERRING: Darcy is able to transfer himself independently from a sit to stand position. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • ORAL CARE: Darcy has his own teeth. He is able to brush his own teeth independently . Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator) • SHAVING - Darcy is set up to complete shaving tasks on his shower days and as needed. Revision on: 02/26/2025 Revision by: Kenya Mosely (RPN) 	PCA PCA PCA PCA PCA PCA	D
• Expressed Wishes and Beliefs related to Darcy's Medical Treatment and End of Life Care Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To support and honor Darcy's expressed wishes and beliefs through to the End of Life. Revision on: 05/06/2024 Revision by: Katie Savo Target Date: 01/27/2026	• CPR: Darcy wishes to have CPR and TRANSFER to hospital. Revision on: 02/05/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)		

Allergies	Penicillin	D.O.B.	04/18/1978	Physician	Wallace Liang
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Myles, Darcy (922131005553)	Admission Date	02/05/2024	Location	8 802 B
Last Care Plan Review Completed:		10/27/2025			

Care Plan Report

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Diagnosis

Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0)

Allergies	Penicillin	D.O.B.	04/18/1978	Physician	Wallace Liang
Diagnosis	Delirium, unspecified(F05.9), Wernicke's encephalopathy(E51.2), Alcohol rehabilitation(Z50.2), Personal history of alcohol abuse(Z86.40), Benign hypertension(I10.0), Primary generalized (osteo)ar...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Myles, Darcy (922131005553)	Admission Date	02/05/2024	Location	8 802 B
Last Care Plan Review Completed:		10/27/2025			

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 language barrier. <p>ISE Score: 2/6 Revision on: 09/02/2025 Revision by: Megan Pipe (Recreation Aide)</p>	<ul style="list-style-type: none"> To support Nghi's Psycho-Social well being through to the next review. <p>Revision on: 09/07/2024 Revision by: Mitchell Atkinson (Recreation Aide) Target Date: 12/17/2025</p>	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1: 1 visits, different types of programs to see what her interests are, music programs, special events, etc. <p>Revision on: 09/07/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p> <ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as watching/listening to TV, listening to music/radio, visiting with residents/team members, etc. <p>Revision on: 09/07/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p> <ul style="list-style-type: none"> ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music, etc. <p>Revision on: 09/07/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p> <ul style="list-style-type: none"> SOCIAL INTERACTION: Promote the opportunity for Nghi to make friendships and sit with friends during activities. <p>Revision on: 09/07/2024 Revision by: Mitchell Atkinson (Recreation Aide)</p>			
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level related to impaired mobility, lower vertebral fracture, lower back/coccyx area. Most Current LTCF Pain Score is 0. <p>Revision on: 06/16/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. <p>Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 12/17/2025</p>	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Nghi)/SDM) about pain management, goals of treatment, plan of care and treatment options. <p>Revision on: 08/08/2024 Revision by: Maryola Perion (RN)</p> <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 (Specify if topical) as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. 	RN Registered Practical Nurse Registered Practical Nurse RN		
<ul style="list-style-type: none"> Transfer Training <p>Revision on: 12/31/2024 Revision by: Mehul Patel (PT - Physiotherapist)</p>	<ul style="list-style-type: none"> Reduced assistance in transfers from 1 assist to Sup Assist in next 3 months; <p>Revision on: 12/31/2024</p>	<ul style="list-style-type: none"> Transfer training as 1 person assist with walker, cue for proper transfers from lying to sitting at side of bed, use of brakes while performing sit to stand, 3-5 reps or as best tolerated; 2-3 x a week; <p>Revision on: 12/31/2024</p>	PT - Physiotherapist PTA		
Allergies	No Known Allergies	D.O.B.	02/10/1928	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nguyen, Nghi (922131005576)	Admission Date	08/08/2024	Location	8 809 A
Last Care Plan Review Completed:		09/17/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Mehul Patel (PT - Physiotherapist) Target Date: 12/17/2025	Revision by: Mehul Patel (PT - Physiotherapist)			
• Strengthening Exs Revision on: 12/31/2024 Revision by: Mehul Patel (PT - Physiotherapist)	• To increase B/L LE strength from 3/5 to 3+/5 in next 3 months Revision on: 12/31/2024 Revision by: Mehul Patel (PT - Physiotherapist) Target Date: 12/17/2025	• Strengthening exs for B/L UE and LE with 1 lb, 10 reps, 1-2 sets or as best tolerated, 2-3 x a week. Dynamic balance exs with walker, Include marching, kicks to back sides and forward, 10 reps, 1-2 x a week; Revision on: 03/12/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA		
• Gait training Revision on: 12/31/2024 Revision by: Mehul Patel (PT - Physiotherapist)	• Increased walking distance from 60 feet to 100 feet in next 3-6 months; Revision on: 06/11/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/17/2025	• Gait training with RW;1 person assist with w/c follow up behind, increase distance slowly, 2-3 x a week Revision on: 12/31/2024 Revision by: Mehul Patel (PT - Physiotherapist)	PT - Physiotherapist PTA		
• Use of PASD TILT CHAIR to assist resident with Activity of Daily Living (Positioning). Revision on: 10/03/2024 Revision by: Kenya Mosely (RPN)	• NGHI will be effectively supported with use of her tilt wheelchair to optimize Activity of Daily Living (positioning, prevention of skin breakdown/discomfort) each day through to the next review date Revision on: 10/03/2024 Revision by: Kenya Mosely (RPN) Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL). • TILT CHAIR in USE as a PASD to support resident with ADL- positioning, prevention of skin breakdown & discomfort. Monitor every shift. Revision on: 10/03/2024 Revision by: Kenya Mosely (RPN)	Registered Staff PCA	D/E/N	
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Thin fragile Skin, Incontinence, Use of incontinent product.	• To protect and maintain skin integrity each day through to the next review. Target Date: 12/17/2025	• 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		
Allergies	No Known Allergies	D.O.B.	02/10/1928	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nguyen, Nghi (922131005576)	Admission Date	08/08/2024	Location	8 809 A
Last Care Plan Review Completed:		09/17/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 10/01/2024 Revision by: Maryola Perion (RN)							
• Potential for BOWEL INCONTINENCE related to Impaired Mobility, Pain. Revision on: 10/01/2024 Revision by: Maryola Perion (RN)		• Nghi will have bowel incontinence managed every shift through to the next review period. Revision on: 10/01/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. Revision on: 10/01/2024 Revision by: Maryola Perion (RN) • BOWEL Continence level Usually continence. Report change to level as noted. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 10/01/2024 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses white color brief per Prevail list on the floor. Revision on: 03/14/2025 Revision by: Jenny Liu (RAI Coordinator)			Registered Staff	
• Expressed Wishes and Beliefs related to Nghi Medical Treatment and End of Life Care Revision on: 09/07/2024 Revision by: Mitchell Atkinson (Recreation Aide)		• To support and honor Nghi's expressed wishes and beliefs through to the End of Life. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	• CPR: Nghi wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 08/08/2024 Revision by: Maryola Perion (RN)				
• Potential to experience discomfort/complications, including infection of surgical site, pain, impaired mobility, embolism related to FRACTURE of lower vertebral fracture. Revision on: 08/11/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To promote optimal healing of FRACTURE of lower vertebral fracture until healed by target date. Revision on: 08/11/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of fracture for discomfort/ complications or changes to health status. Revision on: 08/11/2024 Revision by: Jenny Liu (RAI Coord Back-up)				
Allergies	No Known Allergies		D.O.B.	02/10/1928	Physician	Wallace Liang	
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Nguyen, Nghi (922131005576)		Admission Date	08/08/2024	Location	8 809 A	
Last Care Plan Review Completed:		09/17/2025					

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 Hypertension, General Debility and lower vertebral fracture. Revision on: 08/11/2024 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Nghi will have ALL ADL care needs met each day through the next review date. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> BATHING: Nghi prefers showers on Mondays and Fridays on Day shifts. She is able to wash the upper front, one staff member provides extensive assistance by washing her lower extremities, and her back. Two person side by side for transferring. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
	<ul style="list-style-type: none"> Nghi 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: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> BED MOBILITY: Nghi is able to turn and reposition in bed without any assistance from the staff. When she is weak then requires extensive assistance from one staff to turn and reposition in bed. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> DRESSING: Nghi is able to dress herself up from head to toe, may require limited assistance from one staff to help with her lower body. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> EATING: Nghi is Independent with supervision and set up from staff. She eats in her room. Ensure proper positioning. Revision on: 10/04/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	
		<ul style="list-style-type: none"> LOCOMOTION: Nghi walks with a walker independently, she may call for help when needed. Wheelchair is available for locomotion and Nghi requires one team member to porter on the unit. Tilt should only be used till 30 degrees and only for pain relief on comfort basis. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> PERSONAL HYGIENE: Nghi is able to wash her own face, hands but requires one staff assistance with peri care. Revision on: 06/16/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> HAND HYGIENE: 1 staff to provide Supervision assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 08/20/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	
		<ul style="list-style-type: none"> TOILET USE: She is able to transfer on/off the toilet. However she requires one 	PCA	
Allergies	No Known Allergies		D.O.B.	02/10/1928
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)			
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Nguyen, Nghi (922131005576)	Admission Date	08/08/2024	Location 8 809 A
Last Care Plan Review Completed:		09/17/2025		

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 Hypertension, General Debility and lower vertebral fracture. Revision on: 08/11/2024 Revision by: Jenny Liu (RAI Coord Back-up)		staff to re-apply brief and adjust clothes after. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> TRANSFERRING: 2 staff side by side assist Revision on: 10/28/2024 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> ORAL CARE: Nghi has upper and lower partial dentures. Staff to assist in putting her dentures on days, removing, cleaning and storing her dentures in the evening when she goes to bed. Dentures upper are broken. Family is going to replace Revision on: 06/02/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
<ul style="list-style-type: none"> Nutrition Risk Level 	<ul style="list-style-type: none"> Nghi will be adequately nourished aeb consuming at least 50% at meals and snacks through to next review date. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/17/2025 <ul style="list-style-type: none"> Will weigh within GWR/IBW/Realistic weight range of 33-38kg/BMI 16-19 through to next review date. Revision on: 10/16/2024 Revision by: Lexi Dakin (Dietitian (RD))	<ul style="list-style-type: none"> NUTRITION RISK: Nghi is at moderate nutrition risk. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> DIET ORDER: Nghi will receive regular diet, regular texture (encourage softer options and cut food into small pieces) Revision on: 07/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> FLUID CONSISTENCY: Nghi drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/10/2024 Revision by: Christina He (Dietitian (RD)) <ul style="list-style-type: none"> FLUID TARGET: Encourage Nghi to drink a minimum of 1074 ml per day. She likes water. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> DINING INSTRUCTIONS: - Encourage softer options and cut food into small pieces	Dietitian (RD) PCA PCA PCA Registered Practical Nurse		
Allergies	No Known Allergies	D.O.B.	02/10/1928	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nguyen, Nghi (922131005576)	Admission Date	08/08/2024	Location	8 809 A
Last Care Plan Review Completed:		09/17/2025			

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved		
• Nutrition Risk Level		Target Date: 12/17/2025 • Nghi will be adequately hydrated aeb drinking 100% of TFR: 1074 ml/day (30 ml/kg using 35.8 kg weight) through to next review date. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/17/2025	- Do not serve coffee at dinner or HS snack daily (keeps her awake at night) Revision on: 07/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 120 ml of Resource 2.0 BID Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD))							
• Increased risk for FALLS related to impaired mobility and balance, afraid of falling, history of falls. Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Nghi)/SDM in decision making in fall prevention Plan of Care. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker, wheelchair Revision on: 10/04/2024 Revision by: Jenny Liu (RAI Coord Back-up) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Nghi. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure Nghi wears appropriate footwear for transfers and ambulation. Revision on: 01/02/2025 Revision by: Jenny Liu (RAI Coord Back-up)						PCA	D/E/N
• COGNITIVE LOSS; alteration in thought processes related to progression of memory loss Revision on: 08/08/2024		• Nghi will be supported to maintain cognitive function through the review date. Current CPS is 2	• ORIENTATION: Gently reorient to (person, place, time) as needed when Nghi is feeling lost or in confused state. Revision on: 08/08/2024 Revision by: Maryola Perion (RN)							
Allergies	No Known Allergies			D.O.B.	02/10/1928		Physician	Wallace Liang		
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)									
Facility	Berkshire Care Centre						Print Date	10/30/2025		
Resident	Nguyen, Nghi (922131005576)			Admission Date	08/08/2024		Location	8 809 A		
Last Care Plan Review Completed:		09/17/2025								

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Maryola Perion (RN)		Revision on: 08/20/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/17/2025	<ul style="list-style-type: none"> • PERSONAL ROUTINE: Provide consistency in care routine and activities. 		PCA	
<ul style="list-style-type: none"> • Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension 		<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with Hypertension through to the next review date. 	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Nghì)/SDM in decision making of Cardiac Care Management for Hypertension. 			
Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension for changes to health status and alteration or complications affecting cardiac function. 			
Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> • MEDICATION: Administer medication for Hypertension as per MD Order and monitor for side effects. 		Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Sleep Patterns; Potential for alteration in sleep patterns related to new environment and unable to sleep at night. 		<ul style="list-style-type: none"> • To promote adequate rest/sleep for Nghì based on identified sleep patterns/preferences each night through to the next review date. 	<ul style="list-style-type: none"> • PREFERENCE: Nghì takes Melatonin at bedtime to aim sleep. 		PCA	
Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		Revision on: 08/14/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"> • REST PATTERN: Preferred bedtime: Around 7:30-8:00pm, usual wake time: Around 7:00am 		PCA	
Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with (Nghì)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. 			
<ul style="list-style-type: none"> • Potential to experience complications and side effects impacting quality of life related to use of multi-pharmacy. 		<ul style="list-style-type: none"> • To monitor effectiveness and for side effects of medication used each day through to the next review date. 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. 			
Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	Revision on: 08/08/2024 Revision by: Maryola Perion (RN)			
Allergies	No Known Allergies			D.O.B.	02/10/1928	Physician
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Nguyen, Nghì (922131005576)			Admission Date	08/08/2024	Location
Last Care Plan Review Completed:		09/17/2025				

Care Plan Report

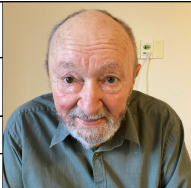
Focus	Goal	Interventions	Position	Freq/Resolved		
		Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff			
• URINARY (Mixed) INCONTINENCE related to altered mobility Revision on: 08/08/2024 Revision by: Maryola Perion (RN)	• Nghi will have urinary incontinence managed every shift through to the next review period. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • URINARY Continence level is Frequently Incontinence. Report change to level as noted. Revision on: 10/05/2024 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Resident uses white color brief per Prevail list on the floor. Revision on: 03/14/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA			
• Altered VISION related to the use of eyeglasses. Revision on: 08/08/2024 Revision by: Maryola Perion (RN)	• Nghi supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Nghi)/SDM for decision making pertaining to change in visual status as needed. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • EYEGLASSES: Nghi wears eyeglasses. Assist to clean eyeglasses as needed and store in night table drawer when sleeping. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer ophthalmic medication as as per MD Order. Monitor its effectiveness and for side effects.	PCA Registered Staff			
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Hard of hearing, Language barrier. Revision on: 08/08/2024 Revision by: Maryola Perion (RN)	• Nghi will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date.	• PRIMARY LANGUAGE: Nghi's primary language is Vietnamese. She is able to understand English and can speak a little English. Revision on: 08/08/2024 Revision by: Maryola Perion (RN) • INTERPRETER Required: Staff that can speak Vietnamese or family members Revision on: 06/16/2025 Revision by: Jenny Liu (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	02/10/1928	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Nguyen, Nghi (922131005576)		Admission Date	08/08/2024	Location	8 809 A
Last Care Plan Review Completed:		09/17/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision on: 08/08/2024 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<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: 08/08/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • INSTRUCTION GUIDANCE: Nghi needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 08/08/2024 Revision by: Maryola Perion (RN)		

Allergies	No Known Allergies	D.O.B.	02/10/1928	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Fracture of lumbar vertebra, unspecified level, open(S32.091)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nguyen, Nghi (922131005576)	Admission Date	08/08/2024	Location	8 809 A
Last Care Plan Review Completed:		09/17/2025			

Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved	
<ul style="list-style-type: none">• STRONG PARTICIPATION in Activities <p>ISE score: 5/6 Revision on: 08/07/2025 Revision by: Megan Pipe (Recreation Aide)</p>	<ul style="list-style-type: none">• Mark will be supported to maintain participation in activities 10-15 times per month by the next review date. <p>Revision on: 08/07/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 11/19/2025</p>	<ul style="list-style-type: none">• STRUCTURED ACTIVITIES: Invite Mark to programs of personal interest; music programs, happy hour, trivia, board games, special events, etc. <p>Revision on: 05/12/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)• SELF-DIRECTED ACTIVITIES: Encourage Mark to engage in self-directed activities such as watching t.v in room, and socializing with other residents.<p>Revision on: 02/05/2025 Revision by: Laura Morris (Restorative Care Aide)</p></p>					
<ul style="list-style-type: none">• Balance Training <p>Revision on: 06/04/2025 Revision by: Shina Wadhwa (Physical Therapist)</p>	<ul style="list-style-type: none">• Increase balance scores from 20 to 22 in next 3 months <p>Revision on: 06/04/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 11/19/2025</p>	<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 <p>Revision on: 06/04/2025 Revision by: Shina Wadhwa (Physical Therapist)</p>			PT - Physiotherapist PTA		
<ul style="list-style-type: none">• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. <p>Revision on: 05/15/2025 Revision by: Maryola Perion (RN)</p>	<ul style="list-style-type: none">• To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. <p>Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025</p>	<ul style="list-style-type: none">• COMMUNICATION: Involve/ collaborate with (Mark)/SDM in decision making of musculoskeletal care management. <p>Revision on: 12/02/2024 Revision by: Maryola Perion (RN)• MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects.<p>Revision on: 12/02/2024 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.<p>Revision on: 12/02/2024 Revision by: Maryola Perion (RN)• PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan.<p>Revision on: 12/02/2024 Revision by: Maryola Perion (RN)</p></p></p></p>					
<ul style="list-style-type: none">• Potential to experience alteration in CARDIAC FUNCTION related to:	<ul style="list-style-type: none">• To treat and minimize signs/symptoms or	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with (Mark)/SDM in decision making of Cardiac Care Management for Hypertension.					
Allergies	No Known Allergies		D.O.B.	11/25/1943	Physician	Wallace Liang	
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Nosanchuk, Mark (922131005599)		Admission Date	11/15/2024	Location	8 803 A	
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Hypertension Revision on: 05/15/2025 Revision by: Maryola Perion (RN)		complications associated with Hypertension through to the next review date. Revision on: 05/14/2025 Revision by: Maryola Perion (RN) Target Date: 11/19/2025	Revision on: 05/14/2025 Revision by: Maryola Perion (RN) • 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: 05/14/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hypertension as per MD Order and monitor for side effects. Revision on: 05/14/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• Altered VISION related to the use of eye glasses, dry eyes. Revision on: 05/15/2025 Revision by: Maryola Perion (RN)		• To treat and minimize complications of dry eyes through to next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025 • Mark will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	• COMMUNICATION: Involve/collaborate with (Mark)/SDM for decision making pertaining to change in visual status as needed. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • EYEGLASSES: Mark wears eyeglasses. Assist to clean eyeglasses as needed and store in night table drawer when sleeping. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)			PCA	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Stroke, Aphasia. Revision on: 05/15/2025 Revision by: Maryola Perion (RN)		• Mark will be supported to maintain current communication abilities to express self, comprehend information, etc. each day through to the review date. Revision on: 02/27/2025	• PRIMARY LANGUAGE: Mark's primary language is English. He is able to speak/understand English. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 12/02/2024				
Allergies	No Known Allergies			D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)			Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025 • Mark will be supported to make basic needs known each day through to the review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Mark needs minimal cueing or demonstrative instruction in tasks and activities. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)			
• Potential for Acute PAIN and alteration in comfort level related to Osteoarthritis, Stroke. Left hip pain. Most Current MDS Pain Score is 0. Revision on: 05/15/2025 Revision by: Maryola Perion (RN)		• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025 • Promote MDS Pain Score of 0 through to the next review. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	• COMMUNICATION: Involve/collaborate with (Mark)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)		RN Registered Practical Nurse Registered Practical Nurse RN	
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to use of diuretic. Revision on: 05/14/2025 Revision by: Maryola Perion (RN)		• To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 05/14/2025 Revision by: Maryola Perion (RN) Target Date: 11/19/2025	• COMMUNICATION: Involve/collaborate with (Mark)/SDM in decision making for plan of Hydration/Fluid consumption and risks of dehydration. Revision on: 05/14/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration.		Registered Staff	
Allergies	No Known Allergies		D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)		Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025				

Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
to use of multi-pharmacy, etc. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	used each day through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using poly-pharmacy, etc. for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff		
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: Stroke Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Stroke through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	• COMMUNICATION: Involve/ collaborate with (Mark)/ SDM in decision making of neurological care management for Stroke. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Stroke as per MD order. Monitor effectiveness and for side effects. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Stroke for changes to health status and alteration or complications affecting neurological function. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	PCA		
• Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	• To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	• COMMUNICATION: Involve/ collaborate with (Mark)/SDM in decision making of thyroid care management. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with HYPOTHYROIDISM for changes to health status and alteration or complications affecting endocrine function. Revision on: 12/02/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 12/02/2024	PCA		
Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)	Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)		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: 12/02/2024 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> Potential for BOWEL INCONTINENCE related to cognitive loss, Stroke. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Mark will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	<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. Registered Staff			
		<ul style="list-style-type: none"> BOWEL Continence level is Infrequently continent. Report change to level as noted. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. PCA			
		<ul style="list-style-type: none"> INCONTINENCE PRODUCT: Mark uses a Large Pull-Up for Days, Evening shifts. Blue brief for the Night shift. Extra Blue brief for the last rounds on Night shift. Revision on: 01/14/2025 Revision by: Maryola Perion (RN)	PCA		
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes memory loss related to mild cognitive loss not yet diagnosed, Short term memory loss. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> Mark will be supported to make independent choice and safe decisions each day through to the review date. Current CPS is 2. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	<ul style="list-style-type: none"> ORIENTATION: Gently reorient to (person, place, time) as needed when Mark is feeling lost or in confused state. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)			
		<ul style="list-style-type: none"> CUE TASKS: Break tasks into manageable subtasks, Mark can comprehend and follow steps when needed. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)	Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	<ul style="list-style-type: none"> • Mark will be supported to maintain cognitive function through the review date. Current CPS is 2. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025				
<ul style="list-style-type: none"> • Altered ability to complete Activities of Daily Living (ADLs) related to Limited Mobility, Stroke, Osteoarthritis. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • Mark will be supported to maintain current self participation in ADL care for (All ADL areas) and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	<ul style="list-style-type: none"> • BATHING: Mark prefers (shower) on Thursday and Sunday on the Day shift. Mark participates by (providing a wash cloth and washing the upper part of the body). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 09/04/2025 Revision by: Kenya Mosely (RPN)	PCA		
		<ul style="list-style-type: none"> • BED MOBILITY: Mark is able to move himself in bed independently. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)	PCA		
		<ul style="list-style-type: none"> • DRESSING: Mark is able to (move extremities and assist throughout) (1) staff to provide (LIMITED to Extensive) assistance for dressing UPPER and LOWER body.	PCA		
		Resident has a lock on his drawer so he can lock his wallet up. Revision on: 05/14/2025 Revision by: Maryola Perion (RN)			
		<ul style="list-style-type: none"> • EATING: Mark is able to eat independently with set up from staff. Eats in the main dining room - 1st floor. Revision on: 05/14/2025 Revision by: Maryola Perion (RN)	PCA		
		<ul style="list-style-type: none"> • LOCOMOTION: Mark is able to ambulate Independently with a walker. He walks with PT/PTA with supervision. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)	PCA		
		<ul style="list-style-type: none"> • PERSONAL HYGIENE: Mark is able to (assist throughout with direction. Able to physically participate). 	PCA		
Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)	Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Limited Mobility, Stroke, Osteoarthritis. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)			1 staff to provide EXTENSIVE assistance for hygiene. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)			PCA	D
			<ul style="list-style-type: none"> HAND HYGIENE: Mark is able to independently complete task of Hand Hygiene each day. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
			<ul style="list-style-type: none"> TOILET USE: Mark is able to (physically assist throughout). (1) staff to provide EXTENSIVE assistance for toileting. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
			<ul style="list-style-type: none"> TRANSFERRING: Mark is able to transfer on his own with supervision Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
			<ul style="list-style-type: none"> ORAL CARE: Mark has upper and lower dentures and stated has right lower implant. and is able to complete oral care independently with reminders and set up. May require the team to complete denture care. Revision on: 09/04/2025 Revision by: Kenya Mosely (RPN)			PCA	
			<ul style="list-style-type: none"> SHAVING - Mark prefers (beard, mustache or face) shaved on his shower days or as needed. Revision on: 02/15/2025 Revision by: Maryola Perion (RN)			PCA	
<ul style="list-style-type: none"> Nutrition Risk Level 		<ul style="list-style-type: none"> Robert will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> NUTRITION RISK: Robert is low risk level. Revision on: 08/07/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)	
			<ul style="list-style-type: none"> DIET ORDER: Mark will receive regular diet, regular texture Revision on: 11/26/2024 Revision by: Ronnie Fung (FSM - Food Services Manager)			PCA	
			<ul style="list-style-type: none"> FLUID CONSISTENCY: Mark drinks REGULAR/THIN Level 0 Fluids. 			PCA	
Allergies	No Known Allergies		D.O.B.	11/25/1943	Physician	Wallace Liang	
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Nosanchuk, Mark (922131005599)		Admission Date	11/15/2024	Location	8 803 A	
Last Care Plan Review Completed:		08/19/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	<p>Target Date: 11/19/2025</p> <ul style="list-style-type: none"> Will weigh within GWR/IBW/Realistic weight range of 78-84kg(BMI 26-28) through to next review date. <p>Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025</p> <ul style="list-style-type: none"> Robert will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2028 ml/day (25 ml/kg using 81.1 kg weight) through to next review date. <p>Revision on: 08/07/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/19/2025</p>	<p>Revision on: 11/26/2024 Revision by: Ronnie Fung (FSM - Food Services Manager)</p> <ul style="list-style-type: none"> FLUID TARGET: Encourage Robert to drink a minimum of 1622 ml/day <p>Revision on: 08/07/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <ul style="list-style-type: none"> DIABETIC CARE: Offer Mark diabetic juice (juice diluted with 50% water), encourage fruit at dessert <p>Revision on: 12/09/2024 Revision by: Lexi Dakin (Dietitian (RD))</p>	PCA			
<ul style="list-style-type: none"> Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES <p>Revision on: 11/22/2024 Revision by: Nirav Vora (PT - Physiotherapist)</p>	<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. <p>Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025</p>	<ul style="list-style-type: none"> COMMUNICATION: Involve/ collaborate with (Mark)/SDM in decision making of diabetes care management. <p>Revision on: 12/02/2024 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status. <ul style="list-style-type: none"> CBG MONITORING: Monitor CAPILLARY BLOOD GLUCOSE (CBG) as per MD order. <ul style="list-style-type: none"> MEDICATION: Administer medication ORAL ANTIHYPERGLYCEMIC medication for DIABETES as per MD order. Monitor effectiveness and for side effects. <p>Revision on: 12/02/2024</p>	Registered Staff			
Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang	
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Nosanchuk, Mark (922131005599)		Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025				

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 Revision on: 11/22/2024 Revision by: Nirav Vora (PT - Physiotherapist)		Revision by: Maryola Perion (RN) <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: 12/02/2024 Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, pitting edema Revision on: 11/22/2024 Revision by: Nirav Vora (PT - Physiotherapist)	<ul style="list-style-type: none"> To protect and maintain skin integrity each day through to the next review. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	<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	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Mark Medical Treatment and End of Life Care Revision on: 11/22/2024 Revision by: Nirav Vora (PT - Physiotherapist)	<ul style="list-style-type: none"> To support and honor Mark's expressed wishes and beliefs through to the End of Life. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	<ul style="list-style-type: none"> CPR: Mark wishes to have CPR and TRANSFER to hospital decision to be made as needed. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> Gary will benefit from STRENGTHENING exercises related to medical diagnoses of Dysphasia, Stroke, Mild cognitive disorder, Diabetes Revision on: 11/22/2024 Revision by: Nirav Vora (PT - Physiotherapist)	<ul style="list-style-type: none"> Gary to increase bilateral hip flexors by 1/2 grade in 3 months. Revision on: 05/21/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) Target Date: 11/19/2025	<ul style="list-style-type: none"> Strengthening exs using 1-3lbs. wt., 1 set, 10rps., 2-3/wk as tolerated, per rehab treatment. Exercise on peddlers/ bike for 5-10 minutes of continuous activity 1-2/wk as tolerated. Revision on: 06/04/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	

Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)	Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Potential for CONSTIPATION related to resident expresses history of it. Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025</p> <p>• Mark will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025</p>	<p>• COMMUNICATION: Involve/collaborate with (Mark/SDM) for decision making regarding constipation management. Revision on: 12/02/2024 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.</p> <p>• FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.</p> <p>• BOWEL PROTOCOL: In place as per MD order</p>	<p>Registered Staff</p> <p>Registered Staff</p> <p>Registered Staff</p>	
<p>• URINARY (Mixed) INCONTINENCE related to cognitive loss, stroke Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• Mark will have urinary incontinence managed every shift through to the next review period. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 02/15/2025 Revision by: Maryola Perion (RN)</p> <p>• URINARY Continence level is Frequently Incontinent. Report change to level as noted. Revision on: 02/15/2025 Revision by: Maryola Perion (RN)</p> <p>• INCONTINENCE PRODUCT: Mark uses a Large Pull-Up for Days, Evening shifts. Blue brief for the Night shift. Extra Blue brief for the last rounds on Night shift. Revision on: 01/14/2025 Revision by: Maryola Perion (RN)</p> <p>• ADAPTIVE EQUIPMENT/AID: Resident uses urinal, ensure it is within reach. Commode in place. Revision on: 09/13/2025 Revision by: Shelby McCarthy (Registered Practical Nurse)</p>	<p>PCA</p> <p>PCA</p> <p>PCA</p>	

Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)	Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Sleep Patterns- Sleeps throughout the night Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To promote adequate rest/sleep for Mark based on identified sleep patterns/preferences each night through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/19/2025	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime (2000), usual wake time (0600) and daytime naps (during the day). Revision on: 11/19/2024 Revision by: Danielle Loreto (RAI Coordinator)	PCA	


Diagnosis

Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection (B00.8), Other specified diabetes mellitus without (mention of) complication(E13.9), Hypothyroidism, unspecified(E03.9), Primary generalized (osteo) arthrosis(M15.0), Pain in joint, pelvic region and thigh(M25.55), Benign hypertension(I10.0)

Allergies	No Known Allergies	D.O.B.	11/25/1943	Physician	Wallace Liang
Diagnosis	Mild cognitive disorder(F06.7), Dysphasia and aphasia(R47.0), Stroke, not specified as haemorrhage or infarction(I64), Other forms of herpesviral infection(B00.8), Other specified diabetes mellit...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Nosanchuk, Mark (922131005599)	Admission Date	11/15/2024	Location	8 803 A
Last Care Plan Review Completed:		08/19/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved	
<ul style="list-style-type: none">• John is experiencing episode of BILATERAL EYE INFECTION Onset date: October 20, 2025 Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)		<ul style="list-style-type: none">• To effectively treat and manage BILATERAL EYE INFECTION without further complications. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN) Target Date: 01/23/2026	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Dawn Ostler (POA/Spouse) with decision making for BILATERAL EYE INFECTION treatment plan and update accordingly. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)• MEDICATIONS: Administer medication Tobramycin Oph Sol 0.3% - instill one drop to bilateral eyes four times daily for 7 days as per MD/NP order. Revision on: 10/20/2025 Revision by: Kenya Mosely (RPN)					
<ul style="list-style-type: none">• At risk for Social Isolation related to disinterest and sleep/rest patterns. ISE Score: 1/6 Revision on: 10/09/2025 Revision by: Megan Pipe (Recreation Aide)		<ul style="list-style-type: none">• John will be supported to maintain participation in activities 10-15 times per month by the next review date. Revision on: 08/18/2024 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/23/2026	<ul style="list-style-type: none">• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; 1:1 visits, comedy corner, exercise groups, games, manicures & hand massages, music groups, reading circle, sensory programs, special events, spiritual groups, tuck shop, etc. Revision on: 06/05/2023 Revision by: Mitchell Atkinson (Recreation Aide)• ASSISTANCE: Provide assistance to get him to scheduled activities - Porter him to programs and Cue/direct him to participate etc. Revision on: 01/26/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)• ONE to ONE: Provide him with individual visits for conversation, sports talk, reading, reminiscing, music, humor, etc. Revision on: 01/10/2022 Revision by: Mitchell Atkinson (Recreation Aide)					ACT Recreation Aide ACT
<ul style="list-style-type: none">• Potential for Acute PAIN and alteration in comfort level related to the aging process, back pain, kidney stones (left). Most Current RAI Pain Score is 0/3. Revision on: 07/18/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none">• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026• Promote RAI Pain Score of 0 through to the next review. Revision on: 07/18/2025	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with John/SDM about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 01/18/2022 Revision by: Maryola Perion (RN)• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.					RN Registered Practical Nurse Registered Practical Nurse RN
Allergies	No Known Allergies		D.O.B.	10/09/1945	Physician	Wallace Liang		
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre				Print Date	10/30/2025		
Resident	Ostler, John (922131005428)		Admission Date	08/30/2021	Location	8 801 A		
Last Care Plan Review Completed:		10/23/2025						



Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for Acute PAIN and alteration in comfort level related to the aging process, back pain, kidney stones (left). Most Current RAI Pain Score is 0/3. Revision on: 07/18/2025 Revision by: Jenny Liu (RAI Coordinator)		Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/23/2026	Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
• Nutrition Risk Level Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD))		• John will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026 • Will weigh within realistic GWR 72-82 kg through to next review date. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/23/2026 • John will be adequately hydrated aeb drinking at least 75% of total fluid requirement: 1902 ml/day (25 ml/kg using 76.1 kg weight) through to next review date. Revision on: 09/19/2025 Revision by: Holly Laasanen	• Labelled Item Lunch: ice cream cup daily Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: John is HIGH risk level. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: John will receive Regular diet, Pureed texture Revision on: 07/31/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: John drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/31/2021 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage John to drink a minimum of 1426 ml/day Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • DINING INSTRUCTIONS: Ensure he is seated upright for meals Provide small, slow sips of fluids Check his mouth for pocketing at the end of each meal Revision on: 07/31/2025			PCA Registered Practical Nurse RN Dietitian (RD)	D
Allergies	No Known Allergies		D.O.B.	10/09/1945	Physician	Wallace Liang	
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Ostler, John (922131005428)		Admission Date	08/30/2021	Location	8 801 A	
Last Care Plan Review Completed:		10/23/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none">• Nutrition Risk Level Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD))		(Dietitian (RD)) Target Date: 01/23/2026	Revision by: Holly Laasanen (Dietitian (RD))				
			• ADAPTIVE AIDS: John requires a straw for his fluids at meals and snacks.		PCA		
			Revision on: 09/11/2023 Revision by: Anna Slack (Registered Dietitian)				
			• MEDPASS SUPPLEMENTS: 60 ml Resource 2.0 TID		Diet		
			Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))				
			• HIGH FIBRE: Encourage oatmeal at breakfast		PCA	D/E	
			Revision on: 07/31/2025 Revision by: Holly Laasanen (Dietitian (RD))				
			• LABELLED SNACK: Offer apple sauce at AM snack daily		PCA	D/E	
			Revision on: 07/31/2025 Revision by: Holly Laasanen (Dietitian (RD))				
<ul style="list-style-type: none">• Potential for altered hematologic symptoms or complications related to hemochromatosis Revision on: 02/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none">• To treat and/or minimize complications associated with hematuria each day through to the next review date. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident with hematuria for complications or changes to health status. Revision on: 04/05/2022 Revision by: Maryola Perion (RN)				
			<ul style="list-style-type: none">• LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.				
<ul style="list-style-type: none">• Hypokalemia		<ul style="list-style-type: none">• Resident will have no complications related to Hypokalemia through to the next review. Target Date: 01/23/2026	<ul style="list-style-type: none">• Monitor and report if noted-: weakness and fatigue. feeling tired. muscle cramps. an abnormal heart rhythm (arrhythmia) ? skipped heartbeats or an irregular heartbeat.				
<ul style="list-style-type: none">• Potential to experience alteration in		<ul style="list-style-type: none">• To treat and minimize signs/symptoms or	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of John with cardiac condition for changes to health status and alteration or complications				
Allergies	No Known Allergies			D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Ostler, John (922131005428)			Admission Date	08/30/2021	Location	8 801 A
Last Care Plan Review Completed:		10/23/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
CARDIAC FUNCTION related to; Pacemaker present, Revision on: 01/23/2025 Revision by: Danielle Loreto (RAI Coordinator)	complications associated with pacemaker through to the next review date. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	affecting cardiac function. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • PACEMAKER Insitu: Resident has pacemaker and requires follow up appointments. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)				
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to decreased intake, loose bowel movements and vomiting Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote fluid consumption and minimize risk for dehydration each day through to the next review date Revision on: 01/19/2025 Revision by: Maryola Perion (RN) Target Date: 01/23/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with altered fluid intake for changes to health status and risk for dehydration. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator) • PROMOTE FLUIDS: Promote John's to consume fluids; amount as per Nutrition Care Plan. Revision on: 01/16/2025 Revision by: Danielle Loreto (RAI Coordinator)	Registered Staff All			
• Risk for Impaired SKIN INTEGRITY related to squamous cell carcinoma to hands, Incontinence, Impaired mobility and balance, Use of incontinent product, Incontinence. Revision on: 08/22/2024 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. • EQUIPMENT: John requires Roho cushion to offload pressure. Revision on: 11/10/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • POSITIONING: Turn, reposition at least every 2 hours when in bed/wheelchair as per Johns preference to offload pressure. Revision on: 04/30/2023 Revision by: Shelby McCarthy (Registered Practical Nurse)	PCA PCA PCA	 Q2h		
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD). Revision on: 05/22/2024	• To treat and/or minimize complications associated with GERD each day through to the next review date. Target Date: 01/23/2026	• COMMUNICATION: Involve/collaborate with (John)/SDM in decision making for GERD Management. Revision on: 05/22/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for				
Allergies	No Known Allergies		D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Ostler, John (922131005428)		Admission Date	08/30/2021	Location	8 801 A
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Maryola Perion (RN)			management of GERD for discomfort/ complications or changes to health status. Revision on: 05/22/2024 Revision by: Maryola Perion (RN) • POSITIONING: Encourage John to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals. Revision on: 05/22/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.			PCA	
• Increased risk for FALLS related to history of falls, impaired mobility and balance, Dementia. Revision on: 01/26/2024 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	• COMMUNICATION: Involve/collaborate with John/SDM in decision making in fall prevention Plan of Care. Revision on: 01/18/2022 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within John's reach (RIGHT side) check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Haley Cadarian (Quality Lead) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 01/18/2022 Revision by: Maryola Perion (RN) • BED: place bed in lowest position to lower risk for injury. Revision on: 01/18/2022 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure John wears appropriate footwear at all times. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • FLOOR MAT: Position (floor mat) on floor next to right (near window) side of bed to lower risk of injury. Revision on: 06/07/2025 Revision by: Kenya Mosely (RPN) • ALARMS: Requires (Bed/Chair) alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 06/07/2025 Revision by: Kenya Mosely (RPN)			PCA	D/E/N
Allergies	No Known Allergies			D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">Increased risk for FALLS related to history of falls, impaired mobility and balance, Dementia. Revision on: 01/26/2024 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none">SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries.			Registered Staff	
<ul style="list-style-type: none">Range of Motion Revision on: 09/08/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)		<ul style="list-style-type: none">In next 3 months: Increase B/L AAROM from 100 to 110 degrees. Revision on: 10/16/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/23/2026	<ul style="list-style-type: none">A-AAROM exs for B/L UE and LE, 10 reps, 1-2 sets or as best tolerated, 2-3 x a week;Passive stretching for B/L Hams and Calf with 20-30 sec hold, 3-5 reps, 2-3 x a week; Revision on: 10/16/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
<ul style="list-style-type: none">Potential for Expressive Behaviour of VERBALLY and physically abusive when providing care and when using a Lift on the resident, RESISTANCE to care nature (changing clothing in the evening/changing brief in the evening), accusatory related to Dementia, Sundowning. Revision on: 09/07/2023 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none">To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 1. Revision on: 01/27/2025 Revision by: Maryola Perion (RN) Target Date: 01/23/2026	<ul style="list-style-type: none">COMMUNICATION: Involve/collaborate with (John)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 09/26/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of John for indications to change in or for escalating expressive behaviour risk. Revision on: 09/26/2022 Revision by: Maryola Perion (RN) <ul style="list-style-type: none">TRIGGERS leading to PHYSICAL (Hitting, Punching, striking, etc.) as expression of behaviour include (anger, frustration, fearfulness, confusion, Sundowning, etc.) Revision on: 09/07/2023			BSO - Internal BSO - External Social Worker	
Allergies	No Known Allergies		D.O.B.	10/09/1945	Physician	Wallace Liang	
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Ostler, John (922131005428)		Admission Date	08/30/2021	Location	8 801 A	
Last Care Plan Review Completed:		10/23/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • PHYSICAL Behaviour: If John is attempting to strikeout; move back from his reach. Calmly indicate that care will continue when he is calm/ready. Seek Registered Staff assistance. <p>Revision on: 09/07/2023</p> <p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • TRIGGERS leading to VERBAL (calling names, etc.) as expression of behaviour includes (limitation in self expression, pain, misunderstanding care intention, etc.) <p>Revision on: 09/26/2022</p> <p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • VERBAL Behaviour: If John 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. <p>Revision on: 11/17/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</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, etc.) <p>Revision on: 09/26/2022</p> <p>Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"> • RESISTANCE to Care Need: If John is refusing to bathe, change clothes, take medications, eat, etc. re-approach in 10-15 minutes. Report episode to Registered Staff. <p>Revision on: 11/17/2021</p> <p>Revision by: Leslie Meloche (Activities/Rec Therapy)</p> <ul style="list-style-type: none"> • BSO RECOMMENDATIONS: Physical: Hitting, punching, striking out <p>Verbal: Yelling, swearing</p> <p>Socially Inappropriate: Will become disruptive by yelling</p> <p>Resists Care: May be resistive when care is being provided</p> <p>Triggers: Confusion, frustration, limitation in self expression, fear, pain, misunderstanding of care intention, fear, sundowning</p> <p>Recommendations: PSW to explain tasks prior to care. 2 staff at all times. 1 person to distract. The other person to provide care. Staff to monitor for signs of pain/infection and report to the nurse.</p>		
Allergies	No Known Allergies		D.O.B.	10/09/1945
Physician	Wallace Liang			
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Ostler, John (922131005428)	Admission Date	08/30/2021	Location 8 801 A
Last Care Plan Review Completed:		10/23/2025		

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> Potential for Expressive Behaviour of VERBALLY and physically abusive when providing care and when using a Lift on the resident, RESISTANCE to care nature (changing clothing in the evening/changing brief in the evening), accusatory related to Dementia, Sundowning. Revision on: 09/07/2023 Revision by: Maryola Perion (RN)		If resident is striking out, move away from his reach. Before turning resident in bed, guide his hand to the rails to avoid causing fear. Do not put his shirt on when he is in bed. Wait until he is in his wheel chair. Use stop and go. Reapproach when the resident is calm/ready. Revision on: 10/13/2025 Revision by: Leslie Meloche (Recreation Aide)			
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Dementia, Cognitive decline. Revision on: 09/06/2023 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> John will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (John)/SDM for decision making about strategies needed to support effective communication. Revision on: 09/06/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> PRIMARY LANGUAGE: John's primary language is English. He is able to speak/understand English. Revision on: 09/06/2023 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> INSTRUCTION GUIDANCE: John needs constant cueing or demonstrative instruction in tasks and activities. Revision on: 09/06/2023 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> URINARY (Mixed) INCONTINENCE related to Dementia, urine retention, right nephrolithiasis, left renal cysts 	<ul style="list-style-type: none"> John will have urinary incontinence managed every shift through to the next review 	<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: 01/18/2022			
Allergies	No Known Allergies	D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Ostler, John (922131005428)	Admission Date	08/30/2021	Location	8 801 A
Last Care Plan Review Completed:		10/23/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
Revision on: 06/13/2023 Revision by: Maryola Perion (RN)		period. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	Revision by: Maryola Perion (RN) • URINARY Continence level is Total Incontinence. Report change to level as noted. PCA Revision on: 09/06/2023 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: John uses Blue brief on Days, Evening and Night shifts. PCA Revision on: 03/11/2025 Revision by: Maryola Perion (RN) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed. PCA				
• Potential to experience complications and side effects impacting quality of life related to use of use of multi pharmacy. Revision on: 09/26/2022 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: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	• COMMUNICATION: Involve/collaborate with John/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 01/18/2022 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of John using poly pharmacy for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 09/26/2022 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. Registered Staff				
• Potential to experience alteration in MOOD as exhibited by (persistent anger with self or others, unpleasant mood in the morning, sad, pained, worried facial expression, repetitive anxious complaints and physical movement) related to Decline in Health Condition, Loss of Independence, Inability to cope with change Revision on: 09/26/2022 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 2. Revision on: 01/27/2025 Revision by: Maryola Perion (RN) Target Date: 01/23/2026	• COMMUNICATION: Involve/collaborate with John/SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 01/18/2022 Revision by: Maryola Perion (RN) • HEALTH EDUCATION: Provide education and support to John/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed. RN Registered Practical Nurse Revision on: 01/18/2022 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of John for indications to change in MOOD including labile mood or increase of symptoms				
Allergies	No Known Allergies			D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Ostler, John (922131005428)			Admission Date	08/30/2021	Location	8 801 A
Last Care Plan Review Completed:		10/23/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>that negatively impact residents quality of life.</p> <p>Revision on: 01/18/2022 Revision by: Maryola Perion (RN)</p> <p>• RESIDENT STRENGTHS: Build on John effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities.</p> <p>Revision on: 01/18/2022 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: 01/18/2022 Revision by: Maryola Perion (RN)</p>			
<p>• Use of PASD tilt wheelchair to assist John with Activity of Daily Living positioning and providing comfort.</p> <p>Revision on: 01/13/2022 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)</p>	<p>• John will be effectively supported with use of PASD tilt wheelchair to optimize Activity of Daily Living (positioning and comfort) each day through to the next review date.</p> <p>Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026</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>• TILTED CHAIR in USE as a PASD to support John with positioning and providing comfort. Monitor every shift.</p> <p>Revision on: 12/09/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>Registered Staff</p> <p>PCA</p>	<p>D/E/N</p>	
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia.</p> <p>Revision on: 10/20/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>• John will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date.</p> <p>Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026</p>	<p>• BATHING: John prefers (tub bath) on Wednesday and Saturday. John requires total assistance from the team to complete his bath without his help. Very rare John will participate in thought (providing a washcloth and cues). Maxi lift for transfer with two staff to assist. Nail care to be provided on shower/bath day.</p> <p>Revision on: 10/19/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• BED MOBILITY: Maximal Assist. John requires two team member to assist with turning and repositioning him in bed.</p> <p>Revision on: 04/28/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• DRESSING: Maximal Assist: John is able to assist in putting his arms through sleeves but requires Extensive assistance from two staff in removing/putting on his pants, brief, socks and shoes.</p>	<p>PCA</p> <p>PCA</p> <p>PCA</p>		
Allergies	No Known Allergies	D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Ostler, John (922131005428)	Admission Date	08/30/2021	Location	8 801 A
Last Care Plan Review Completed:		10/23/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>Revision on: 04/28/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• EATING: John requires one team member to feed him without his help during meal times. Eats in the Sunflower dining room. PCA</p> <p>Revision on: 10/24/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• LOCOMOTION: John utilizes a wheelchair as his primary mode of locomotion. He is PCA dependent of the team in pushing him on and off the unit.</p> <p>Revision on: 12/08/2023 Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Maximal Assist. John requires one team member to assist with using his electric razor to shave his face, wash his face and brush his teeth. PCA</p> <p>John requires two team members to assist with providing pericare. May requires total assistance at times.</p> <p>Revision on: 07/18/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide EXTENSIVE assistance to apply sanitizer or use wipes for hand hygiene. PCA</p> <p>Revision on: 01/18/2022 Revision by: Maryola Perion (RN)</p> <p>• TOILET USE: Total Assist: John requires the use of a MAXI lift to transfer him to the bed to be changed when soiled. Two staff to provide peri care and brief change. PCA</p> <p>Revision on: 10/24/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• TRANSFERRING: MAXI lift with two staff to transfer him to and from bed to wheelchair. PCA</p> <p>Revision on: 05/02/2025 Revision by: Kenya Mosely (RPN)</p> <p>• TRANSFER: MAXI lift and a green sling needed for transfers.</p> <p>Revision on: 05/02/2025 Revision by: Kenya Mosely (RPN)</p> <p>• ORAL CARE: John has his own teeth but is missing 3 and has a few broken post fall. He is able to brush his own teeth once set up with his tooth brush/toothpaste and cueing. PCA</p> <p>Revision on: 09/09/2021</p>			
Allergies	No Known Allergies	D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Ostler, John (922131005428)	Admission Date	08/30/2021	Location	8 801 A
Last Care Plan Review Completed:		10/23/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia. Revision on: 10/20/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</div>		<div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• FOOT CARE: PSW's to assist in providing footcare. Report to Registered Team if any abnormalities noted. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• SHAVING - John requires one staff to shave him on his shower/bath days and as needed. Revision on: 09/06/2023 Revision by: Maryola Perion (RN)</div>	PCA	D		
<div>• Expressed Wishes and Beliefs related to John's Medical Treatment and End of Life Care Revision on: 10/20/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</div>	<div>• To support and honor John expressed wishes and beliefs through to the End of Life. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026</div>	<div>• CPR: John wishes express NO CPR and NO TRANSFER to hospital. Revision on: 09/01/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• FUNERAL Arrangements: Simple Choice Cremations 3790 Dougall Ave 519-254-2585 Revision on: 08/22/2024 Revision by: Maryola Perion (RN)</div>	Social Worker ST			
<div>• COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, poor judgement related to Dementia. Revision on: 10/20/2021</div>	<div>• John will be supported to make independent choice and safe decisions each day through to the review date. Current CPS is 3/6</div>	<div>• COMMUNICATION: Involve/collaborate with John/SDM in decision making of Cognitive Loss for Dementia. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• ORIENTATION: Gently reorient to time and place as needed when John is feeling</div>				
Allergies	No Known Allergies		D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses					
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Resident	Ostler, John (922131005428)		Admission Date	08/30/2021	Location	8 801 A
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Katie Wolters-Savo (RAI Coordinator)		Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	lost or in confused state. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.			Registered Staff	
• Potential for BOWEL INCONTINENCE related to impaired mobility, Dementia Revision on: 10/20/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• John will have bowel incontinence managed every shift through to the next review period. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Total Incontinence. Report change to level as noted. Revision on: 10/20/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. • INCONTINENCE PRODUCT: John uses Blue brief on Days, Evening and Night shifts. Revision on: 03/11/2025 Revision by: Maryola Perion (RN)			Registered Staff PCA PCA PCA	
• SPIRITUAL BELIEFS: John is of the Protestant Faith. Revision on: 10/13/2021 Revision by: Mitchell Atkinson (Recreation Aide)		• To provide John spiritual support as interested through to the next review date. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/23/2026	• PERSONAL CHOICE: Respect John's right to decline participation in Spiritual Program. Revision on: 10/13/2021 Revision by: Mitchell Atkinson (Recreation Aide)			ACT	
• Sleep Patterns; Potential for alteration in sleep patterns related to sleep apnea. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To promote adequate rest/sleep for John based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/12/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• PREFERENCE: John has no preferred wake up time and prefers to reside around 2000hrs. Revision on: 08/30/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) • SLEEPWEAR: John prefers to wear Johnny shirt Revision on: 09/26/2022 Revision by: Maryola Perion (RN)			PCA	
Allergies	No Known Allergies			D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Ostler, John (922131005428)			Admission Date	08/30/2021	Location	8 801 A
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Care Plan Report

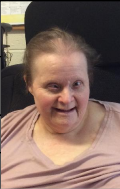
Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 01/23/2026			

Diagnosis

Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker (Z95.00), Other sleep apnoea(G47.38), Calculus of kidney(N20.0), Retention of urine(R33), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Haemochromatosis(E83.10)

Allergies	No Known Allergies	D.O.B.	10/09/1945	Physician	Wallace Liang
Diagnosis	Unspecified dementia(F03), Personal history of alcohol abuse(Z86.40), Malignant neoplasm of skin, unspecified(C44.9), Presence of cardiac pacemaker(Z95.00), Other sleep apnoea(G47.38), Calculus o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Ostler, John (922131005428)	Admission Date	08/30/2021	Location	8 801 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<ul style="list-style-type: none"> • Alteration in skin integrity related to MASD under RIGHT BREAST #57 Revision on: 10/26/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of MASD under RIGHT BREAST #57 Revision on: 10/26/2025 Revision by: Janina Lucero (RN) Target Date: 10/31/2025 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring MASD under RIGHT BREAST #57 for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/26/2025 Revision by: Janina Lucero (RN) • COMMUNICATION: Involve/collaborate with Denise Hay (POA/Sister) in decision making for treatment of skin issues. Revision on: 10/26/2025 Revision by: Janina Lucero (RN) • TOPICAL TX: Apply PRN topical treatment to MASD under RIGHT BREAST as needed as per MD/NP order. Revision on: 10/26/2025 Revision by: Janina Lucero (RN) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/26/2025 Revision by: Janina Lucero (RN) 	Registered Practical Nurse RN Registered Staff Registered Practical Nurse Registered Practical Nurse Registered Staff				
<ul style="list-style-type: none"> • Alteration in skin integrity related to MASD #28 right thigh medial Revision on: 10/26/2025 Revision by: Janina Lucero (RN) 	<ul style="list-style-type: none"> • To promote intact skin integrity through healing MASD by the next review date. Revision on: 09/17/2025 Revision by: Shabnam Mustary (RPN) Target Date: 12/25/2025 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with RASH on left lower back (under skinfold) for changes to health status and alteration or complications affecting skin integrity. Revision on: 09/03/2025 Revision by: Jane Del Rosario (RPN) • TOPICAL TX: Apply topical treatment to RASH on left lower back (under skinfold) as MD Order. Revision on: 09/03/2025 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: 09/03/2025 Revision by: Jane Del Rosario (RPN) 	Registered Practical Nurse RN Registered Practical Nurse Registered Practical Nurse				
Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang		
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified(E03.9)....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre			Print Date	10/30/2025		
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B	
Last Care Plan Review Completed:		09/25/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE Score: 6/6 Revision on: 09/24/2025 Revision by: Megan Pipe (Recreation Aide)</p>	<p>• Brenda will be supported to maintain participation in activities 30-35 times per month by the next review date. Revision on: 06/19/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 12/25/2025</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; friendly/1:1 visits, arts & crafts, comedy corner, discussion group, exercise groups, games - trivia & Bingo, horticultural therapy, Montessori - iPad, reading groups, reminiscing groups, sensory activities, Happy Hour, tea social, special events, spiritual groups, TV - movies, virtual visits, etc. Revision on: 04/04/2025 Revision by: Megan Pipe (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage Brenda to engage in self-directed activities such as watching/listening to TV, adult colouring, listening to music, etc. Revision on: 04/04/2022 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - Accompany in elevator, Porter, etc. Revision on: 11/08/2019 Revision by: Shayna Lee Wonsch (Activation Manager)</p> <p>• ONE to ONE: Provide her with individual visits for conversation, manicures/hand massages, sensory videos (animals), colouring, music, etc. Revision on: 11/08/2019 Revision by: Shayna Lee Wonsch (Activation Manager)</p>	ACT			
<p>• Potential for Acute PAIN and alteration in comfort level related to Artificial knee, leg pain and arthritis. Most Current LTCF Pain Score is (0) Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• Promote LTCF Pain Score of 0 through to the next review. Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 12/25/2025</p>	<p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 04/23/2021 Revision by: Jenny Liu (RAI Coord Back-up)</p>	RN Registered Practical Nurse Registered Practical Nurse RN			
<p>• Potential for muscular dysfunction, contractures and bone deformity related to ARTHRITIS Revision on: 04/03/2025 Revision by: Maryola Perion (RN)</p>	<p>• To treat and minimize signs/symptoms or complications associated with Arthritis through to the next review date.</p>	<p>• MEDICATION: Administer medication for management of (Arthritis) as per MD order. Monitor effectiveness and for side effects. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for</p>				
Allergies	Avelox		D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Revision on: 04/03/2025 Revision by: Maryola Perion (RN) Target Date: 12/25/2025	management of (Arthritis) for discomfort/ complications or changes to health status. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • PAIN MANAGEMENT prescribed and in place; refer to Pain Care Plan. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)				
• Potential for Expressive Behaviour of (VERBAL, SOCIALLY Inappropriate, resist care) nature related to dx with Down syndrome. Revision on: 09/21/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To decrease episodic frequency of (verbally abuse and socially inappropriate) by next review date. ABS score will be less than 1. Revision on: 04/03/2025 Revision by: Maryola Perion (RN) Target Date: 12/25/2025	• 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 VERBAL (yelling, screaming) as expression of behaviour include (Specify cause; loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 04/08/2023 Revision by: Jenny Liu (RAI Coord Back-up) • VERBAL Behaviour: If Brenda 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: 04/08/2023 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bath) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 09/21/2024 Revision by: Jenny Liu (RAI Coord Back-up) • RESISTANCE to Care Need: If Brenda is declining to (bathe) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 09/21/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to SOCIALLY Inappropriate (disruptive vocalizations, dump her coffee on the floor, throw utensils) as expression of behaviour include (Specify cause; confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 04/08/2023 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff			
Allergies	Avelox		D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Potential for Expressive Behaviour of (VERBAL, SOCIALLY Inappropriate, resist care) nature related to dx with Down syndrome.</p> <p>Revision on: 09/21/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p>		<p>• SOCIALLY Inappropriate Behaviour: If Brenda is noted to (Specify; make loud disruptive noises in dining room/program, etc.) gently redirect her to focus on task at hand or escort to quieter area. Revision on: 04/08/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• DELUSION: Seeing people in room. Revision on: 02/01/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• BSO RECOMMENDATIONS:</p> <p>Team members continue to show compassion for resident?s worry for her son and provide reassurance by listening and helping her call for hospital updates when able.</p> <p>Offering to call resident?s son following her medications and meals to improve compliance and remain supportive when son is able to get be reached by phone.</p> <p>Encourage visits with social workers while her son remains in hospital.</p> <p>Internal BSO team incorporate phone calls with the son during supportive visits.</p> <p>Address unmet need when the resident is repetitively utilizing the call bell</p> <p>Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	Registered Practical Nurse RN	
<p>• RISK FOR/IMPAIRED SKIN INTEGRITY related to impaired mobility and incontinent, swelling to bottom lip.</p> <p>Revision on: 04/25/2024 Revision by: Katie Savo</p>	<p>• To protect and maintain skin integrity each day through to the next review. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025</p>	<p>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.</p> <p>• EQUIPMENT: ROHO cushion pressure reduction device applied to chair when up. Air mattress applied to bed for a pressure reduction device. Revision on: 04/01/2023 Revision by: Janina Lucero (RN)</p>	PCA PCA	

Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)	Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential for altered hematologic symptoms or complications related to vaginal bleeding Revision on: 03/11/2024 Revision by: Maryola Perion (RN)		• To treat and/or minimize complications associated with vaginal bleeding each day through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• COMMUNICATION: Involve/collaborate with (Brenda)/SDM in decision making of hematologic care management for Anemia. Revision on: 03/11/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with vaginal bleeding for complications or changes to health status. Revision on: 03/11/2024 Revision by: Maryola Perion (RN)				
• Increased risk for FALLS related to Limited mobility, artificial knee, Down Syndrome, Hypothyroidism, Congestive Heart Failure, History of Falls. Revision on: 01/29/2024 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment:(high/low bed, wheelchair) Revision on: 10/14/2021 Revision by: Jenny Liu (RAI Coord Back-up) • BED: place bed in lowest position to lower risk for injury. Revision on: 04/03/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear (non-slip) for transfers. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)			PCA PCA PCA PCA	D/E/N
• Range of Motion Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)		• To improve ROM at B/L shoulder flexion from 100 to 110 degrees in 3 months To decrease restriction in Rt ankle -30 to -20 degrees in 3 months Revision on: 09/24/2025	• A-AAROM exs with B/L UE and LE within pain limits. 10 reps, 1-2 sets or as best tolerated, 2-3 x a week B/L Hand gripping exe. with use of squeeze ball 1set,5rps.,hold up to 10 sec.,2-3/week as tolerated. Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)			PT - Physiotherapist PTA	
Allergies	Avelox		D.O.B.	09/02/1958	Physician	Wallace Liang	
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B	
Last Care Plan Review Completed:		09/25/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
• Range of Motion Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/25/2025				
• Potential for bruising, bleeding, clotting or other complications related to use of (ANTICOAGULANT) medication. Revision on: 09/14/2023 Revision by: Jenny Liu (RAI Coord Back-up)	• To monitor for bleeding and minimize complications related to use of (Apixaban) through the review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using Anticoagulant therapy for changes to health status and complications causing bleeding or clotting issues. Revision on: 09/14/2023 Revision by: Jenny Liu (RAI Coord Back-up) • BLEEDING ALERT: Notify nurse immediately if Brenda is bleeding (noted blood in urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 09/14/2023 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.	PCA Registered Staff		
• Use of PASD (bed rails- two 1/4, tilt wheelchair) to assist resident with Activity of Daily Living (repositioning, providing comfort). Revision on: 04/26/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Brenda will be effectively supported with use of (bedrails, tilt wheelchair) to optimize Activity of Daily Living (repositioning) each day through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (bedrails) as to support appropriate (repositioning). Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility. Monitor every shift. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC) • TILTED CHAIR in USE as a PASD to support Brenda with providing comfort and reducing pressure. Monitor every shift. Revision on: 04/26/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA PCA	D/E/N D/E/N	
• Potential to experience alteration in MOOD as exhibited by (repetitive questions, seek attention related to Down syndrome. Revision on: 04/08/2023	• Brenda will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 10/02/2024	• COMMUNICATION: Involve/collaborate with (Brenda)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Brenda			
Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)	Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Jenny Liu (RAI Coord Back-up)	Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Brenda effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 07/10/2023 Revision by: Jenny Liu (RAI Coord Back-up)				
• Altered VISION related to able to see large print but not regular print in newspapers or books. Revision on: 01/03/2022 Revision by: Mitchell Atkinson (Recreation Aide)	• Brenda will be able to function safely in her environment. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• COMMUNICATION: Involve/collaborate with Brenda/SDM for decision making pertaining to change in visual status as needed. Revision on: 10/14/2021 Revision by: Jenny Liu (RAI Coord Back-up) • READING: Brenda uses large print material to aid with reading. Revision on: 10/14/2021 Revision by: Jenny Liu (RAI Coord Back-up)	PCA			
• Expressed Wishes and Beliefs related to Brenda Medical Treatment and End of Life Care Revision on: 07/20/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)	• To support and honor Brenda expressed wishes and beliefs through to the End of Life. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• CPR: Brenda wishes express NO CPR, however TRANSFER to hospital decision will be made at the time. Revision on: 09/07/2023 Revision by: Kenya Mosely (RPN)				
• Potential for complications, s/sx related to dx of THYROTOXICOSIS and HYPOTHYROIDISM Revision on: 01/25/2021	• To treat and/or minimize signs/symptoms of (HYPOTHYROIDISM or HYPERTHYROIDISM) through	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (HYPOTHYROIDISM or HYPERTHYROIDISM) for changes to health status and alteration or complications affecting endocrine function. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)	PCA			
Allergies	Avelox		D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Jenny Liu (RAI Coord Back-up)		to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	<ul style="list-style-type: none"> • MEDICATION: Administer medication for (HYPOTHYROIDISM or HYPERTHYROIDISM) as per MD order. Monitor effectiveness and for side effects. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) 			
<ul style="list-style-type: none"> • Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF) 		<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with CHF through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with CHF for changes to health status and alteration or complications affecting cardiac function. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for CHF as per MD Order and monitor for side effects. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • OXYGEN: Administer Oxygen as per MD order. EVENING PSW CHARGE OXYGEN MACHINE Revision on: 09/20/2023 Revision by: Kenya Mosely (RPN) • WEIGHT: Check/Document weight as per Order. Notify MD of any sudden weight gain. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) 		Registered Practical Nurse RN Registered Practical Nurse RN	E
<ul style="list-style-type: none"> • Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy) Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) 		<ul style="list-style-type: none"> • To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • PREFERENCE: Brenda prefers to receive medication whole in apple sauce/strawberry spread. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and 		Registered	
Allergies	Avelox		D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy) Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)		as needed.	Staff	
<ul style="list-style-type: none"> Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of (Avelox) Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Brenda will be protected from exposure to allergen each day through next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Avelox) for changes to health status and complications mortality. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> MD/PHARMACY ALERT: Notify the MD and Pharmacy of Brenda Allergy to (Avelox) and minimize risk for exposure to allergen. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> MEDICATION: Administer medication as per MD Order. Monitor its effectiveness. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> RESCUE MEDICATION: Administer EPINEPHRINE as per MD/NP Order. Monitor effectiveness and immediately notify MD/NP of use. 	Registered Staff	
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, slurred speech, mumbled speech, etc.) related to Down Syndrome. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Brenda will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Brenda's primary language is English. She is able to speak/understand English. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)		

Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)	Admission Date	03/26/2010	Location	8 824 B
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Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Limited mobility, Dx of Down syndrome (unspecified), Arthritis, CHF, Artificial knee Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)		anywhere. Brenda applies and removes her seatbelt on her own. Revision on: 07/08/2022 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> PERSONAL HYGIENE: Maximal Assist: Brenda is able to wash her hands or face with cueing from staff, but requires weight bearing assistance from two team members to do her hygiene, such as comb her hair and peri-care. Revision on: 06/25/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> HAND HYGIENE: 1 staff to provide REMINDERS to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 10/07/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> TOILET USE: A MAXI LIFT and 3 staff assistance is required while changing in bed. Change brief before going to activities and after activity PRN. Revision on: 08/17/2023 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> TRANSFERRING: MAXI lift is to be used for all transfer such as from bed to chair, chair to bed and to toilet. use a comfort sling and to leave it underneath her when she is in her W/C. Revision on: 01/10/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> TRANSFER LIFT/SLING: comfort sling black,color blue Revision on: 01/09/2024 Revision by: Baljinder Sidhu (RPN) <ul style="list-style-type: none"> ORAL CARE: Brenda require Limited assistance from one staff. She is able to follow directions and rinse her mouth. All teeth missing - no denture. Revision on: 03/05/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> FOOT CARE: To be done on bath days and PRN. Revision on: 01/18/2023 Revision by: Katherine Arca (RPN) <ul style="list-style-type: none"> SPECIFIC RESIDENT Request: Please ensure resident is wearing a bra, as this reduces her concerns with her chest/torso. Revision on: 03/27/2023 Revision by: Meghan Sears (ADOC)	PCA	

Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)	Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025			

Care Plan Report

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• SPIRITUAL BELIEFS: Brenda is of the Roman Catholic Faith. Revision on: 05/11/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	• To provide Brenda spiritual support as interested through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including church services (Parkwood, Catholic, Heritage Park), spiritual music programs, bible study, spiritual discussions, prayer circles, etc. Revision on: 11/08/2019 Revision by: Shayna Lee Wonsch (Activation Manager) • SELF-DIRECTED SPIRITUAL Activities: Brenda engages in communion, etc. Revision on: 11/08/2019 Revision by: Shayna Lee Wonsch (Activation Manager)	ACT				
• Bowel Incontinence. Revision on: 09/16/2016 Revision by: Maryola Perion (Registered Nurse)	• Brenda will receive support to (use toilet) and promote optimal bowel continence each day through to the next review. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. • BOWEL Continence level is Total Incontinence. Report change to level as noted. Revision on: 04/03/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff PCA PCA				
• BLADDER INCONTINENCE Revision on: 04/23/2016 Revision by: Maryola Perion (Registered Nurse)	• Brenda will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• URINARY Continence level is (Totally Incontinent). Report change to level as noted. Revision on: 10/14/2021 Revision by: Jenny Liu (RAI Coord Back-up) • CHECK and CHANGE: Brenda experiences totally incontinence and requires checks every 2 hours and change each time noted to be soiled. Revision on: 06/21/2024 Revision by: Jenny Liu (RAI Coord Back-up) • CONTINENCE PRODUCT: Resident uses GREY color brief per prevail sheet. Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA PCA PCA				
• Nutrition Risk Level (diet details) Revision on: 02/29/2016 Revision by: Anna Slack (Registered Dietitian)	• Brenda will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 10/02/2024	• Comfort foods include resident prefer to eat Room Temperature food. Revision on: 10/28/2025 Revision by: Penpa Dolma (Registered Practical Nurse) • Labelled Item Breakfast: Apple sauce (99 ml hydration) Revision on: 04/03/2025	PCA Registered	D			
Allergies	Avelox		D.O.B.	09/02/1958	Physician	Wallace Liang	
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Papp, Brenda (922131003320)		Admission Date	03/26/2010	Location	8 824 B	
Last Care Plan Review Completed:		09/25/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025 • Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 02/27/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/25/2025 • Brenda will be adequately hydrated aeb drinking at least 75% of total fluid requirement: 1930 ml/day (25 ml/kg using 77.2 kg weight) through to next review date. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/25/2025	Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Dinner: Jello (99 ml hydration) Revision on: 04/03/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Labelled Item Lunch: Apple sauce (99 ml hydration) Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Brenda is moderate risk level. Revision on: 09/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Brenda will receive regular diet, puree texture. Revision on: 12/04/2020 Revision by: Anna Slack • FLUID CONSISTENCY: Brenda drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/15/2021 Revision by: Olivia Kuhlmann (Dietetic Intern) • FLUID TARGET: Encourage Brenda to drink a minimum of 1448 ml/day. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 200 ml high moisture food or fluid outside of meals and snacks daily. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DINING INSTRUCTIONS: No coffee at dinner (for sleep) Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) • ADAPTIVE AIDS: Brenda requires sippy cup for her liquids at all meals and snacks and rimmed plate at all meals Revision on: 01/04/2022			Practical Nurse RN PCA Registered Practical Nurse RN PCA Registered Practical Nurse RN Dietitian (RD) Diet Food Services Aide PCA Diet PCA PCA Registered Practical Nurse Diet PCA	E <

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details) Revision on: 02/29/2016 Revision by: Anna Slack (Registered Dietitian)		Revision by: Anna Slack (Registered Dietitian) • HIGH PROTEIN IN MEALS: Provide greek yogurt at breakfast daily (85 ml fluid). Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LOW CALORIE: Offer Brenda low calorie foods at meals/snacks for weight management as per resident/SDM preference, such as : Encourage single portions at meals Encourage fruit for dessert Offer water between meals At meals serve 1 serving milk/chocolate milk only and water If she requests juice dilute with half water Revision on: 04/19/2021 Revision by: Anna Slack (Registered Dietitian) • FLUIDS AT SNACKS: Encourage/assist Brenda to drink at least 250 ml (1 sippy cup) water at each snack pass (AM/PM/HS). Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA Diet PCA	BLD D/E
• SLEEP PATTERNS Revision on: 11/19/2015 Revision by: Clarisa Amir (Registered Practical Nurse)	• To promote adequate rest/sleep for Brenda based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/25/2025	• REST PATTERN: Preferred bedtime: 7:00-8:00 PM and usual wake time: 0630-07:00 AM. Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up) • SLEEPWEAR: Preferred night attire Johnny Shirt Revision on: 01/25/2021 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA	

Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)	Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025			

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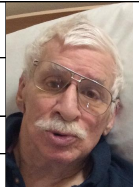
Diagnosis

Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified(E03.9), Congestive heart failure(I50.0), Pneumonia, unspecified(J18.9), Sepsis, unspecified(A41.9), Influenza with other respiratory manifestations, seasonal influenza virus identified(J10.1), Urinary tract infection, site not specified(N39.0)

Allergies	Avelox	D.O.B.	09/02/1958	Physician	Wallace Liang
Diagnosis	Down's syndrome, unspecified(Q90.9), Arthritis, unspecified, unspecified site(M13.99), Presence of artificial knee(Z96.61), Thyrotoxicosis, unspecified(E05.9), Hypothyroidism, unspecified (E03.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Papp, Brenda (922131003320)	Admission Date	03/26/2010	Location	8 824 B
Last Care Plan Review Completed:		09/25/2025			

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 history of abdominal pain related to constipation. Most Current RAI Pain Score is 0/3. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator) 	<ul style="list-style-type: none"> • Promote RAI Pain Score of 0 through to the next review. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/29/2026 	<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/laxative as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) 	RN Registered Practical Nurse Registered Practical Nurse RN		
<ul style="list-style-type: none"> • At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to disinterest. <p>ISE Score: 2/6 Revision on: 02/01/2025 Revision by: Laura Morris (Restorative Care Aide)</p>	<ul style="list-style-type: none"> • To support Frederick's Psycho-Social well being through to the next review. <p>Revision on: 02/01/2025 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/29/2026</p>	<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite him to programs of personal interest; friendly/1:1 visits, different types of programs to see what his interests are, special events, etc. Revision on: 12/11/2023 Revision by: Mitchell Atkinson (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, listening to music/radio, visiting with residents/team members, etc. Revision on: 12/11/2023 Revision by: Mitchell Atkinson (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation, bedside activity, reading, reminiscing, humour, music, etc. Revision on: 12/11/2023 Revision by: Mitchell Atkinson (Recreation Aide) • SOCIAL INTERACTION: Promote the opportunity for Frederick to make friendships and sit with friends during activities. Revision on: 12/11/2023 Revision by: Mitchell Atkinson (Recreation Aide) 			
<ul style="list-style-type: none"> • Nutrition: Swallowing difficulty related to choking incidents Revision on: 11/25/2024 Revision by: Danielle Loreto (RAI Coordinator) 	<ul style="list-style-type: none"> • To support safe swallowing through to next review date Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026 • To prevent or reduce choking 	<ul style="list-style-type: none"> • Provide diet/texture interventions as per Nutrition Risk Level • Fred's swallowing function is declining. Fred does not want a G-tube. Continue with oral diet as tolerated. See Nutrition Note August 21, 2025. Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) 			
Allergies	No Known Allergies	D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)	Admission Date	11/14/2023	Location	8 802 C
Last Care Plan Review Completed:		10/29/2025			



Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	or aspiration as feasible while respecting decisions concerning resident's choice for diet texture through to next review date Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026				
• Potential for Expressive Behaviour of (RESISTANCE to care need) nature related to hx of low mood/depression. Revision on: 05/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To promote safety for frederick and/or others during each episode of resist care through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Frederick for indications to change in or for escalating expressive behaviour risk. Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to get up) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) • RESISTANCE to Care Need: If Frederick is declining to (get up from the bed) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)			
• 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: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	• 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: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff		
• Increased risk for FALLS related to history of falls and antipsychotic drug use. Revision on: 02/23/2024	• To promote safety, minimize risk for falls and/or fall related injury each day through to the	• CALL BELL: Place call bell within Frederick's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/14/2023	PCA	D/E/N	
Allergies	No Known Allergies	D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)	Admission Date	11/14/2023	Location	8 802 C
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

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Allergies	No Known Allergies	D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)	Admission Date	11/14/2023	Location	8 802 C
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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> Potential for CONSTIPATION related to decreased mobility and history of cva with right sided weakness. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Frederick will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of Frederick for constipation management and changes to health status and symptoms/ complications of constipation. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		Registered Staff	
<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"> COGNITIVE LOSS; alteration in thought processes memory loss, altered judgement related to progression of Short term memory loss, forgetfulness. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Frederick will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with Frederick/SDM in decision making of Cognitive Loss for forgetfulness/some short term memory loss. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to history of CVA's, Hypertension, right sided weakness, history of double hip replacement. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Frederick will have ALL ADL care needs met each day through the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	<ul style="list-style-type: none"> BATHING: Frederick prefers to have a shower. His shower days are on Tuesday and Saturday day shift. Two staff TOTAL assistance to complete the shower from head to toe without his help. MAXI lift used for transferring. Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> BED MOBILITY: Frederick requires one team member weight bearing assist to turn and reposition in bed. Bedrails in place aim bed mobility. Revision on: 02/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)		PCA	
			<ul style="list-style-type: none"> DRESSING: Frederick requires weight bearing assist from two team members to dress from head to toe. He is able to lift his arms but requires the team to hold them in place. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
Allergies	No Known Allergies		D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)		Admission Date	11/14/2023	Location	8 802 C
Last Care Plan Review Completed:		10/29/2025				

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		<ul style="list-style-type: none"> • EATING: Frederick need help and supervision for one staff for eating due to high choking risk. He is encouraged to eat in the floor 8's dining area though prefers to eat in his room. Give resident time to eat and let him finish first bite before offering next one. Revision on: 08/21/2025 Revision by: Gurjit Kaur (RN) • LOCOMOTION: Frederick is using a wheelchair for locomotion and is dependent of the team to push him on and off of the lane. However he is able to propel himself on the unit if he wants to. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL HYGIENE: Maximal Assistance: Frederick requires weight bearing assist from two team members to brush his teeth and assist with providing pericare. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator) • HAND HYGIENE: 1 staff to provide LIMITED assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • TOILET USE: Frederick requires the team to check and change his incontinence product while in bed. Revision on: 11/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • TRANSFERRING: Frederick is transferred with a maxi lift and two team member assist. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • TRANSFER LIFT/SLING: Green sling Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • ORAL CARE: Frederick has his own teeth remaining and does require one team member to assist with brushing his teeth. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) 	PCA		
Allergies	No Known Allergies	D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)	Admission Date	11/14/2023	Location	8 802 C
Last Care Plan Review Completed:		10/29/2025			

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Focus	Goal	Interventions	Position	Freq/Resolved			
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to history of CVA's, Hypertension, right sided weakness, history of double hip replacement. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</div>		<div>• FOOT CARE: Foot Care Nurse to complete toenail every 4-6 wks. Report long toe nails or other abnormalities as noted. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)</div> <div>• SHAVING - Frederick requires assistance with shaving on his bath days. Revision on: 07/26/2024 Revision by: Kenya Mosely (RPN)</div>	PCA	D			
<div>• Potential to experience alteration in CARDIAC FUNCTION related to; hx of CVA and Hypertension Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</div>	<div>• To treat and minimize signs/symptoms or complications associated with history of CVA, HTN through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of Frederick with history of CVA, HTN for changes to health status and alteration or complications affecting cardiac function. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• MEDICATION: Administer medication for history of CVA, HTN as per MD Order and monitor for side effects. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</div>	Registered Practical Nurse RN				
<div>• Potential for BOWEL INCONTINENCE related to impaired mobility.</div>	<div>• (Resident name) will have bowel incontinence managed</div>	<div>• BOWEL Continence level is Total Incontinence. Report change to level as noted. Revision on: 11/14/2023</div>	PCA				
Allergies	No Known Allergies			D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		every shift through to the next review period. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	Revision by: Katie Wolters-Savo (RAI Coordinator) • BOWEL MOVEMENT: Monitor Frederick for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • INCONTINENCE PRODUCT: Frederick wears a blue color brief per Prevail list. Revision on: 02/05/2025 Revision by: Jenny Liu (RAI Coord Back-up)			PCA PCA	
• Risk for Impaired SKIN INTEGRITY related to impaired mobility, incontinence. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	• 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 at least every 2 hours (when in bed/wheelchair to offload pressure. Revision on: 01/11/2024 Revision by: Kenya Mosely (RPN)			PCA PCA	 Q2h
• URINARY (Mixed) INCONTINENCE related to history of CVA's. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Frederick will have urinary incontinence managed every shift through to the next review period. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	• URINARY Continence level is totally Incontinent. Report change to level as noted. Revision on: 11/22/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • CHECK and CHANGE: Frederick experiences TOTAL incontinence and requires checks every 2 hours and change each time noted to be soiled. Revision on: 07/26/2025 Revision by: Jenny Liu (RAI Coordinator) • INCONTINENCE PRODUCT: Frederick wears a blue color brief per Prevail list. Revision on: 02/05/2025 Revision by: Jenny Liu (RAI Coord Back-up)			PCA PCA PCA	
• Potential to experience alteration in MOOD as exhibited by history of low mood/Depression. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To decrease episodic frequency of low moods by next review date. DRS score will be less than (state current DRS score). Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Frederick for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 02/23/2024				
Allergies	No Known Allergies			D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)			Admission Date	11/14/2023	Location	8 802 C
Last Care Plan Review Completed:		10/29/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 01/29/2026	Revision by: Jenny Liu (RAI Coord Back-up)			
<ul style="list-style-type: none"> Altered VISION related to wears glasses for vision. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Frederick will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	<ul style="list-style-type: none"> EYEGLASSES: Frederick wears eyeglasses. Assist to clean eyeglasses as needed PCA and store on night table when sleeping. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to self expression related to usually understood. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Frederick will be supported to make basic needs known each day through to the review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	<ul style="list-style-type: none"> PRIMARY LANGUAGE: Frederick communicates best in English. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> Sleep Patterns; Potential for alteration in sleep patterns related to new environment. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> To promote adequate rest/sleep for Frederick based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026	<ul style="list-style-type: none"> REST PATTERN: Preferred bedtime 8:00pm, usual wake time is 8:00am and daytime naps at no particular time. Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		PCA	
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Frederick's Medical Treatment and End of Life Care Revision on: 11/14/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> To support and honor Frederick's expressed wishes and beliefs through to the End of Life. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord	<ul style="list-style-type: none"> CPR: Frederick wishes express DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed. Revision on: 04/14/2025 Revision by: Kenya Mosely (RPN)			
Allergies	No Known Allergies		D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)		Admission Date	11/14/2023	Location	8 802 C
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Back-up) Target Date: 01/29/2026					
• Nutrition Risk Level		• Rick will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/29/2026 • Will weigh within realistic GWR 72-82 kg through to next review date. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026 • Fred will be adequately hydrated aeb drinking at least 75% of total fluid requirement: 1862 ml/day (25 ml/kg using 74.5 kg weight) through to next review date. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026	• Labelled Item Breakfast: Magic Cup daily Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN	D
			• Labelled Item Dinner: Magic Cup daily Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN	E
			• Labelled Item Lunch: Magic Cup daily Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN	D
			• NUTRITION RISK: Frederick is moderate risk level. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)	
			• DIET ORDER: Rick will receive regular diet, pureed texture.			PCA	
			Fred's swallowing function is declining. Fred does not want a G-tube. Continue with oral diet at risk - pureed texture to minimize risk. See Nutrition Note August 21, 2025. Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))				
			• THICKENED FLUIDS: Rick drinks thickened fluids at honey-like (moderately thick level 3) consistency Revision on: 04/24/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			• FLUID TARGET: Encourage Fred to drink a minimum of 1396 ml/day Revision on: 10/16/2025 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.			Dietary aide PCA	
Allergies	No Known Allergies			D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)			Admission Date	11/14/2023	Location	8 802 C
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Care Plan Report

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Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Personal history of COVID-19(U07.5), Pneumonitis due to food and vomit(J69.0)

Allergies	No Known Allergies	D.O.B.	11/20/1948	Physician	Wallace Liang
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Benign hypertension(I10.0), Presence of artificial hip(Z96.60), Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), P...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Pfeifer, Frederick (922131005539)	Admission Date	11/14/2023	Location	8 802 C
Last Care Plan Review Completed:		10/29/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none">• Alteration in skin integrity related to BRUISE to LEFT DORSUM Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN)		<ul style="list-style-type: none">• To promote intact skin integrity through healing of BRUISE to LEFT DORSUM Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN) Target Date: 12/11/2025	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Nancy Renaud (Resident) in decision making for treatment of bruise as skin issue. Revision on: 10/29/2025 Revision by: Kenya Mosely (RPN)• MONITORING: Utilize holistic perspective of continuous monitoring of BRUISE to LEFT DORSUM for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/29/2025 Revision by: Kenya Mosely (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: 10/29/2025 Revision by: Kenya Mosely (RPN)			
<ul style="list-style-type: none">• Increased risk for FALLS related to dx with syncope and psychotropic drug use, hx of falls (Oct. 23/25), unsteady gait. Revision on: 10/23/2025 Revision by: Kenya Mosely (RPN)		<ul style="list-style-type: none">• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	<ul style="list-style-type: none">• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC)• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment:(walker) Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)• FOOTWEAR: Ensure resident wears appropriate footwear for (transfers, ambulation). Revision on: 04/22/2023 Revision by: Jenny Liu (RAI Coord Back-up)• HIP PROTECTORS: Nancy wears hip protectors at all times to safeguard against injury. Report immediately to Registered Staff if not wearing. Resident refuse for wearing hip protector sometimes.Need monitoring if refusing to wear. Revision on: 06/13/2025 Revision by: Gurjit Kaur (RN)• 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, reaching and static 10 <div>PCA PCA PCA PCA</div> <div>D/E/N D/E/N</div>			
Allergies	Latex		D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)		Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025				



Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> Increased risk for FALLS related to dx with syncope and psychotropic drug use, hx of falls (Oct. 23/25), unsteady gait. Revision on: 10/23/2025 Revision by: Kenya Mosely (RPN)			reps, 10 seconds, sit to stands and squats 10 reps Revision on: 08/26/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) <ul style="list-style-type: none"> SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to prevent injuries. 			Registered Staff	
<ul style="list-style-type: none"> At-Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Rest/Sleep Patterns, Missing Family/Friends. ISE Score: 4/6 Revision on: 08/19/2025 Revision by: Megan Pipe (Recreation Aide)		<ul style="list-style-type: none"> Team members will support Nancy in decreasing social isolation by participating in activities of personal choice 5-10 times per month by the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite Nancy to programs of personal interest; Friendly/1:1 visits (emotional, intellectual, physical, social), arts & crafts - colour relaxation, discussion group, exercise groups, games, Calendar Club, Java Music Club, sensory stimulation, Snoezelen therapy, some spiritual programs, special events, TV programs, etc. Revision on: 01/16/2023 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage Nancy to engage in self-directed activities such as family/friends visits, listening to music (country), watching/listening to TV (HGTV), visiting with residents/team members, reading independently, etc. Revision on: 07/07/2020 Revision by: Shayna Lee Wonsch (Activation Manager) <ul style="list-style-type: none"> ASSISTANCE: Provide assistance/encouragement to get Nancy to scheduled activities; Walk with, Guide to, Cue Direction, Reminders, etc. Revision on: 12/10/2019 Revision by: Judy Woods (Activation aide) <ul style="list-style-type: none"> HELPFUL HINTS: Identify Helpful Hints to ease communication while providing care/interactions: Born in Windsor. Colour: purple & pink TV: HGTV			ACT	
Allergies	Latex			D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)			Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025					

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, Rest/Sleep Patterns, Missing Family/Friends. <p>ISE Score: 4/6 Revision on: 08/19/2025 Revision by: Megan Pipe (Recreation Aide)</p>			<p>Music: Trisha Yearwood, 93.5, country Revision on: 05/17/2022 Revision by: Shayna Lee Wonsch</p> <ul style="list-style-type: none"> ONE to ONE: Provide Nancy with individual visits for conversation, reading, reminiscing, electronic pet visits, manicures & hand massages, games on iPad (Millionaire), etc. <p>Revision on: 05/17/2022 Revision by: Shayna Lee Wonsch</p>		ACT	
<ul style="list-style-type: none"> Potential for PAIN and alteration in comfort level related to dx with Osteoporosis and Osteoarthritis, History of Right hip fracture, back pain. Most Current Pain Score is (2). <p>Revision on: 06/10/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<ul style="list-style-type: none"> Promote MDS Pain Score of 0 through to the next review. <p>Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025</p>	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with (Nancy)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. <p>Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)</p> <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 medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. 		Registered Staff	
<ul style="list-style-type: none"> Potential to experience alteration in fluid volume or episode of probable DEHYDRATION related to decreased fluid consumption <p>Revision on: 12/18/2024 Revision by: Danielle Loreto (RAI Coordinator)</p>		<ul style="list-style-type: none"> To promote fluid consumption and minimize risk for dehydration each day through to the next review date <p>Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025</p>	<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. <ul style="list-style-type: none"> VITAL SIGNS: Monitor vital signs as per MD/NP order. Notify MD of abnormal findings as noted. 		Registered Staff	Registered Staff
Allergies	Latex		D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)		Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> Potential to experience complications and side effects impacting quality of life related to use of anti-psychotic and antidepressant medications. Revision on: 12/18/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> PREFERENCE EVENINGS: Try to give medication on time not later than 20:00 per resident's request. Revision on: 06/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. 	Registered Staff	
<ul style="list-style-type: none"> COGNITIVE LOSS; alteration in thought processes (poor decision making) related to decision making Modified Independence. Revision on: 12/18/2024 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> Nancy will be supported to maintain cognitive function through the review date. Revision on: 06/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/11/2025	<ul style="list-style-type: none"> DECISION MAKING- Nancy requires assistance to make decisions when presented with a new situation or when something has changed. Team to provide information and answer questions she may have. Revision on: 12/18/2024 Revision by: Danielle Loreto (RAI Coordinator)		
<ul style="list-style-type: none"> Potential to experience alteration in MOOD as exhibited by hx of repetitive health complaints and sad, worried facial expression related to Dx with Multiple personality disorder. Revision on: 10/16/2023 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none"> Nancy will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	<ul style="list-style-type: none"> ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Nancy for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> RESIDENT STRENGTHS: Build on Nancy effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) <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: 03/08/2021 Revision by: Jenny Liu (RAI Coord Back-up)		

Allergies	Latex	D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre	Print Date	10/30/2025		
Resident	Renaud, Nancy (922131005314)	Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Subdural hemorrhage, GERD, Multiple personal disorder, Intracranial hemorrhage, Osteoporosis, B12 deficiency, Osteoarthritis, Asthma Syncope, Schizophrenia.</p> <p>Revision on: 06/20/2023</p> <p>Revision by: Elsie Calumpang (RN)</p>		<p>• Nancy will have ALL ADL care tasks met each day through the next review date.</p> <p>Revision on: 01/03/2025</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>Target Date: 12/11/2025</p>	<p>• BATHING: Nancy's bath days are Monday and Thursday in the day shift, requires Extensive assistance from one person once in the shower. refer to transferring. Nail care to be provided on shower/bath day.</p> <p>Revision on: 07/05/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>		PCA	
			<p>• BED MOBILITY: Nancy is able to turn and reposition herself.</p>		PCA	
			<p>When fatigued or pain is present 1 team member extensive assistance.</p> <p>Revision on: 06/10/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>			
			<p>• DRESSING: Nancy requires extensive assistance from one team member to dress her upper and lower body. She is able to participate throughout.</p> <p>Revision on: 06/10/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>		PCA	
			<p>• EATING: Nancy is Independent, requires set up only and eats on the floor dining room.</p> <p>Revision on: 12/22/2019</p> <p>Revision by: Qiufeng Liu (Registered Practical Nurse)</p>		PCA	
			<p>• LOCOMOTION: Walks with a walker independently.</p>		PCA	
			<p>She has a wheelchair that can be used when needed. She has expressed some fear in using it as she hit her leg when it was in use and cause a hematoma.</p> <p>Revision on: 09/03/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>			
			<p>• PERSONAL HYGIENE: Nancy is able to wash her face, hands, comb her hair, but requires extensive assistance from one person to provide peri-care.</p> <p>Revision on: 03/08/2021</p> <p>Revision by: Jenny Liu (RAI Coord Back-up)</p>		PCA	
			<p>• HAND HYGIENE: 1 staff to provide Reminder assistance to use hand sanitizer wipes for hand hygiene.</p> <p>Revision on: 08/19/2021</p> <p>Revision by: Chelsea Campbell-Wright (IPAC LEAD)</p>		PCA	
			<p>• TOILET USE: Nancy requires 1 team member to assist with her transfer on off the toilet however Nancy is able to transfer herself onto and off of the toilet on her own at times as well. Team member to help her clean, re-apply brief after.</p>		PCA	
Allergies	Latex		D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)		Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025				

Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025		Staff		
<ul style="list-style-type: none"> Expressed Wishes and Beliefs related to Nancy Medical Treatment and End of Life Care Revision on: 06/04/2021 Revision by: Jenny Liu (RAI Coord Back-up) 	<ul style="list-style-type: none"> To support and honor Nancy expressed wishes and beliefs through to the End of Life. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025 	<ul style="list-style-type: none"> CPR: DO NOT ATTEMPT CPR: Do not transfer to hospital, plan includes death at home - see PoET Individualized Summary Revision on: 12/18/2024 Revision by: Danielle Loreto (RAI Coordinator) 			
<ul style="list-style-type: none"> BOWEL INCONTINENCE Revision on: 03/10/2021 Revision by: Katie Wolters-Savo (RAI Coordinator) 	<ul style="list-style-type: none"> Nancy will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025 	<ul style="list-style-type: none"> BOWEL Continence level is Occasionally incontinent. Report change to level as noted. Revision on: 01/08/2024 Revision by: Jenny Liu (RAI Coord Back-up) BOWEL MOVEMENT: Monitor Nancy for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 01/23/2021 Revision by: Kenya Mosely (RPN) INCONTINENCE PRODUCT: Resident uses WHITE color brief per prevail sheet Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator) 	PCA		
<ul style="list-style-type: none"> Nancy Potential to experience alteration in RESPIRATORY FUNCTION related to Asthma. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) 	<ul style="list-style-type: none"> To treat and minimize signs/symptoms or complications associated with (Asthma) each day through to next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025 	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective of continuous monitoring of resident with Asthma for changes to health status and alteration or complications affecting respiratory function. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) OXYGEN: Administer Oxygen as per MD order. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) 			
<ul style="list-style-type: none"> Potential for altered bone density related to diagnosis of OSTEOPOROSIS. Revision on: 12/15/2020 	<ul style="list-style-type: none"> Potential for altered bone density related to diagnosis of 	<ul style="list-style-type: none"> MEDICATION: Administer medication for osteoporosis management. Monitor effectiveness and for side effects. Revision on: 12/15/2020 			
Allergies	Latex	D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)	Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Jenny Liu (RAI Coord Back-up)	OSTEOPOROSIS. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	Revision by: Jenny Liu (RAI Coord Back-up) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of osteoporosis for discomfort/ complications or changes to health status. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up)			
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of (Latex). Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up)	• Nancy will be protected from exposure to allergen each day through next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Latex for changes to health status and complications mortality. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) • ALLERGY ALERT: Nancy has ALLERGY to Latex. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up)			
• Strength Revision on: 09/15/2020 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• To improve the strength of B/L UE≤ from 3/5 to 3+/5 in 3 months. Revision on: 09/03/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/11/2025	• Nancy to perform strength exercises using 1-3lbs. wt for B/L UE and LE.,1set,10rps, 2-3/wk as tolerated, per rehab treatment. Revision on: 05/26/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA		
• Balance. Revision on: 09/15/2020 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• To improve the dynamic standing balance per Tinetti from 17 to 19 in next 3 months. Revision on: 03/03/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/11/2025	• Dynamic balance exercises in standing +1A,1set,10rps.,2-3/wk as tolerated, per rehab treatment. Revision on: 05/26/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA		
• Risk for/Impaired Skin Integrity r/t Thin fragile Skin. Revision on: 07/07/2020 Revision by: Shayna Lee Wonsch (Activation)	• To protect and maintain skin integrity each day through to the next review. Revision on: 01/03/2025	• 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		
Allergies	Latex	D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)	Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Manager)	Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025				
• URINARY INCONTINENCE. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)	• Nancy will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse) • URINARY Continence level is (Frequently incontinent). Report change to level as noted. Revision on: 01/23/2023 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: Resident uses WHITE color brief per prevail sheet Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator)	Registered Staff		
• Sleep Patterns. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)	• To promote adequate rest/sleep for Nancy based on identified sleep patterns/preferences each night through to the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• REST PATTERN: Preferred bedtime and usual wake time: stays in bed all of time except meal time. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse) • SLEEPWEAR: own P.J. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)	PCA		
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD) Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)	• To treat and/or minimize discomfort/ complications associated with GERD through to the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• COMMUNICATION: Involve/collaborate with (Nancy)/SDM in decision making for GERD Management. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse) • 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.	Registered Staff		
Allergies	Latex	D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)	Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			• MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.			Staff Registered Staff	
• Potential for altered hematologic symptoms or complications related to diagnosis of B12 deficiency. Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)		• To treat and/or minimize complications associated with B12 deficiency through to the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with ANEMIA for complications or changes to health status. • MEDICATION: Administer medication for ANEMIA as per MD Order. Monitor effectiveness and for side effects.			Registered Staff Registered Staff	
• Potential for pain, discomfort related to Dx of Osteoarthritis Revision on: 12/22/2019 Revision by: Qiufeng Liu (Registered Practical Nurse)		• To treat and minimize signs/symptoms or complications associated with (Osteoarthritis) through to the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• MEDICATION: Administer medication for management of Osteoarthritis as per MD order. Monitor effectiveness and for side effects. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up) • PAIN MANAGEMENT for Osteoarthritis prescribed and in place; refer to Pain Care Plan. Revision on: 12/15/2020 Revision by: Jenny Liu (RAI Coord Back-up)				
• SPIRITUAL BELIEFS: Nancy is of the Roman Catholic Faith. Revision on: 12/11/2019 Revision by: Judy Woods (Activation aide)		• To provide Nancy spiritual support as interested through to the next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025	• SPIRITUAL PROGRAMS: Encourage Nancy to attend spiritual programs of her choice including Church Services (Catholic), spiritual music, etc. Revision on: 07/07/2020 Revision by: Shayna Lee Wonsch (Activation Manager)			ACT	
Allergies	Latex			D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)			Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved							
• SPIRITUAL BELIEFS: Nancy is of the Roman Catholic Faith. Revision on: 12/11/2019 Revision by: Judy Woods (Activation aide)														
• Nutrition Risk Level (diet details)		<div>• Nancy will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 01/03/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/11/2025</div> <div>• Will weigh within realistic GWR 40-50 kg through to next review date. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/11/2025</div> <div>• Nancy will be adequately hydrated aeb drinking 100% of TFR: 1377 ml/day (30 ml/kg using 45.9 kg weight) through to next review date. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/11/2025</div>	<div>• Nancy has an INTOLERANCE to: milk (beverage), cream soups, ice cream, and yogurt. Reactions: bloating and upset stomach. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))</div> <div>• NUTRITION RISK: Nancy is MODERATE risk level. Revision on: 06/24/2024 Revision by: Sarah Schaeffer (RD)</div> <div>• DIET ORDER: Nancy will receive regular diet, regular texture Revision on: 03/04/2021 Revision by: Anna Slack (Registered Dietitian)</div> <div>• FLUID CONSISTENCY: Nancy drinks REGULAR/THIN liquids Revision on: 03/15/2023 Revision by: Anna Slack (Registered Dietitian)</div> <div>• FLUID TARGET: Encourage Nancy to drink a minimum of 1377 ml/day Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))</div> <div>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.</div> <div>• DINING INSTRUCTIONS: Puree soups only Cut food into small pieces Revision on: 09/22/2025 Revision by: Brittany Hyde (Registered Dietitian)</div> <div>• MEDPASS SUPPLEMENTS: 237 ml Boost Fruit Beverage TID Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))</div> <div>• HIGH FIBRE: Offer 200mL prune juice at breakfast daily. Revision on: 08/27/2025</div>					Dietitian (RD)	Diet Food Services Aide PCA Diet PCA	PCA	Dietary aide PCA	Registered Practical Nurse	PCA	Meals
Allergies	Latex			D.O.B.	04/04/1944	Physician	Wallace Liang							
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses													
Facility	Berkshire Care Centre					Print Date	10/30/2025							
Resident	Renaud, Nancy (922131005314)			Admission Date	05/29/2025	Location	8 824 C							
Last Care Plan Review Completed:		09/11/2025												

Care Plan Report


Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details)		Revision by: Brittany Hyde (Registered Dietitian)		

Diagnosis

Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Nontraumatic subdural haemorrhage(I62.0), Heat syncope(T67.1), Paranoid personality disorder(F60.0), Intracranial haemorrhage (nontraumatic), unspecified(I62.9), Other and unspecified intestinal obstruction(K56.6), Candidiasis, unspecified(B37.9), Unspecified fracture of neck of femur, closed(S72.090), Schizophrenia, unspecified(F20.9), Pneumonia, unspecified(J18.9)

Allergies	Latex	D.O.B.	04/04/1944	Physician	Wallace Liang
Diagnosis	Osteoporosis, unspecified(M81.9), Fibromyalgia(M79.7), Primary generalized (osteo)arthrosis(M15.0), Vitamin B12 deficiency anaemia, unspecified(D51.9), Gastro-oesophageal reflux disease without o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Renaud, Nancy (922131005314)	Admission Date	05/29/2025	Location	8 824 C
Last Care Plan Review Completed:		09/11/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE Score: 3/6 Revision on: 10/30/2025 Revision by: Laura Morris (Restorative Care Aide)</p>	<p>• Ronald will be supported to maintain participation in activities 15-20 times per month by the next review date Revision on: 10/30/2025 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/25/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; friendly/1: 1 visits, comedy corner, Resident Council & Food Committee, games - Bingo, trivia, discussion groups, exercise fun & fitness, patio programs, Happy Hour, physical games, special events, TV programs, tuck shop, etc. Revision on: 05/28/2025 Revision by: Megan Pipe (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching TV (sports - baseball, soccer, basketball, CBC news), listening to music (classical, country, jazz), smoking on the patio, etc. Revision on: 10/29/2020 Revision by: Mitchell Atkinson (Activities/Rec Therapy)</p> <p>• ASSISTANCE: Provide assistance/encouragement to get him to scheduled activities - Reminders, etc. Revision on: 10/29/2020 Revision by: Mitchell Atkinson (Activities/Rec Therapy)</p> <p>• ONE to ONE: Provide him with individual visits for conversations, videos (racing), games (word puzzles), etc. Revision on: 10/29/2020 Revision by: Mitchell Atkinson (Activities/Rec Therapy)</p>	<p>ACT</p> <p>ACT</p> <p>ACT</p>			
<p>• Potential for Acute, Persistent PAIN and alteration in comfort level r/t Peripheral Neuropathy, past falls, Pain to Left Wrist, All over body, headache, back pain, stomach ache. Pain score is 1. Revision on: 10/29/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• Promote MDS Pain Score of 0 through to the next review. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026</p>	<p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 03/18/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p>	<p>RN Registered Practical Nurse</p> <p>Registered Practical Nurse RN</p>			
<p>• Alteration in skin integrity with risk for infection or complications related to Abscess on the upper left stomach Revision on: 10/29/2025</p>	<p>• To promote optimal healing of SKIN TEAR within Abscess on the upper left stomach #16 until the next review date.</p>	<p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Abscess on the upper left stomach #16 for changes to health status and alteration or complications affecting skin integrity. Revision on: 08/29/2025 Revision by: Jane Del Rosario (RPN)</p>				
Allergies	Codeine, Penicillins	D.O.B.	06/20/1960	Physician	Wallace Liang	
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Riehl, Ronald (922131005083)	Admission Date	01/28/2019	Location	8 819 B	
Last Care Plan Review Completed:		08/21/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Jenny Liu (RAI Coordinator)	Revision on: 08/29/2025 Revision by: Jane Del Rosario (RPN) Target Date: 01/25/2026	<ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment as per MD Order. Revision on: 08/31/2025 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: 08/29/2025 Revision by: Jane Del Rosario (RPN)			
<ul style="list-style-type: none"> • Potential for gastric discomfort/complications related to Gastroenteritis (malaise, episodes of emesis, LBMs). Onset date: 10/24/25 Revision on: 10/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> • To treat and/or minimize complications associated with Gastroenteritis through to target date. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/25/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of gastritis or changes to health status. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> • MEDICATION: Administer medication for gastritis, VOMITING as per MD order. Monitor effectiveness and for side effects. Revision on: 10/25/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of hx of SEXUAL, refuse care, grabbed and rubbed buttocks of staff member related to Developmental Delay Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> • To decrease episodic frequency of (sexual) by next review date. ABS score will be less than (state current ABS score). Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk. <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 06/22/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • RESISTANCE to Care Need: If Ronald is refusing to (bathe) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 06/22/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • SEXUAL Behaviour: Ronald demonstrates habit of unwanted (squeeze, touching, grabbing, rubbed, etc) of others (breasts, buttocks). (limit unsupervised time with 	Registered Staff		
Allergies	Codeine, Penicillins	D.O.B.	06/20/1960	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)	Admission Date	01/28/2019	Location	8 819 B
Last Care Plan Review Completed:		08/21/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of hx of SEXUAL, refuse care, grabbed and rubbed buttocks of staff member related to Developmental Delay</div> <div>Revision on: 08/21/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>opposite sex, sit arms length away from others in activity, etc.). Report episode to Registered Staff.</div> <div>Revision on: 12/24/2023</div> <div>Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects.</div> <div>Revision on: 03/18/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	Registered Practical Nurse RN			
<div>• Increased risk for FALLS related to r/t Impaired Mobility and history of falls.</div> <div>Revision on: 06/01/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div>	<div>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.</div> <div>Revision on: 05/30/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>Target Date: 01/25/2026</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: 11/16/2022</div> <div>Revision by: Meghan Sears (ADOC)</div> <div>• BED: use high/low bed to lower risk for injury.</div> <div>Revision on: 12/20/2023</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• FOOTWEAR: Ensure Ronald is wearing non-slip footwear worn prior to transfer</div> <div>Revision on: 03/18/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>	PCA PCA PCA	D/E/N		
<div>• SPIRITUAL BELIEFS: Ronald is spiritual and does attend services of multiple Christian faiths.</div> <div>Revision on: 05/28/2025</div> <div>Revision by: Megan Pipe (Recreation Aide)</div>	<div>• To provide Ronald spiritual support as interested through to the next review date.</div> <div>Revision on: 05/30/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>Target Date: 01/25/2026</div>	<div>• SPIRITUAL PROGRAMS: Encourage him to attend spiritual programs of his choice including Hymn Sing, Church Service, spiritual discussion, bible study, etc.</div>				
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Mobility, HTN, DM, Developmental delay and peripheral neuropathy.</div> <div>Revision on: 09/25/2022</div>	<div>• Ronald will maintain current self sufficiency in ADL abilities through the review date.</div> <div>Revision on: 05/30/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div>	<div>• BATHING: Ronalds bath days will be Wednesday and Sunday afternoons</div> <div>Nail care to be provided after shower/bath.</div> <div>Ronald requires maximal assistance for his showering. He will often refuse and requires maximal assistance for his bed bath.</div>	PCA			
Allergies	Codeine, Penicillins		D.O.B.	06/20/1960	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)		Admission Date	01/28/2019	Location	8 819 B
Last Care Plan Review Completed:		08/21/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
Revision by: Jenny Liu (RAI Coord Back-up)		Coordinator) Target Date: 01/25/2026	Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Maximal Assist. Roland requires two team members to assist with turning and repositioning him in bed. PCA Revision on: 06/01/2025 Revision by: Jenny Liu (RAI Coordinator) • DRESSING: Maximal Assist: Ronald is able to guide his arm and legs through the clothes, but requires weight bearing assistance from two team members to dress his lower/upper body. PCA Revision on: 06/01/2025 Revision by: Jenny Liu (RAI Coordinator) • EATING: Ronald eats independently in the main floor dining room with set up assistance. PCA Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Ronald is able to wheel his wheelchair by using his two hands, may require one staff member to push him for long distance. PCA Revision on: 09/25/2022 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL HYGIENE: Maximal Assist: Ronald is able to wash his hands, face or comb his hair. but requires maximal assistance from team members to provide peri-care due to incontinence or shaving. PCA Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • HAND HYGIENE: 1 staff to provide limited assistance to use hand sanitizing wipes for hand hygiene. PCA Revision on: 08/19/2021 Revision by: Chelsea Campbell-Wright (IPAC LEAD) • TOILET USE: Ronald is able to help with transferring on/off the toilet with SARA lift and requires extensive assistance from 2 team members to re-apply brief, cleanses or adjust the clothes. PCA Revision on: 12/20/2023 Revision by: Jenny Liu (RAI Coord Back-up) • TRANSFERRING: Riehi requires Sara lift with two team members to assist to transfer. PCA					
Allergies	Codeine, Penicillins			D.O.B.	06/20/1960		Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre						Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)			Admission Date	01/28/2019		Location	8 19 B
Last Care Plan Review Completed:		08/21/2025						

Care Plan Report

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<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Mobility, HTN, DM, Developmental delay and peripheral neuropathy.</div> <div>Revision on: 09/25/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div>		<div>Revision on: 12/22/2023</div> <div>Revision by: Baljinder Sidhu (RPN)</div> <div>• TRANSFER LIFT/SLING: large sling needed for transfer.</div> <div>Revision on: 09/25/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• ORAL CARE: Ronald is Independent with his Oral Care, he does need reminders to PCA ensure completion. Staff will assist as needed.</div> <div>Revision on: 01/08/2020</div> <div>Revision by: Joe Albano (RAI Coordinator)</div> <div>• FOOT CARE: Footcare to be completed by registered staff on shower days and PRN. Report long toe nails or other abnormalities as noted.</div> <div>Revision on: 01/25/2023</div> <div>Revision by: Katherine Arca (RPN)</div> <div>• SHAVING - Ronald will be shaved on his bath days and as needed.</div> <div>Revision on: 11/16/2022</div> <div>Revision by: Meghan Sears (ADOC)</div>	PCA	D		
<div>• Potential for CONSTIPATION related to decreased mobility.</div> <div>Revision on: 04/04/2022</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div>	<div>• Ronald will have regular soft formed bowel movements every 1-2 days through to the next review.</div> <div>Revision on: 05/30/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>Target Date: 01/25/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of Ronald for constipation management and changes to health status and symptoms/ complications of constipation.</div> <div>Revision on: 04/04/2022</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• BOWEL PROTOCOL: In place as per MD order</div>	Registered Staff			
<div>• Potential for BOWEL INCONTINENCE related to Developmental delay and impaired mobility.</div> <div>Revision on: 12/20/2021</div> <div>Revision by: Mitchell Atkinson (Recreation Aide)</div>	<div>• Ronald will receive support to use toilet and promote optimal bowel continence each day through to the next review.</div> <div>Revision on: 05/30/2025</div>	<div>• BOWEL Continence level is (Frequently Incontinent). Report change to level as noted.</div> <div>Revision on: 09/25/2022</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and</div>	PCA			
Allergies	Codeine, Penicillins		D.O.B.	06/20/1960	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)		Admission Date	01/28/2019	Location	8 819 B
Last Care Plan Review Completed:		08/21/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	document number of occurrences, size and consistency. Revision on: 10/08/2021 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: resident uses Beige color brief per prevail sheet. Revision on: 02/28/2025 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	
• Expressed Wishes and Beliefs related to Ronald Medical Treatment and End of Life Care Revision on: 01/22/2021 Revision by: Jenny Liu (RAI Coord Back-up)	• To support and honor Ronald expressed wishes and beliefs through to the End of Life. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• CPR: Ronald wishes to have CPR and TRANSFER to hospital Revision on: 12/19/2022 Revision by: Kenya Mosely (RPN)		
• Risk for/Impaired SKIN INTEGRITY related to Incontinence, Impaired Mobility Revision on: 08/10/2020 Revision by: Joe Albano (RAI Coordinator)	• To protect and maintain skin integrity each day through to the next review. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. • EQUIPMENT: Ronald requires Roho cushion to offload pressure. Revision on: 02/12/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • POSITIONING: Turn, reposition at least every 2 hours or when in bed/wheelchair as per Ronalds preference to offload pressure. Revision on: 10/28/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA PCA PCA	Q2h
• Altered Communication r/t Developmental Delay Revision on: 05/02/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	• Ronald will be able to make basic needs known on a daily basis through the review date Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• PRIMARY LANGUAGE: Ronald primary language is English. He is able to speak/understand English. Revision on: 01/22/2021 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases. Revision on: 01/22/2021 Revision by: Jenny Liu (RAI Coord Back-up)		
• Cognitive Loss or alteration in thought	• Ronald will maintain current	• ORIENTATION: Gently reorient to (person, place, time) as needed when Ronald is		
Allergies	Codeine, Penicillins	D.O.B.	06/20/1960	Physician Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre	Print Date	10/30/2025	
Resident	Riehl, Ronald (922131005083)	Admission Date	01/28/2019	Location 8 819 B
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
processes r/t Developmental Delay Revision on: 05/02/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	cognitive abilities through the review date. Current CPS is (3/6) Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	feeling lost or in confused state. Revision on: 09/25/2022 Revision by: Jenny Liu (RAI Coord Back-up) • PERSONAL ROUTINE: Provide consistency in care routine and activities Revision on: 09/25/2022 Revision by: Jenny Liu (RAI Coord Back-up)	PCA	
• 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: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• COMMUNICATION: Involve/collaborate with Ronald/SDM in decision making of Cardiac Care Management for HTN. Revision on: 01/01/2020 Revision by: Qiufeng Liu (Registered Practical Nurse) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with HTN for changes to health status and alteration or complications affecting cardiac function. Revision on: 01/01/2020 Revision by: Qiufeng Liu (Registered Practical Nurse) • OXYGEN: Administer Oxygen as per MD order. Revision on: 01/01/2020 Revision by: Qiufeng Liu (Registered Practical Nurse) • BP MONITORING: Monitor BLOOD PRESSURE as ordered. Notify MD of abnormalities as needed. Revision on: 01/01/2020 Revision by: Qiufeng Liu (Registered Practical Nurse)	Registered Staff Registered Staff Registered Practical Nurse RN Registered Staff	
• ALLERGIC to (Codeine, Penicillins) Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)	• Ronald will remain free of allergen through next review date. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• Staff to remain aware of allergen (Codeine, Penicillins) and prevent contact with. Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Ronald Allergy to Codeine and Penicillins and minimize risk for exposure to allergen. Revision on: 04/16/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESCUE MEDICATION: Administer EPINEPHRINE as per MD/NP Order. Monitor effectiveness and immediately notify MD/NP of use.	All Registered Staff	

Allergies	Codeine, Penicillins	D.O.B.	06/20/1960	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)	Admission Date	01/28/2019	Location	8 819 B
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Focus		Goal	Interventions			Position	Freq/Resolved
• Sleep Patterns for Ronald Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)		• To meet Ronalds personal preferences for sleep patterns through the next review date. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• Usual bed time (2000-2100hrs) and usual wake time (0600-0700hrs) Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator) • Preferred night attire Ronald wears his bed clothes each night Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)			PCA	
						PCA	
• Potential for hyper/hypoglycemia, other complications related to Diabetes Mellitus.		• Will remain free of s/sx or complications related to diabetes through review date. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• Assess for signs and symptoms of hyperglycemia such as extreme thirst, frequent urination, abdominal pain, fatigue, blurred vision, shallow rapid breathing. Notify MD if occurs. • CBG MONITORING: Monitor CAPILLARY BLOOD GLUCOSE (CBG) as per MD order. Revision on: 01/22/2021 Revision by: Jenny Liu (RAI Coord Back-up)			Registered Staff	
• Urinary Incontinence r/t decreased mobility Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)		• Ronald will maintain current level of bladder function through the review date. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level Revision on: 08/21/2025 Revision by: Danielle Loreto (RAI Coordinator) • URINARY Continence level is (TOTAL Incontinent). Report change to level as noted. Revision on: 01/22/2021 Revision by: Jenny Liu (RAI Coord Back-up) • INCONTINENCE PRODUCT: resident uses Beige color brief per prevail sheet. Revision on: 02/28/2025 Revision by: Jenny Liu (RAI Coord Back-up)			PCA PCA	
• Nutrition Risk Level (diet details)		• Ronald will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026	• NUTRITION RISK: Ronald is at moderate nutritional risk. Revision on: 05/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Ronald will receive regular diet, regular texture. Revision on: 07/08/2021 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Ronald drinks REGULAR/THIN Level 0 Fluids.			Dietitian (RD) Diet Food Services Aide PCA Diet	
Allergies	Codeine, Penicillins		D.O.B.	06/20/1960	Physician	Wallace Liang	
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)		Admission Date	01/28/2019	Location	8 819 B	
Last Care Plan Review Completed:		08/21/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	<ul style="list-style-type: none"> • Will weigh within realistic GWR of 110-120 kg through to next review date. Revision on: 05/30/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/25/2026 • Ronald will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2500 ml/day (22 ml/kg using 113.4 kg weight) through to next review date. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/25/2026 	<p>Revision on: 04/27/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)</p> <ul style="list-style-type: none"> • FLUID TARGET: Encourage Ronald to drink a minimum of 2000 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. Revision on: 12/23/2021 Revision by: Anna Slack (Registered Dietitian) • FOOD ALLERGY/INTOLERANCE: regular cow's milk. Reactions to this beverage: diarrhea. Provide Lactaid milk only. Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LABELLED SNACK: Ronald receives a 355 ml can of diet gingerale at PM snack daily to support hydration Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIABETIC CARE: Encourage Ronald to drink diabetic juice in place of regular juice or dilute regular juice with 50% water. Encourage fruit for dessert or half portion of baked good dessert. Sweetener for coffee/tea. Limit Lactaid milk to 200 ml at each meal. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) 	<p>PCA</p> <p>PCA</p> <p>Dietary aide PCA</p> <p>PCA Restorative Care Aide</p> <p>PCA</p> <p>PCA</p>	<p></p> <p></p> <p></p> <p></p> <p>D/E</p>

Allergies	Codeine, Penicillins	D.O.B.	06/20/1960	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)	Admission Date	01/28/2019	Location	8 819 B
Last Care Plan Review Completed:		08/21/2025			

Care Plan Report


Diagnosis

Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90.0), Need for assistance due to reduced mobility(Z74.0), Resistance to methicillin(U82.1), Resistance to vancomycin(U83.0), Rash and other nonspecific skin eruption(R21)

Allergies	Codeine, Penicillins	D.O.B.	06/20/1960	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Other specified diabetes mellitus without (mention of) complication(E13.9), Mixed specific developmental disorders(F83), Idiopathic peripheral autonomic neuropathy(G90...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Riehl, Ronald (922131005083)	Admission Date	01/28/2019	Location	8 819 B
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<ul style="list-style-type: none"> Increased risk for FALLS related to impaired mobility, right sided hemiplegia, right above the knee amputation, History of Falls (10/01/25). Revision on: 10/01/2025 Revision by: Kenya Mosely (RPN)	<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: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> CALL BELL: Place call bell within Daniel's reach (left side), check that it is in working order and remind/encourage to use it. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC) <ul style="list-style-type: none"> FOOTWEAR: Ensure resident wears appropriate footwear to his left foot for transfers. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA	D/E/N
<ul style="list-style-type: none"> At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to disinterest. ISE Score: 4/6 Revision on: 08/07/2025 Revision by: Megan Pipe (Recreation Aide)	<ul style="list-style-type: none"> To support Daniel's Psycho-Social well being through to the next review Revision on: 10/01/2025 Revision by: Megan Pipe (Recreation Aide) Target Date: 01/13/2026	<ul style="list-style-type: none"> STRUCTURED ACTIVITIES: Invite him to programs of personal interest; Friendly/1: 1 visits, crafts, comedy corner, discussion group, exercise, games - board games, physical games & bingo, Calendar Club, library cart, reminiscing - reflections, sensory - aromatherapy & Snoezelen therapy, Happy Hour, tea social, hymn sing, TV - matinee movie, etc. Revision on: 04/16/2024 Revision by: Laura Morris (Restorative Care Aide) <ul style="list-style-type: none"> SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, listening to music, visiting with residents/team members, patio socializing/enjoying outdoors, etc. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none"> ONE to ONE: Provide him with individual visits for conversation, reading, reminiscing, music, sports talk, humor, etc. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide) <ul style="list-style-type: none"> SOCIAL INTERACTION: Promote the opportunity for Daniel to make friendships and sit with friends during activities. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide)	ACT	
<ul style="list-style-type: none"> Potential for persistent PAIN and alteration in comfort level related to Chronic upper right quadrant pain, right arm pain. Most Current RAI Pain Score is 	<ul style="list-style-type: none"> Promote RAI Pain Score of 0 through to the next review. Revision on: 07/21/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control. 	RN Registered Practical Nurse	

Allergies	Codeine	D.O.B.	02/17/1963	Physician	Wallace Liang		
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date		10/30/2025
Resident	Robinson, Daniel (922131005450)	Admission Date	02/14/2022	Location	8 801 B		

Last Care Plan Review Completed:

10/13/2025

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
0. Revision on: 07/21/2025 Revision by: Jenny Liu (RAI Coordinator)		Target Date: 01/13/2026	<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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		Registered Practical Nurse RN	
<ul style="list-style-type: none"> • Potential for Expressive Behaviour of VERBAL abusive nature (swearing at the team and other residents, hx of tried to run over staff's toes), resist care (shower/meals) related to stroke, delusional disorder, Depression. Revision on: 01/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> • To decrease the episodic frequency of resist care by next review date. ABS score will be less than (1). Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Daniel for indications to change in or for escalating expressive behaviour risk. Revision on: 01/23/2024 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • TRIGGERS leading to PHYSICAL (specify; Hitting, using electric wheelchair as a weapon) as expression of behaviour include anger, frustration, not being able to smoke. Revision on: 04/03/2022 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> • PHYSICAL Behaviour: If Daniel 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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> • TRIGGERS leading to VERBAL (yelling, screaming) as expression of behaviour include (loss of control, frustration, limitation in self expression, etc.) Revision on: 05/05/2023 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> • VERBAL Behaviour: If Daniel 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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe, refusal to eat) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 05/05/2023 Revision by: Jenny Liu (RAI Coord Back-up)			
Allergies	Codeine		D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)		Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:		10/13/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of VERBAL abusive nature (swearing at the team and other residents, hx of tried to run over staff's toes), resist care (shower/meals) related to stroke, delusional disorder, Depression. Revision on: 01/23/2024 Revision by: Jenny Liu (RAI Coord Back-up)</p>		<p>• RESISTANCE to Care Need: If Daniel is refusing to bathe, change clothes, take medications, eat, etc. re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• MEDICATION: Administer medication for therapeutic treatment as per MD Order. Monitor effectiveness and for side effects. Revision on: 05/20/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction) Verbal: Yelling, swearing, calling others names Triggers: Frustration, anger, limited communication Recommendations: Try to resolve concerns, validate the resident's feelings The resident enjoys going outside to smoke and socialize with other residents Revision on: 09/16/2024 Revision by: Leslie Meloche (Recreation Aide)</p>	Registered Practical Nurse RN		
<p>• Potential to experience alteration in MOOD related to Diagnosis with Depression, Delusional disorder. Revision on: 05/05/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p>	<p>• Daniel will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p>	<p>• COMMUNICATION: Involve/collaborate with Daniel(SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Daniel for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• RESIDENT STRENGTHS: Build on Daniel effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 02/27/2022</p>			
Allergies	Codeine	D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)	Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:		10/13/2025			

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential to experience alteration in MOOD related to Diagnosis with Depression, Delusional disorder. Revision on: 05/05/2023 Revision by: Jenny Liu (RAI Coord Back-up)			Revision by: Jenny Liu (RAI Coord Back-up)			
• COGNITIVE LOSS; alteration in thought processes (memory loss, poor judgement, etc.) related to Stroke, Delusional disorder. Revision on: 02/10/2023 Revision by: Jenny Liu (RAI Coord Back-up)		• Daniel will be supported to maintain cognitive function through the review date. Current CPS is (3) Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Daniel is feeling lost or in confused state. Revision on: 02/10/2023 Revision by: Jenny Liu (RAI Coord Back-up)			
• Sleep Patterns Revision on: 02/10/2023 Revision by: Jenny Liu (RAI Coord Back-up)		• To promote adequate rest/sleep for Daniel based on identified sleep patterns/preferences each night through to the next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• PREFERENCE: Daniel prefers to wake up around 0500 and go to bed around approximately 1900hrs. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • SLEEPWEAR: Daniel prefers to wear regular clothes. Revision on: 11/11/2022 Revision by: Jenny Liu (RAI Coord Back-up) PCA			
• Daniel is experiencing Hepatitis C (admission paperwork confirmed). Revision on: 05/20/2022 Revision by: Jenny Liu (RAI Coord Back-up)		• To lower risk of infection and prevent transmission of identified Antibiotic Resistant Organism through to the next review.	• MONITORING: Utilize holistic perspective of monitoring Daniel for signs/symptoms of secondary infection, overall health condition, etc Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • PPE PRECAUTIONS: Precaution identified as CONTACT for Hepatitis C and Personal			
Allergies	Codeine		D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)		Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:		10/13/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	requires use of the following PPEs (specify; Gloves, Gown, Mask, Faceshield, Goggles, N-95 Mask, etc. when providing direct care, handling soiled clothes and linens, disposing of incontinent product, etc. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	Support Workers			
• SPIRITUAL BELIEFS: Daniel is of the Catholic Faith. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide)	• To provide Daniel spiritual support as interested through to the next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• SPIRITUAL PROGRAMS: Encourage him to attend spiritual programs of his choice including; Hymn Sing, Catholic Mass, spiritual discussion, etc. Revision on: 02/28/2022 Revision by: Mitchell Atkinson (Recreation Aide)	ACT			
• Potential for bruising, bleeding, clotting or other complications related to use of (Anti-platelet) medication. Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up)	• To monitor for bleeding and minimize complications related to use of (Plavix) through the review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• COMMUNICATION: Involve/collaborate with Daniel/SDM in decision making and health teaching of Anti-platelet medication use. Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up) • BLEEDING ALERT: Notify nurse immediately if Daniel is bleeding (noted blood in urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.	PCA Registered Staff			
• Daniel has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 02/24/2022 Revision by: Shayna Lee Wonsch	• Daniel will be safe when choosing to smoke through to the next review Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• COMMUNICATION: Involve Daniel 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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) • SMOKING CONTRACT: Daniel 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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	Social Worker Social Worker Administrator			
• Potential to experience a ALLERGY	• Daniel will be protected from	• ALLERGY ALERT: Daniel has ALLERGY to Codeine. Prevent contact with and				
Allergies	Codeine		D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)		Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:		10/13/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
related to allergy of Codiene. Revision on: 02/17/2022 Revision by: Shayna Lee Wonsch		exposure to allergen each day through next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	report if symptoms noted. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)				
• Nutrition Risk Level		• Daniel will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026 • Will weigh within realistic weight range 55-65 kg through to next review date. Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/13/2026 • Daniel will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (26 ml/kg using 56.7 kg weight) through to next review date. Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/13/2026	• LABELLED SNACK PM: Cheese and crackers (Mon/Wed/Fri/Sun) Ice cream cup (Tues/Thurs/Sat) Revision on: 05/29/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Daniel is moderate risk level. Revision on: 04/14/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Daniel will receive Regular diet, Regular texture Revision on: 02/16/2022 Revision by: Stephanie Moore (FSM - Food Services Manager) • FLUID CONSISTENCY: Daniel drinks REGULAR/THIN Level 0 Fluids. Revision on: 02/16/2022 Revision by: Stephanie Moore (FSM - Food Services Manager) • FLUID TARGET: Encourage Daniel to drink a minimum of 1200 ml/day Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • FOOD PREFERENCES: - Offer double portions of protein at meals - Staff prepare peanut butter sandwiches for him when he requests (e.g., evening snack) Revision on: 05/29/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 180 ml Resource 2.0 once daily with 0800 medpass			PCA Registered Practical Nurse RN Dietitian (RD) Diet Food Services Aide PCA Diet PCA PCA Dietary aide PCA PCA	D
Allergies	Codeine		D.O.B.	02/17/1963	Physician	Wallace Liang	
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Robinson, Daniel (922131005450)		Admission Date	02/14/2022	Location	8 801 B	
Last Care Plan Review Completed:		10/13/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> • Nutrition Risk Level 		Revision on: 08/19/2025 Revision by: Holly Laasanen (Dietitian (RD)) <ul style="list-style-type: none"> • LABELLED SNACK: Daniel receives 1 can of gingerale at PM nourishment pass Revision on: 09/23/2024 Revision by: Anika Dhalla (Dietitian (RD))	PCA		
<ul style="list-style-type: none"> • Potential to experience alteration in CARDIAC FUNCTION related to; history of stroke, Hemiplegia Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> • To treat and minimize signs/symptoms or complications associated with history of stroke/hemiplegia through to the next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of Daniel with history of stroke for changes to health status and alteration or complications affecting cardiac function. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> • Potential to experience complications and side effects impacting quality of life related to use of use of anti-psychotic medications, etc. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	<ul style="list-style-type: none"> • To monitor effectiveness and for side effects of medication used each day through to the next review date Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of Daniel using anti-psychotic medication for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed. 	Registered Staff		
<ul style="list-style-type: none"> • Potential for CONSTIPATION related to 	<ul style="list-style-type: none"> • To minimize the potential for 	<ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident for 	Registered		
Allergies	Codeine	D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)	Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:	10/13/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
daily use of medication with binding effect, decreased mobility, etc. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	episodes and complications of constipation through to the next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	constipation management and changes to health status and symptoms/ complications of constipation. • NUTRITION increased fibre intervention in place. See Nutrition Care Plan. • BOWEL PROTOCOL: In place as per MD order	Staff Diet Registered Staff Registered Staff	
• BOWEL Continence - Daniel is continent and has self recognition of urge to defecate. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Daniel to remain continent of bowels through next review date Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted. • SELF TOILETING: Daniel 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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA PCA	
• URINARY Continence - Daniel is continent and has self recognition of urge to void. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	• Daniel will maintain continence level through next review date Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• URINARY Continence Level is: CONTINENT • SELF TOILETING: Daniel toilets self. Each shift ask if he has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA PCA	
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To protect and maintain skin integrity each day through to the next review. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator)	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.	PCA	
Allergies	Codeine		D.O.B.	02/17/1963
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses		Physician	Wallace Liang
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)	Admission Date	02/14/2022	Location 8 801 B
Last Care Plan Review Completed:		10/13/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Coordinator) Target Date: 01/13/2026				
<ul style="list-style-type: none"> Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, related to Expressive Aphasia secondary to stroke. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Daniel will be able to make basic needs known each day through to the review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> COMMUNICATION: Involve/collaborate with Daniel for decision making about strategies needed to support effective communication. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <ul style="list-style-type: none"> COMMUNICATION DEVICE: Daniel is able to use one worded answers and use his left hand to signal and draw what he is trying to communicate. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator) <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: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)			
<ul style="list-style-type: none"> Altered ability to complete Activities of Daily Living (ADLs) related to Right sided hemiplegia, Stroke, Acute Hepatitis C, Depression, Chronic Constipation, Delusional Disorder, Chronic Pain to right upper quadrant, right above the knee amputation. Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> Daniel will have ALL ADL care tasks met each day through the next review date. Revision on: 11/05/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> BATHING: Daniel prefers to have a shower. His shower days are Sunday and Thursday evening shift. Daniel is able to wash himself with set up/supervision from team members only. Often he refuses his showers Nail care to be provided on shower/bath day. Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> BED MOBILITY: Daniel is capable of turning and repositioning himself with no assist. Revision on: 02/06/2023 Revision by: Elsie Calumpang (RN) <ul style="list-style-type: none"> DRESSING: Daniel is capable of dressing himself from head to toe without any assistance from staff. May requires more assistance at times. Revision on: 01/21/2025 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none"> EATING: Daniel is able to eat independently without any assistance from the staff. He eats in the floor dining room. Revision on: 07/21/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> LOCOMOTION: Daniel uses a electric wheelchair. He is capable of operating it independently on and off the unit. 		PCA	PCA
Allergies	Codeine		D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)		Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:		10/13/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<div>Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• PERSONAL HYGIENE: Independent. Daniel is able to wash his face, hand, oral care and peri-care. but may require one staff to shave him due to cutting himself all the time with razor.</div> <div>Revision on: 02/10/2023 Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• HAND HYGIENE: 1 staff to provide REMINDERS to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene.</div> <div>Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• TOILET USE: Daniel is capable of transferring himself onto and off of the toilet without assistance or oversight from the team. He utilizes a urinal for voiding as well and does require one team member to assist with emptying it.</div> <div>Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• TRANSFERRING: Independent. Daniel is capable of transferring himself from a sit to stand position without assistance or oversight from the team.</div> <div>Revision on: 02/14/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• ORAL CARE: Daniel has no teeth remaining and doesn't wear a full upper and lower denture (not fit per resident) and is capable of brushing and storing his own dentures independently without assistance or oversight from the team.</div> <div>Revision on: 02/27/2022 Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• SHAVING - Daniel prefers to have staff/Hairdresser shave him as needed due to hemiplegia.</div> <div>Revision on: 09/12/2024 Revision by: Kenya Mosely (RPN)</div>	PCA 	

Care Plan Report

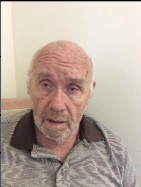
Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 01/13/2026			

Diagnosis

Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9), Constipation(K59.0), Delusional disorder(F22.0), Other chronic pain(R52.2), Traumatic amputation at level between hip and knee(S78.1)

Allergies	Codeine	D.O.B.	02/17/1963	Physician	Wallace Liang
Diagnosis	Hemiplegia of unspecified type of unspecified [unilateral] side(G81.99), Stroke, not specified as haemorrhage or infarction(I64), Acute hepatitis C(B17.1), Depressive episode, unspecified(F32.9),...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Robinson, Daniel (922131005450)	Admission Date	02/14/2022	Location	8 801 B
Last Care Plan Review Completed:		10/13/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• Potential for persistent PAIN and alteration in comfort level related to Severe Lumbar Disc Disease, Pain to right leg and knee. Most Current RAI Pain Score is 0/3.</p> <p>Revision on: 07/13/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• Promote MDS Pain Score of 0 through to the next review.</p> <p>Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p>	<p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</p> <p>Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p>	<p>RN Registered Practical Nurse</p> <p>RN Registered Practical Nurse RN</p>			
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE Score: 6/6 Revision on: 07/06/2025 Revision by: Laura Morris (Restorative Care Aide)</p>	<p>• Scotty will be supported to maintain participation in activities 30-45 times per month by the next review date.</p> <p>Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; friendly/1:1 visits, physical games, games - Bingo & trivia, comedy corner, exercise groups, Happy Hour, music programs, Montessori, patio time, reminiscing groups, TV programs, outings, special events, etc.</p> <p>Revision on: 02/09/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, listening to music/radio, visiting with residents/team members, etc.</p> <p>Revision on: 09/04/2023 Revision by: Mitchell Atkinson (Recreation Aide)</p> <p>• ONE to ONE: Provide him with individual visits for conversation, reading, reminiscing, music, humor, etc.</p> <p>Revision on: 09/04/2023 Revision by: Mitchell Atkinson (Recreation Aide)</p>				
<p>• Potential for Expressive Behaviour of VERBAL nature related to Verbal aggression, History of hallucinations of train in his home, Agitation, Restlessness, Sexually inappropriate expressions, physical expressions, refuse care and wandering.</p> <p>Revision on: 04/20/2025 Revision by: Jenny Liu (RAI Coordinator)</p>	<p>• William (Scotty) will be supported to adjust to his new environment to lower risk of triggering former VERBALLY inappropriate and sexually inappropriate expressive episodes through to the next review.</p> <p>Revision on: 02/27/2025</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of William (Scotty) for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• TRIGGERS leading to PHYSICAL (Hitting, Punching,) as expression of behaviour include cause; anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning.)</p> <p>Revision on: 06/03/2023 Revision by: Haley Barisic (Quality Lead)</p>				
Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician	Wallace Liang	
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified (E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Robinson, William (922131005509)	Admission Date	05/29/2023	Location	8 807 A	
Last Care Plan Review Completed:		10/13/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	<ul style="list-style-type: none"> • PHYSICAL Behaviour: If Scotty 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: 06/03/2023 Revision by: Haley Barisic (Quality Lead) • PHYSICAL Behaviour: if resident becomes physically expressive during care, please ensure he is safe and give time to settle before re-approaching Revision on: 06/03/2023 Revision by: Haley Barisic (Quality Lead) • TRIGGERS leading to VERBAL yelling, screaming, calling names, etc. as expression of behaviour include loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • VERBAL Behaviour: If William (Scotty) 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/her concern. Report episode to Registered Staff. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • SOCIALLY Inappropriate Behaviour: blocking the doors of the dining room with his chair so that co-resident B.G. cannot get in there. He is triggered by this residents running the halls and wandering into other residents rooms. Monitor for blocking doors and interactions with B.G. Revision on: 02/24/2025 Revision by: Danielle Loreto (RAI Coordinator) • WANDERING: Permit William (Scotty) to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 06/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • SEXUAL Behaviour: William (Scotty) demonstrates habit of unwanted sexual expressions through comment and humor. Report episode to Registered Staff. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction) Verbal expressions-yelling, swearing, calling names 	PCA		
Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician	Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Robinson, William (922131005509)	Admission Date	05/29/2023	Location	8 807 A
Last Care Plan Review Completed:		10/13/2025			

Care Plan Report

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<ul style="list-style-type: none"> Potential for Expressive Behaviour of VERBAL nature related to Verbal aggression, History of hallucinations of train in his home, Agitation, Restlessness, Sexually inappropriate expressions, physical expressions, refuse care and wandering. Revision on: 04/20/2025 Revision by: Jenny Liu (RAI Coordinator)			Triggers: Being told what to do, resident (BG) going into his room and wandering the unit, going in and out of the dining room. Recommendations: Offer reassurance, listen and validate concerns. Offer distraction such as watching tv with friend (LT) watching sports (football Lions, baseball Tigers) and listening to music (Joe Cochran) The resident likes to attend some group programs on his floor as well as on the main floor. Revision on: 03/06/2025 Revision by: Leslie Meloche (Recreation Aide)			
<ul style="list-style-type: none"> Nutrition Risk Level: MODERATE r/t significant weight gain in 6mo (10.9%)-stable for 3mo, BMI >30, dementia dx, good appetite, good fluid intake, bowels managed, independent at meals. Revision on: 08/20/2024 Revision by: Anika Dhalla (Dietitian (RD))		<ul style="list-style-type: none"> Scotty will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026 <ul style="list-style-type: none"> Will weigh within GWR/IBW/Realistic weight range of 74.4-87.7kg/BMI 28-33 through to next review date. 	<ul style="list-style-type: none"> NUTRITION RISK: Scotty is low risk level. Revision on: 07/08/2025 Revision by: Niharika Chopra (Food Service Supervisor) <ul style="list-style-type: none"> DIET ORDER: Scotty will receive Regular diet, Regular texture Revision on: 08/20/2024 Revision by: Anika Dhalla (Dietitian (RD)) <ul style="list-style-type: none"> FLUID CONSISTENCY: Scotty drinks REGULAR/THIN Level 0 Fluids. Revision on: 05/29/2023 Revision by: Anna Slack (Registered Dietitian) <ul style="list-style-type: none"> FLUID TARGET: Encourage Scotty to drink a minimum of 1819mL per day. Revision on: 08/20/2024 Revision by: Anika Dhalla (Dietitian (RD)) <ul style="list-style-type: none"> EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of 		Dietitian (RD)	
Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician	Wallace Liang	
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses					
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Resident	Robinson, William (922131005509)	Admission Date	05/29/2023	Location	8 807 A	
Last Care Plan Review Completed:		10/13/2025				

Care Plan Report

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	<p>h=163cm Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p> <p>• Scotty will be adequately hydrated aeb drinking at least 75% of total fluid requirement 2425mL @ 25mL/kg, 97kg through to next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p> <p>• Will meet estimated nutritional requirements of 1819kCal @ 20kCal/kg, 97g protein @ 1g/kg through to next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p>	<p>meals and snacks daily.</p> <p>• DINING INSTRUCTIONS: Encourage fruit as dessert, offer vegetables if resident requests seconds, encourage water to drink as main beverage of choice Revision on: 11/20/2024 Revision by: Lexi Dakin (Dietitian (RD))</p>	PCA Registered Practical Nurse			
<p>• Strength Revision on: 08/16/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)</p>	<p>• Improve B/L LE&UE strength from 3+ to 4+ in next 3 months; Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026</p>	<p>• Strengthening ex's for B/L UE and LE all major joints with 1-2 lb, 1-2 sets of 10 reps as tolerated 2-3x/wk. Revision on: 08/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)</p>	PT - Physiotherapist PTA			
<p>• Transfer training Revision on: 08/16/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)</p>	<p>• Reduce assistance needed for transfers from 1 person assist to sup assist in next 3 months; Revision on: 02/27/2025</p>	<p>• Sit to stand exs, 1 assist, as best tolerated; 2-3 reps or as tolerated, 2-3x/week Revision on: 08/16/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)</p>	PT - Physiotherapist PTA			
Allergies	No Known Allergies		D.O.B.	11/23/1948	Physician	Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses					
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Resident	Robinson, William (922131005509)		Admission Date	05/29/2023	Location	8 807 A
Last Care Plan Review Completed:		10/13/2025				

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Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026				
• Balance Training Revision on: 08/16/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)	• To prevent decline in standing balance in next 3 months Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• Dynamic balance exs like touch forward, back and side, heel raise, marching, mini squats, all exs 10 reps, 2-3 x a week; Revision on: 08/16/2024 Revision by: Shina Wadhwa (PT - Physiotherapist)	PT - Physiotherapist PTA		
• Increased risk for FALLS related to Hx of falls, Orthostatic Tremor. Revision on: 02/22/2024 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• CALL BELL: Place call bell within William (Scotty) reach, check that it is in working order and remind/encourage to use it, has bed pad alarm when placed to bed. Revision on: 05/30/2023 Revision by: Teresa Quinto (RPN) • BED: (use high/low bed) to lower risk for injury. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • FOOTWEAR: Ensure William (Scotty) wears appropriate footwear at all times. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA PCA PCA	D/E/N	
• Potential to experience alteration in MOOD as exhibited by low mood, history of stating whats the point in living. Revision on: 11/27/2023 Revision by: Mitchell Atkinson (Recreation Aide)	• William (Scotty) will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of William (Scotty) for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 09/08/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, poor judgement related to Cognitive Deficits. CPS score of 3/6. Revision on: 06/13/2023	• William (Scotty) will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 02/27/2025	• ORIENTATION: Gently reorient to place and time as needed when William (Scotty) is feeling lost or in confused state. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • ENVIRONMENT: Provide environmental clue to promote William (Scotty) ability to			
Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician	Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Robinson, William (922131005509)	Admission Date	05/29/2023	Location	8 807 A
Last Care Plan Review Completed:		10/13/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Katie Wolters-Savo (RAI Coordinator)	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	locate room and navigating home area (name plate) outside of room. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)			
• SPIRITUAL BELIEFS: Scotty is of the Anglican Faith. Revision on: 06/05/2023 Revision by: Mitchell Atkinson (Recreation Aide)	• To provide Scotty spiritual support as interested through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• PERSONAL CHOICE: Respect Scotty's right to decline participation in Spiritual Program. Attempt to engage him if he decides to attend spiritual programs. Revision on: 06/05/2023 Revision by: Mitchell Atkinson (Recreation Aide)	ACT		
• Risk for Impaired SKIN INTEGRITY related to impaired mobility and incontinence. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To protect and maintain skin integrity each day through to the next review. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. • EQUIPMENT: William requires System cushion to offload pressure. Revision on: 09/17/2024 Revision by: Janina Lucero (RN)	PCA PCA		
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment. Wakes up to go to the bathroom at night. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• To promote adequate rest/sleep for William (Scotty) based on identified sleep patterns/preferences each night through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• REST PATTERN: No preferred bedtime, usual wake time 0700hrs and daytime naps in the afternoon. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	PCA		
• Potential for BOWEL INCONTINENCE	• William (Scotty) will have	• MONITORING: Utilize holistic perspective of continuous monitoring of William			
Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician	Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses				
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Resident	Robinson, William (922131005509)	Admission Date	05/29/2023	Location	8 807 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
related to occasional bowel incontinence. Revision on: 05/29/2023 Revision by: Mitchell Atkinson (Recreation Aide)	bowel incontinence managed every shift through to the next review period. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	(Scotty) for changes to health status, alteration of continence level or bowel function. Monitor and report any blood noted in stool Revision on: 01/27/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL Continence level is occasionally incontinent. Report change to level as noted. Resident can have full control. Revision on: 11/25/2024 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor William (Scotty) for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • INCONTINENCE PRODUCT: Scotty Wears orange size products daily. Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• URINARY (Mixed) INCONTINENCE related to Frequently incontinent of urine. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• William (Scotty) will have urinary incontinence managed every shift through to the next review period. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of William (Scotty) for toileting needs, changes to health status and alteration of continence level. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • URINARY Continence level is FREQUENTLY Incontinent. Report change to level as noted. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • INCONTINENCE PRODUCT: William (Scotty) wears a incontinent product. Wears orange size products daily. Revision on: 11/12/2024 Revision by: Idylle Labrado (RPN)	PCA			
• Altered VISION related to wears corrective eyewear. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	• William (Scotty) will use glasses for vision correction daily through to the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator)	• EYEGLASSES: William (Scotty) wears eyeglasses at all times. Assist to clean eyeglasses as needed and store on night table when sleeping. Glasses are broken. Continue to try an reach the POA for replacements. Revision on: 10/29/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
Allergies	No Known Allergies		D.O.B.	11/23/1948	Physician	Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
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Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Coordinator) Target Date: 01/13/2026					
• Altered COMMUNICATION as exhibited by limitations to self expression related to Cognitive deficits. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• William (Scotty) will be able to make basic needs known each day through to the review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• PRIMARY LANGUAGE: William (Scotty) primary language is English. He is able to communicate and understand English. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases). Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Scotty needs (intermittent,) cueing and or demonstrative instruction in tasks and activities. Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Impaired mobility, Severe Lumbar Disc Disease, Cognitive Deficits, Gait Apraxia. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• William (Scotty) will have ALL ADL care tasks met each day through the next review date. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	• BATHING: William (Scotty) requires one team member physical help in part of the bathing though requires one team member for transferring onto the tub chair. His shower are in the evening are Tuesday and Friday. Nail care to be provided on shower/bath day. Revision on: 07/13/2025 Revision by: Jenny Liu (RAI Coordinator) • BED MOBILITY: William (Scotty) requires weight bearing assist from one team member to turn and reposition in bed. Revision on: 11/21/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • DRESSING: William (Scotty) requires one team member weight bearing assist to dress from head to toe. Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) • EATING: William (Scotty) is able to eat independently in the Main Floor Dining room with set up by the team. Revision on: 03/20/2025 Revision by: Kenya Mosely (RPN) • LOCOMOTION: Wheelchair utilized as primary mode of locomotion. William (Scotty) can self propel short distances but may requires one team member to push				
Allergies	No Known Allergies		D.O.B.	11/23/1948	Physician	Wallace Liang	
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses						
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Resident	Robinson, William (922131005509)		Admission Date	05/29/2023	Location	8 807 A	
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		<p>him longer distances. Revision on: 06/13/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: William (Scotty) requires one team member weight bearing PCA assist for hygiene needs. He is able to wash his face though required one team member to assist with providing pericare.</p> <p>Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide LIMITED assistance to use soap/water, apply PCA sanitizer, rub hands together, dry hands, etc. for hand hygiene.</p> <p>Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• TOILET USE: William (Scotty) requires weight bearing assist from one team PCA member for toilteting to check and change his incontinence product, apply a new incontinence product and adjust clothing after task. Transfer to be completed per transfer care plan.</p> <p>Revision on: 02/14/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: William (Scotty) requires transferring with one team member PCA assist. Has been assessed by PT for sara lift as needed.</p> <p>Revision on: 05/13/2024 Revision by: Katie Savo</p> <p>• TRANSFER LIFT/SLING: Large (green) sling</p> <p>Revision on: 08/03/2024 Revision by: Janina Lucero (RN)</p> <p>• ORAL CARE: William (Scotty) has dental implants. He requires the team to set up PCA his toothbrush/tooth paste and cue him in completing his oral care.</p> <p>Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• SHAVING - William (Scotty) has a mustache and requires one team member to PCA shave the rest of his face.</p> <p>Revision on: 05/19/2025 Revision by: Kenya Mosely (RPN)</p>		
• Expressed Wishes and Beliefs related to William (Scotty) Medical Treatment and	• To support and honor William (Scotty) expressed wishes and	• CPR: William (Scotty)wishes express NO CPR and NO TRANSFER to hospital. Revision on: 05/29/2023		
Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses			
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End of Life Care Revision on: 05/29/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)	beliefs through to the End of Life. Revision on: 02/27/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/13/2026	Revision by: Nicole Bertucci (ADOC)		

Diagnosis

Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disorder(F06.7)

Allergies	No Known Allergies	D.O.B.	11/23/1948	Physician	Wallace Liang
Diagnosis	Other specified intervertebral disc degeneration(M51.3), Apraxia(R48.2), Tremor, unspecified(R25.1), Benign neoplasm of prostate(D29.1), Hyperlipidaemia, unspecified(E78.5), Mild cognitive disord...See last page for a complete listing of the Resident's diagnoses				
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<ul style="list-style-type: none"> • Alteration in skin integrity with risk for infection or complications related to SKIN TEAR to RIGHT FOOT 1st, 2nd and 3rd Digits. Revision on: 10/17/2025 Revision by: Antoinette Simpson (RPN)	<ul style="list-style-type: none"> • To promote optimal healing of SKIN TEAR within 3 weeks (November 7, 2025). Revision on: 10/17/2025 Revision by: Antoinette Simpson (RPN) Target Date: 11/07/2025	<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: 10/18/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to RIGHT FOOT 1st, 2nd and 3rd Digits for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/17/2025 Revision by: Antoinette Simpson (RPN) <ul style="list-style-type: none"> • TREATMENT PLAN: Administer treatment for SKIN TEAR to RIGHT FOOT 1st, 2nd and 3rd Digits as per MD Order. Revision on: 10/17/2025 Revision by: Antoinette Simpson (RPN)				
<ul style="list-style-type: none"> • Alteration in skin integrity related to BRUISE to LEFT DORSUM (#93) Revision on: 10/17/2025 Revision by: Kenya Mosely (RPN)	<ul style="list-style-type: none"> • To promote intact skin integrity through healing of BRUISE to LEFT DORSUM (#93) Revision on: 10/17/2025 Revision by: Kenya Mosely (RPN) Target Date: 11/30/2025	<ul style="list-style-type: none"> • COMMUNICATION: Involve/collaborate with Rick Sorrell (POA/Son) in decision making for treatment of bruise as skin issue. Revision on: 10/17/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> • MONITORING: Utilize holistic perspective of continuous monitoring of Robert with BRUISE to LEFT DORSUM (#93) for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/17/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none"> • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/17/2025 Revision by: Kenya Mosely (RPN)				
<ul style="list-style-type: none"> • At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Cognitive Limitation, Rest/Sleep Patterns. ISE score: 4/6 Revision on: 10/01/2025	<ul style="list-style-type: none"> • To support Robert's Psycho-Social well being through to the next review. Revision on: 08/08/2024 Revision by: Laura Morris (Restorative Care Aide) Target Date: 01/10/2026	<ul style="list-style-type: none"> • STRUCTURED ACTIVITIES: Invite Robert to programs of personal interest; movies, sensory stimulation and music programs, etc. Revision on: 08/08/2024 Revision by: Laura Morris (Restorative Care Aide) <ul style="list-style-type: none"> • SELF-DIRECTED ACTIVITIES: Encourage Robert to engage in self-directed activities such as watching TV in own room and conversing with other residents, etc. Revision on: 08/08/2024				
Allergies	Morphine, Penicillin	D.O.B.	03/20/1931	Physician	Wallace Liang	
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date		
Resident	Sorrell, Robert ((9221310062)			Location		
Admission Date	08/07/2016			8 818 C		
Last Care Plan Review Completed:		10/10/2025				

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Megan Pipe (Recreation Aide)		Revision by: Laura Morris (Restorative Care Aide) • ASSISTANCE: Provide assistance/encouragement to get Robert to scheduled activities - Accompany in elevator and offer invitations, etc. Revision on: 08/08/2024 Revision by: Laura Morris (Restorative Care Aide)			
• Alteration in comfort: Acute/Chronic Pain r/t: Right side pain, Abdominal and back pain. history of Femur Fracture. RAI Pain score is 1 Revision on: 07/12/2025 Revision by: Jenny Liu (RAI Coordinator)	• Promote RAI Pain Score of 0 through to the next review. Revision on: 07/12/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/10/2026	• 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. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)	RN Registered Practical Nurse Registered Practical Nurse RN		
• Potential to experience alteration in MOOD as exhibited by (agitation, persistent anger with self or others) related to Decline in Health Condition, Loss of Independence and Depression. Revision on: 07/12/2025 Revision by: Jenny Liu (RAI Coordinator)	• To decrease episodic frequency of (persistent anger with self or others) by next review date. DRS score will be less than (0). Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Robert for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Robert effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up)	Registered Staff All Registered Staff		
• Use of PASD TILT CHAIR and two 1/4 bed rails to assist resident with Activity of Daily Living (Positioning and care). Revision on: 02/23/2025 Revision by: Suzanne Azar (RN)	• ROBERT will be effectively supported with use of his tilt wheelchair and bed rails to optimize Activity of Daily Living (positioning, prevention of skin	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use tilt wheelchair and bed rails as to support appropriate turning and repositioning. Revision on: 02/23/2025 Revision by: Suzanne Azar (RN)			
Allergies	Morphine, Penicillin	D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)	Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		breakdown/discomfort) each day through to the next review date. Revision on: 02/23/2025 Revision by: Suzanne Azar (RN) Target Date: 01/10/2026	• BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with turning and repositioning during care. Monitor every shift. Revision on: 02/23/2025 Revision by: Suzanne Azar (RN) • TILT CHAIR in USE as a PASD to support resident with ADL- positioning, prevention of skin breakdown & discomfort . Monitor every shift. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC)			PCA	D/E/N
• Nutrition: Increased nutrient needs (Specify) related to skin breakdown		• To obtain or maintain adequate intake to meet estimated nutritional requirements (specify) through to next review date Target Date: 01/10/2026	• Increase protein in diet (refer to nutrition risk level) • Provide supplement as ordered (refer to nutrition risk level)				
• Activities of Daily Living, self care r/t: Emphysema, CHF, Hypertension, COPD, Asthma, history of fracture Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Robert will maintain current self sufficiency in ADL abilities in all ADL through the review date. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• BATHING: Shower- Monday and Thursday on the day shift. MAXI lift used for transferring. One team member to complete the shower for him without his help. Nail care to be provided after the shower Revision on: 07/05/2025 Revision by: Danielle Loreto (RAI Coordinator) • BED MOBILITY: Robert requires Maximal assistance to reposition and turn in bed. May requires total assistance from the team. Revision on: 04/19/2025 Revision by: Jenny Liu (RAI Coordinator) • DRESSING: Robert is able to guide his arms through the clothes, but requires Maximal assistance to dress/undress his lower/upper body. At times he requires total assistance from two staffs. . Revision on: 04/19/2025			PCA	PRN
Allergies	Morphine, Penicillin			D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)			Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025					

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			Revision by: Jenny Liu (RAI Coordinator) • EATING: Robert is Independent with set up help only. Eat in the main dining room - PCA 1st floor. Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • LOCOMOTION: Total assistance from team member and wheelchair chair used. PCA Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL HYGIENE: Robert is able to wipe his hands, face when set up done; PCA requires Maximal to total assistance from the team to assist to comb his hair, shaving, and provide peri-care Revision on: 04/19/2025 Revision by: Jenny Liu (RAI Coordinator) • HAND HYGIENE: 1 staff to provide reminder assistance to use hand sanitizer/hand PCA sanitizing wipes for hand hygiene. All Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TOILET USE: Robert has Colostomy and registered staff to empty every shift and PCA before going to the main floor for meals. Change colostomy bag every Wednesday evening shift and as needed. 2 team members to provide residents with checks and changes of brief. Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRANSFERRING: Total assistance from two staff and the Mechanical lift. PCA Revision on: 04/19/2025 Revision by: Jenny Liu (RAI Coordinator) • TRANSFER LIFT/SLING: Large SIZE of sling needed for transfer. All Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • ORAL CARE: Extensive assistance- staff to provide assistance with oral care. PCA Some natural teeth lost. Revision on: 01/14/2025			
Allergies	Morphine, Penicillin		D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)		Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Activities of Daily Living, self care r/t: Emphysema, CHF, Hypertension, COPD, Asthma, history of fracture Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			Revision by: Danielle Loreto (RAI Coordinator) • SHAVING - Robert will be shaved on his bath days Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	D
• Behaviour problem (sexual behaviors towards staff, verbally/physically abusive, refuse meds or go to bed, threatening to hit/go after staff, impaired memory and Depression. Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To decrease episodic frequency of (refuse care, physically aggressive) by next review date. ABS score will be less than (1). Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Robert for indications to change in or for escalating expressive behaviour risk. Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) • TRIGGERS leading to PHYSICAL (Hitting, Punching, etc.) as expression of behaviour include (anger, frustration, confusion, hunger, etc.) Revision on: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) • PHYSICAL Behaviour: If Robert 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: 05/18/2024 Revision by: Jenny Liu (RAI Coord Back-up) • PHYSICAL Behaviour: If Robert is attempting to strikeout; move back from his reach. Calmly indicate that care will continue when he is calm/ready. Seek			Registered Staff	All
Allergies	Morphine, Penicillin			D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)			Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025					

Care Plan Report

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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<div>• Behaviour problem (sexual behaviors towards staff, verbally/physically abusive, refuse meds or go to bed, threatening to hit/go after staff, impaired memory and Depression.</div> <div>Revision on: 01/14/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>Recommendations: Redirect the resident with a snack/drink or to relax in his room. Try to resolve his concern. Validate the residents feelings. Physical: Hitting, grabbing at staff. Triggers: Misunderstanding care intention, paranoia, fearfulness.</div> <div>Recommendations: Move out of residents reach, use stop and go approach. Re-approach when calm/ready. Report to registered staff.</div> <div>Sexual Behavior: Grabbing inappropriately at staff. Recommendations: Use Stop and go approach. Reapproach when the resident is calm/ready. Report to registered staff.</div> <div>Revision on: 08/08/2024</div> <div>Revision by: Leslie Meloche (Recreation Aide)</div>			
<div>• ROM Exs</div> <div>Revision on: 01/14/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• To improve RT Hip-Knee ROM In next 3 months</div> <div>Revision on: 01/14/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div> <div>Target Date: 01/10/2026</div>	<div>• A-AAROM exs for B/L UE and LE; ROM exs within pain limits, 10 reps, 1-2 set or as best tolerated;2-3 x a week;</div> <div>Passive stretching for B/L Hams and Calf; 3-5 reps; 20sec hold; 2-3 x a week;</div> <div>Revision on: 07/08/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>	PT - Physiotherapist PTA		
<div>• Potential to experience discomfort/complications, including, impaired mobility, embolism related to FRACTURE of (Femur Fracture November 12th 2024).</div> <div>Revision on: 12/02/2024</div>	<div>• To promote optimal healing of FRACTURE of (Femur Fracture) (as well as surgical site) until healed (within the next review date).</div> <div>Revision on: 11/13/2024</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of fracture to (Femur Fracture) for discomfort/ complications or changes to health status.</div> <div>Revision on: 11/13/2024</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• PAIN MANAGEMENT for fracture prescribed and in place; refer to Pain Care Plan.</div> <div>Registered</div>			
Allergies	Morphine, Penicillin	D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)	Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025			

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/10/2026				Staff	
• Risk for/Impaired Skin Integrity r/t: Fragile skin, Colostomy, Revision on: 11/29/2024 Revision by: Danielle Loreto (RAI Coordinator)		• To protect and maintain skin integrity each day through to the next review. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• 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. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	
			• EQUIPMENT: Robert requires Roho cushion to offload pressure. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	
			• POSITIONING: Turn, reposition at least every 2 hours when in bed/wheelchair as per to offload pressure. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	Q2h
• Falls, at risk/potential for falling r/t: Impaired mobility, Hx of falls with fracture Revision on: 11/22/2024 Revision by: Haley Barisic (Quality Improvement Coordinator)		• Robert will be free from falls through the review date. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• COMMUNICATION: Involve/collaborate with Robert and SDM in decision making in fall prevention Plan of Care. Revision on: 11/22/2024 Revision by: Haley Barisic (Quality Improvement Coordinator)			PCA	D/E/N
			• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	
			• FOOTWEAR: Ensure resident wears appropriate footwear (non-slip) for transfers. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	
			• FLOOR MAT: Position floor mat on floor both side of bed to lower risk of injury. Revision on: 03/21/2025 Revision by: Prabhjot Maan (ADOC)			PCA	
			• Bed/Chair alarm/check in place. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)			PCA	Q1H
			• SUPPLEMENT: Vitamin D supplement as per MD order to maintain bone density to			Registered	
Allergies	Morphine, Penicillin		D.O.B.	03/20/1931	Physician	Wallace Liang	
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Sorrell, Robert ((9221310062))		Admission Date	08/07/2016	Location	8 818 C	
Last Care Plan Review Completed:		10/10/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Falls, at risk/potential for falling r/t: Impaired mobility, Hx of falls with fracture Revision on: 11/22/2024 Revision by: Haley Barisic (Quality Improvement Coordinator)			prevent injuries. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)			Staff	
• Robert has potential for complications, s/sx related to diagnosis of COPD, asthma, Emphysema. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To treat and minimize signs/symptoms or complications associated with DIAGNOSIS each day through to next review date. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (COPD) for changes to health status and alteration or complications affecting respiratory function. Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication (inhalers) as per MD order and monitor for side effects. Revision on: 07/12/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF), Coronary Artery Disease and Hypertension Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• To treat and minimize signs/symptoms or complications associated with Diagnosis through to the next review date. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• 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. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication as per MD Order and monitor for side effects. Revision on: 10/24/2024 Revision by: Jenny Liu (RAI Coord Back-up) • BP MONITORING: Monitor BLOOD PRESSURE as ordered. Notify MD of abnormalities as needed. Revision on: 10/19/2024			Registered Staff	
Allergies	Morphine, Penicillin			D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)			Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025					

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF), Coronary Artery Disease and Hypertension Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)			Revision by: Jenny Liu (RAI Coord Back-up)				
• Bowel Continence. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• Robert will accept assistance to manage bowel conditions. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026 • Robert will have bowel incontinence managed every shift through to the next review period. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• Continenence Level: Colostomy - Continent Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • Monitor/document: bowel movements, number of occurrences, size and consistency. Report abnormalities to Nurse/MD. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • COLOSTOMY: Resident has Colostomy. Change flange as per MD Order. Flange #: 14606 Bag #: 18006 Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • OSTOMY BAG CHANGE: Check OSTOMY every shift; Empty contents of ostomy bag when 1/3 to 1/2 full of stool and release gas as needed. Report any redness, drainage or leaking of ostomy immediately if noted. Bag to be emptied before Robert goes down to the main dining room for meals. Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA PCA Registered Staff PCA	
• Urinary Incontinence. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• Robert will receive the appropriate support to manage incontinence through the review date. Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord	• Continenence level: Incontinent Revision on: 10/19/2024 Revision by: Jenny Liu (RAI Coord Back-up) • CHECK and CHANGE: Robert experiences TOTAL incontinence and requires checks every 2 hours and change each time noted to be soiled. Revision on: 10/19/2024			PCA PCA	
Allergies	Morphine, Penicillin		D.O.B.	03/20/1931	Physician	Wallace Liang	
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Sorrell, Robert ((9221310062)		Admission Date	08/07/2016	Location	8 818 C	
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Back-up) Target Date: 01/10/2026	Revision by: Jenny Liu (RAI Coord Back-up) • Continence products: Resident uses GREY color brief per prevail sheet. Revision on: 04/06/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
• Sleep Patterns; Potential for alteration in sleep patterns related to periods of insomnia. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• To promote adequate rest/sleep for Robert based on identified sleep patterns/preferences each night through to the next review date. Revision on: 06/27/2024 Revision by: Katie Savo (RAI Coordinator) Target Date: 01/10/2026	• Usual bed time: usually around 19:00, he goes to bed when he wants and usual wake time: 6:00-7:00 Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • Preferred night attire: own clothes Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA		
• Altered VISION related to See large print but not regular print. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• Robert will use glasses for vision correction daily through to the next review date. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• EYEGLASSES: Robert wears eyeglasses when he prefers. Assist to clean eyeglasses as needed and store (on night table or in night table drawer) when sleeping. Revision on: 01/14/2025 Revision by: Danielle Loreto (RAI Coordinator) • READING: Robert uses large print material to aid with reading. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA PCA		
• Altered Communication r/t: Minimal difficulty hearing. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	• Robert will maintain current communication abilities through the review date. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• PRIMARY LANGUAGE: Robert primary language is English. He is able to speak/understand English. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no All questions, uses simple words/phrases, etc.. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	All		
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement.) Revision on: 05/27/2024	• Robert will maintain current cognitive abilities through the review date. Current CPS is 3/6. Revision on: 05/27/2024	• ORIENTATION: Gently reorient to (person, place, time) as needed when Robert is feeling lost or in confused state. Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	All		
Allergies	Morphine, Penicillin	D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)	Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision by: Jenny Liu (RAI Coord Back-up)	Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/10/2026	• PERSONAL ROUTINE: Provide consistency in care routine and activities Revision on: 05/27/2024 Revision by: Jenny Liu (RAI Coord Back-up)	PCA		
• Expressed Wishes and Beliefs related to Robert Medical Treatment and End of Life Care Revision on: 01/12/2021 Revision by: Jenny Liu (RAI Coord Back-up)	• To support and honor Robert expressed wishes and beliefs through to the End of Life. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/10/2026	• CPR: Robert wishes express NO CPR and NO TRANSFER to hospital. Revision on: 05/11/2024 Revision by: Maryola Perion (RN) • FUNERAL Arrangements: Janisse Funeral Home- 1139 Ouellette Ave. (519) 253-5225 Revision on: 05/11/2024 Revision by: Maryola Perion (RN)	Social Worker ST		
• SPIRITUAL BELIEFS: Robert is of the Roman Catholic Faith. Revision on: 04/21/2020 Revision by: Shayna Lee Wonsch (Activation Manager)	• To provide Robert spiritual support as interested through to the next review date. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/10/2026	• SPIRITUAL PROGRAMS: Encourage him to attend spiritual programs of his choice including church service (Catholic), spiritual music, bible study, spiritual discussions, etc. Revision on: 03/07/2024 Revision by: Mitchell Atkinson (Recreation Aide) • SELF-DIRECTED SPIRITUAL Activities: Robert engages in Communion, praying, etc. Revision on: 10/15/2019 Revision by: Shayna Lee Wonsch (Activation Manager)	ACT		
• ALLERGIC to Morphine, Penicillin. Revision on: 09/15/2016 Revision by: Maryola Perion (Registered Nurse)	• Robert will remain free of allergen through next review date. Revision on: 09/18/2023 Revision by: Katie Wolters-Savo (RAI Coordinator) Target Date: 01/10/2026	• Staff to remain aware of allergen (Morphine and Penicillin) and prevent contact with. All Revision on: 09/15/2016 Revision by: Maryola Perion (Registered Nurse) • Registered staff to ensure MD's and Pharmacy aware of Robert's allergy and ensure he does not receive it. Revision on: 09/15/2016 Revision by: Maryola Perion (Registered Nurse) • RESCUE MEDICATION: Administer EPINEPHRINE as per MD/NP Order. Monitor effectiveness and immediately notify MD/NP of use.	Registered Staff Registered Staff		
• Nutrition Risk Level (diet details)	• Robert will be adequately	• Robert has an INTOLERANCE to: milk. Reactions to this food include diarrhea.	Diet		
Allergies	Morphine, Penicillin	D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)	Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025			

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	<p>nourished aeb consuming >75% at meals and snacks through to next review date.</p> <p>Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/10/2026</p> <p>• Will weigh within realistic GWR 105-115 kg through to next review date.</p> <p>Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/10/2026</p> <p>• Robert will be adequately hydrated aeb drinking at least 75% of total fluid requirement: 2730 ml/day (25 ml/kg using 109.2 kg weight) through to next review date.</p> <p>Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/10/2026</p>	<p>Provide Lactaid milk only.</p> <p>Revision on: 04/27/2021 Revision by: Olivia Kuhlmann (Dietetic Intern)</p> <p>• NUTRITION RISK: Robert is moderate risk level.</p> <p>Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Robert will receive regular diet, pureed texture</p> <p>Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• THICKENED FLUIDS: Robert drinks nectar (mildly thick level 2) fluids</p> <p>Revision on: 06/27/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID TARGET: Encourage Robert to drink a minimum of 2048 ml/day.</p> <p>Revision on: 07/01/2025 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>Revision on: 07/01/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• MEDPASS SUPPLEMENTS: 1 scoop protein powder mixed in 200 ml thickened fluids TID.</p> <p>Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• LABELLED SNACK AM: Greek yogurt daily (8 g pro, 85 ml fluid)</p> <p>Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	Dietitian (RD)			
			PCA			
			PCA			
			PCA			
			Dietary aide PCA			
			PCA			
Allergies	Morphine, Penicillin		D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Sorrell, Robert ((9221310062)		Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025				

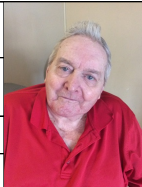
Care Plan Report

Diagnosis

Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease, unspecified(J44.9), Asthma, unspecified, without stated status asthmaticus(J45.90), Resistance to methicillin(U82.1), Other depressive episodes(F32.8), Primary generalized (osteo)arthrosis(M15.0), Gastrointestinal haemorrhage, unspecified(K92.2), Unspecified fracture of neck of femur, closed(S72.090), Bacterial infection, unspecified(A49.9), Staphylococcus aureus as the cause of diseases classified to other chapters(B95.6)

Allergies	Morphine, Penicillin	D.O.B.	03/20/1931	Physician	Wallace Liang
Diagnosis	Congestive heart failure(I50.0), Atherosclerotic heart disease of native coronary artery(I25.10), Benign hypertension(I10.0), Emphysema, unspecified(J43.9), Chronic obstructive pulmonary disease,...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Sorrell, Robert ((9221310062)	Admission Date	08/07/2016	Location	8 818 C
Last Care Plan Review Completed:		10/10/2025			

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 LEFT OUTER FOREARM (#9) Revision on: 10/23/2025 Revision by: Kenya Mosely (RPN)	<ul style="list-style-type: none">• To promote optimal healing of SKIN TEAR LEFT OUTER FOREARM (#9) Revision on: 10/23/2025 Revision by: Kenya Mosely (RPN) Target Date: 12/12/2025	<ul style="list-style-type: none">• TREATMENT PLAN: Administer treatment for SKIN TEAR LEFT OUTER FOREARM (#9) as per MD Order. Revision on: 10/23/2025 Revision by: Kenya Mosely (RPN) <ul style="list-style-type: none">• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/23/2025 Revision by: Kenya Mosely (RPN)					
<ul style="list-style-type: none">• Potential for (Acute /Persistent) PAIN and alteration in comfort level related to (CVA), Basal Cell Carcinoma LEFT FOREARM. Most Current LTCF Pain Score is (0) Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none">• Promote RAI Pain Score of 0 through to the next review. Target Date: 12/12/2025	<ul style="list-style-type: none">• COMMUNICATION: Involve/collaborate with Roderick/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 07/11/2023 Revision by: Jenny Liu (RAI Coord Back-up) <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: 10/23/2021 Revision by: Jenny Liu (RAI Coord Back-up)	RN Registered Practical Nurse Registered Practical Nurse RN				
<ul style="list-style-type: none">• Alteration in skin integrity related to blisters on the left forearm. Revision on: 10/07/2025 Revision by: Idylle Labrado (RPN)	<ul style="list-style-type: none">• To promote intact skin integrity through healing of blister by next weekly assessment. Revision on: 10/07/2025 Revision by: Idylle Labrado (RPN) Target Date: 12/12/2025	<ul style="list-style-type: none">• MONITORING: Utilize holistic perspective of continuous monitoring of resident with the blister for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/07/2025 Revision by: Idylle Labrado (RPN) <ul style="list-style-type: none">• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/07/2025 Revision by: Idylle Labrado (RPN)					
<ul style="list-style-type: none">• Alteration in skin integrity with risk for infection or complications related to open	<ul style="list-style-type: none">• To promote optimal healing of SKIN TEAR within next weekly	<ul style="list-style-type: none">• TREATMENT PLAN:Open lesion # 7 Rt second digit toe Cleanse with normal saline, pat skin dry, spray no string spray to peri-wound, apply					
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang	
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A	
Last Care Plan Review Completed:		09/12/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
lesion on the right second digit toe Revision on: 09/20/2025 Revision by: Idylle Labrado (RPN)	assessment. Revision on: 09/20/2025 Revision by: Idylle Labrado (RPN) Target Date: 12/12/2025	contact layer Versatel, apply Opticell, cover with Optifoam q3days and PRN Revision on: 09/20/2025 Revision by: Idylle Labrado (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: 09/20/2025 Revision by: Idylle Labrado (RPN)				
• Falls, at risk/potential for falling r/t CVA, decreased mobility, Hx of Falls. Revision on: 09/12/2025 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: 12/12/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 07/03/2019 Revision by: Maryola Perion (Registered Nurse) • BED: place bed in lowest position to lower risk for injury. Revision on: 09/13/2025 Revision by: Shelby McCarthy (Registered Practical Nurse) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator) • ALARM: Requires Bed alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/27/2025 Revision by: Tola Omolade (ADOC)	PCA PCA All PCA PCA	D/E/N D/E/N		
• Roderick DECLINES PARTICIPATION in structured programs related to personal choice. ISE Score: 5/6 Revision on: 09/02/2025 Revision by: Megan Pipe (Recreation Aide)	• Roderick participates in Independent/Self-Directed activities monthly through to the next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as watching/listening to TV, visiting with residents/team members, family/friend visits, etc. Revision on: 04/22/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy) • FRIENDLY VISIT: Provide him one to one visits as tolerated. Touch Base to maintain contact and to converse about topics of interest (Toronto Maple Leafs, his favorite player is William Nylander. He enjoys talking about horses as he used to race horses with his brother, Toronto Blue Jays), identify up-coming special events, etc.	ACT ACT			
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Steward, Roderick (922131005087)	Admission Date	02/07/2019	Location	8 810 A	
Last Care Plan Review Completed:		09/12/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			Revision on: 07/20/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy) • INVITATION: Offer friendly invite to structured programs scheduled in the home. Roderick enjoys Resident Council & Food Committee, discussion - current events, family outdoor visits, games - trivia, music & relaxation, sensory stimulation, special events, tuck cart, etc. Revision on: 10/18/2021 Revision by: Mitchell Atkinson (Recreation Aide)		ACT	
• Potential to experience an alteration in MOOD as exhibited by (easily getting annoyed, getting upset, yelling, fear, frustrated, negative statements, and anxiety) related to loss of independence Revision on: 12/18/2024 Revision by: Danielle Loreto (RAI Coordinator)		• Roderick will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Roderick for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/23/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESIDENT STRENGTHS: Build on Roderick effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 10/07/2022 Revision by: Jenny Liu (RAI Coord Back-up)			
• Use of PASD (seatbelt/bedrails) to assist Roderick with Activity of Daily Living (positioning, safety, comfort, prevention of falls). Revision on: 03/28/2024 Revision by: Jenny Liu (RAI Coord Back-up)		• Roderick will be effectively supported with use of a seatbelt to optimize Activity of Daily Living (positioning, safety, comfort, prevention of falls) each day through to the next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• HEALTH EDUCATION: Engage with Roderick to enhance his knowledge of possible benefits and challenges associated with Use of seatbelt. ADON (Kelly June) was able to speak to Roderick on 12/01/21 and he gave verbal consent. Revision on: 12/02/2021 Revision by: Kenya Mosely (RPN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use seatbelt and bed rails as to support appropriate (assigned ADL). Revision on: 11/26/2022 Revision by: Shelby McCarthy (Registered Practical Nurse) • BED RAIL : 2 x 1/4 Rails in USE as a PASD to assist resident with bed mobility,& transferring in/out of bed. Monitor every shift. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC) • SEAT BELT (front closure) in USE as a PASD to support Roderick with (positioning,		PCA	D/E/N
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A
Last Care Plan Review Completed:		09/12/2025				

Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none">• Use of PASD (seatbelt/bedrails) to assist Roderick with Activity of Daily Living (positioning, safety, comfort, prevention of falls). Revision on: 03/28/2024 Revision by: Jenny Liu (RAI Coord Back-up)			safety, comfort, prevention of falls). Monitor every shift. Revision on: 11/16/2022 Revision by: Meghan Sears (ADOC)				
<ul style="list-style-type: none">• Strength Revision on: 12/11/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)		<ul style="list-style-type: none">• Roderick to increase strength from 3+/5&3/5 to 4+/5 in 3 months. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	<ul style="list-style-type: none">• Roderick to perform strength ex using 1-2lbs. wt.,1set,10rps.,3/wk as tolerated for B/L UE and LE.. Revision on: 07/05/2023 Revision by: Shina Wadhwa (Physiotherapist)			PT - Physiotherapist PTA	
<ul style="list-style-type: none">• Passive ROM/stretch Revision on: 12/11/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)		<ul style="list-style-type: none">• To prevent tightness of b/l calf&hams in 3 months. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	<ul style="list-style-type: none">• Provide Stretching exe. of b/l hams.&Calf 1set,5rps.,hold up to 30 sec. 3/wk as tolerated, per rehab treatment Revision on: 04/03/2023 Revision by: Milap Patel (Reg.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) Revision on: 07/11/2023 Revision by: Jenny Liu (RAI Coord Back-up)		<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: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up)	<ul style="list-style-type: none">• 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: 01/30/2021 Revision by: Jenny Liu (RAI Coord Back-up) <ul style="list-style-type: none">• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang	
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A	
Last Care Plan Review Completed:		09/12/2025					

Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 12/12/2025			
<p>• Potential for Expressive Behaviour of SOCIALLY Inappropriate: Accusatory to staff nature, refuse care (shower, eating). Revision on: 09/10/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p>	<p>• Roderick will not have accusatory expressions towards others through to his next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk.</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe, refusal to eat.) as expression of behaviour include (misunderstanding care needs, poor judgement, paranoid thought process, etc.) Revision on: 04/09/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• RESISTANCE to Care Need: If Roderick is refusing to (bathe.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 04/13/2022 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• TRIGGERS leading to SOCIALLY Inappropriate (accusive, disruptive vocalizations, etc.) as expression of behaviour include (hard of hearing, decreased insight, poor judgement, etc.) Revision on: 04/09/2023 Revision by: Jenny Liu (RAI Coord Back-up)</p> <p>• SOCIALLY Inappropriate Behaviour: Two team members required when providing care. Revision on: 02/12/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)</p> <p>• BSO RECOMMENDATIONS: (specify intervention in easy to follow instruction) Roderick is hard of hearing. he communicates by writing on paper. He is able to read and will answer you. Roderick has also been provided with a white board to make communication easier. If the white board is unavailable, speak slowly and loudly and Rod may read lips. Refusing a shower:Reapproach in 10-15 minutes, if he still refuses report to registered staff Due to accusatory tendencies, 2 staff members are required when providing care. Roderick likes to watch tv in his room or on main floor, listen to Country music (Jason Aldean) and will participate in some group programs such as Chair Yoga, Tuck Shop,</p>	Registered Staff	
Allergies	Naproxen		D.O.B.	01/10/1941
Physician	Wallace Liang			
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	Steward, Roderick (922131005087)	Admission Date	02/07/2019	Location 8 810 A
Last Care Plan Review Completed:		09/12/2025		

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential for Expressive Behaviour of SOCIALLY Inappropriate: Accusatory to staff nature, refuse care (shower, eating). Revision on: 09/10/2022 Revision by: Jenny Liu (RAI Coord Back-up)			Movie Night and Service Communion. Revision on: 10/13/2025 Revision by: Leslie Meloche (Recreation Aide)			
• Potential to experience alteration in fluid volume or episode of DEHYDRATION related to (use of diuretic), diarrhea Revision on: 06/21/2022 Revision by: Katie Wolters-Savo (RAI Coordinator)		• To promote fluid consumption and minimize risk for dehydration each day through to the next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) 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 Roderick to consume fluids; amount as per Nutrition Care Plan. Revision on: 01/30/2021 Revision by: Jenny Liu (RAI Coord Back-up)		Registered Staff	
• Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF), Hypertension, Myocardial Infarction History		• To treat and minimize signs/symptoms or complications associated with (Chronic Heart Failure (CHF), Hypertension, Myocardial Infarction History) through to the next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Chronic Heart Failure (CHF), Hypertension, Myocardial Infarction History) for changes to health status and alteration or complications affecting cardiac function. Revision on: 04/13/2022 Revision by: Jenny Liu (RAI Coord Back-up) • MEDICATION: Administer medication as per MD Order and monitor for side effects. Revision on: 04/13/2022 Revision by: Jenny Liu (RAI Coord Back-up) • OXYGEN: Administer Oxygen as per MD order. Revision on: 04/13/2022 Revision by: Jenny Liu (RAI Coord Back-up)		Registered Practical Nurse RN Registered Practical Nurse	
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A
Last Care Plan Review Completed:		09/12/2025				

Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential to experience alteration in CARDIAC FUNCTION related to; Chronic Heart Failure (CHF), Hypertension, Myocardial Infarction History			• WEIGHT: Check/Document weight as per Order. Notify MD of any sudden weight gain. Revision on: 04/13/2022 Revision by: Jenny Liu (RAI Coord Back-up) • BP MONITORING: Monitor BLOOD PRESSURE as per order. Notify MD of abnormalities as needed. Revision on: 04/13/2022 Revision by: Jenny Liu (RAI Coord Back-up)		RN	
• Urinary Incontinence Mixed r/t decreased mobility Revision on: 07/21/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Roderick will receive the appropriate support (take to toilet) to manage incontinence through the review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025 • Roderick will maintain current level of bladder function through the review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 01/05/2024 Revision by: Jenny Liu (RAI Coord Back-up) • Continence level is Frequently incontinent. Revision on: 04/09/2023 Revision by: Jenny Liu (RAI Coord Back-up) • SCHEDULED TOILETING: Ask Roderick if he needs to be toileted Roderick between 0600hr and 2200hr and PRN. Roderick does not always know if he needs to use washroom. Revision on: 04/08/2021 Revision by: Kenya Mosely (RPN) • Continence products: resident uses blue/orange color brief per prevail sheet. Revision on: 03/17/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA PCA PCA	Q2H D/E PRN-N
• Potential for BOWEL INCONTINENCE related to decreased mobility Revision on: 07/21/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Roderick will accept assistance to manage bowel conditions Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• 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: 07/11/2022 Revision by: Jenny Liu (RAI Coord Back-up)		Registered Staff PCA	
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses					
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Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A
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Care Plan Report

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			<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"> • Expressed Wishes and Beliefs related to Roderick Medical Treatment and End of Life Care Revision on: 07/20/2021 Revision by: Mitchell Atkinson (Activities/Rec Therapy)		<ul style="list-style-type: none"> • To support and honor Roderick expressed wishes and beliefs through to the End of Life. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	<ul style="list-style-type: none"> • CPR: Rick Steward (POA/Brother) wishes express NO CPR and NO TRANSFER to hospital. Revision on: 09/15/2025 Revision by: Kenya Mosely (RPN)			
<ul style="list-style-type: none"> • Potential for Altered Communication r/t: complaining of difficult hearing. Revision on: 01/30/2021 Revision by: Jenny Liu (RAI Coord Back-up)		<ul style="list-style-type: none"> • Roderick will be able to make basic needs known on a daily basis through the review date Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	<ul style="list-style-type: none"> • Primary language is English. Revision on: 01/30/2021 Revision by: Jenny Liu (RAI Coord Back-up)		All	
<ul style="list-style-type: none"> • Altered ability to complete Activities of Daily Living (ADLs) related to CVA, decreased mobility Revision on: 12/04/2020 Revision by: Katie Wolters-Savo (RAI Coordinator)		<ul style="list-style-type: none"> • Roderick will maintain current self sufficiency in ADL abilities through the review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	<ul style="list-style-type: none"> • BATHING: Roderick's bath days will be Wednesday and Saturday on Evenings, he requires MAXI lift for transferring and physical help in part of the bath activity from team member. Two team members required when providing care. Nail care to be provided after shower/bath Revision on: 10/30/2025 Revision by: Alyssa Egan (ADOC)		PCA	
			<ul style="list-style-type: none"> • BED MOBILITY: Maximal Assist: Roderick is able to grab onto the bedrails, but he requires extensive assist from team member to turn and reposition in bed. Two team members required when providing care. Revision on: 09/12/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> • DRESSING: Maximal Assist: Roderick is able to guide his arms or legs through the clothes but requires Extensive assist to puts on, fasten, and takes off all items of clothing from team member. Two team members required when providing care. 		PCA	
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses					
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Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A
Last Care Plan Review Completed:		09/12/2025				

Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			<div>Revision on: 09/12/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• EATING: Roderick eats independently in the main floor dining room. PCA</div> <div>Revision on: 06/29/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• LOCOMOTION: Roderick is able to propel his wheelchair for short distance, Staff to PCA provide assistance for long distance due to had difficulty because the arms are getting tired.</div> <div>Revision on: 04/04/2023</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• PERSONAL HYGIENE: Maximal Assist: Roderick is able to comb his hair, wash PCA and dry his hands and face. But requires extensive assist from staff to shave, and do peri-care due to incontinence. Two team members required when providing care.</div> <div>Revision on: 06/15/2025</div> <div>Revision by: Jenny Liu (RAI Coordinator)</div> <div>• HAND HYGIENE: 1 staff to provide reminder assistance to use hand sanitizer/hand PCA sanitizer wipes for hand hygiene.</div> <div>Revision on: 08/19/2021</div> <div>Revision by: Chelsea Campbell-Wright (IPAC LEAD)</div> <div>• TOILET USE: Roderick is able to help with transferring by using SARA lift. PCA Extensive assistance required to adjust clothes, re-apply brief from staff. Two team members required when providing care.</div> <div>Revision on: 02/12/2022</div> <div>Revision by: Katie Wolters-Savo (RAI Coordinator)</div> <div>• TRANSFERRING: Maxi lift is going to be used for transfer such as from bed to PCA chair, chair to bed with 2 staff assistance. SARA lift used for toilet only</div> <div>Revision on: 01/05/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>• TRANSFER LIFT/SLING: medium size of sling for sara lift to toilet and large green colour for Maxi lift for transfer from bed.</div> <div>Revision on: 12/22/2023</div> <div>Revision by: Baljinder Sidhu (RPN)</div> <div>• ORAL CARE: Roderick requires set up assistance from the team for his oral PCA hygiene.</div> <div>Revision on: 02/12/2022</div>					
Allergies	Naproxen		D.O.B.	01/10/1941		Physician	Wallace Liang	
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses							
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Care Plan Report

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Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Shayna Lee Wonsch (Activation Manager)		Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	Revision by: Shayna Lee Wonsch (Activation Manager)			
• ALLERGIC to (Naproxen) Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)		• Roderick will remain free of allergen through next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• MD/PHARMACY ALERT: Notify the MD and Pharmacy of Roderick Allergy to (Naproxen) and minimize risk for exposure to allergen. Revision on: 01/30/2021 Revision by: Jenny Liu (RAI Coord Back-up) • RESCUE MEDICATION: Administer EPINEPHRINE as per MD/NP Order. Monitor effectiveness and immediately notify MD/NP of use.		Registered Staff	
• Sleep Patterns for Roderick Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)		• To meet Rodericks personal preferences for sleep patterns through the next review date. Revision on: 09/22/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 12/22/2025	• Usual bed time between 1900 and 2000hrs and usual wake time between 0600 and 0700hrs Revision on: 09/15/2025 Revision by: Sonpreet Gurm (Registered Nurse) • Preferred night attire Own pajamas Revision on: 05/18/2019 Revision by: Joe Albano (RAI Coordinator)		PCA PCA	
• Roderick has potential for complications related to CVA(2012) as evidenced by decline in ADL's Revision on: 02/25/2019 Revision by: Joe Albano (RAI Coordinator)		• Will maintain optimal functional level within limitations imposed by CVA, through next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 12/12/2025	• Assess/record/report to MD prn; ADL decline, cognitive impairment, communication problems, gait disturbance, contracture formation, incontinence, mood/behaviour problems. aspiration, dysphagia, paralysis, weakness, visual disturbance		Registered Staff	
• Nutrition Risk Level (diet details)		• Roderick will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 01/01/2025 Revision by: Jenny Liu (RAI Coord	• LABELLED SNACK AM: 355 ml can gingerale daily for hydration Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) • NUTRITION RISK: Roderick is moderate risk level.		PCA Registered Practical Nurse RN Dietitian (RD)	D
Allergies	Naproxen		D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Steward, Roderick (922131005087)		Admission Date	02/07/2019	Location	8 810 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Back-up) Target Date: 12/12/2025 • Will weigh within realistic GWR 80-90 kg through to next review date. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/12/2025 • Roderick will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2058 ml/day (25 ml/kg using 82.3 kg weight) through to next review date. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/12/2025	Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Roderick will receive regular diet, regular texture. Revision on: 11/27/2020 Revision by: Anna Slack • FLUID CONSISTENCY: Roderick drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/22/2021 Revision by: Anna Slack (Registered Dietitian) • FLUID TARGET: Encourage Roderick to drink a minimum of 1646 ml/day Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. • FOOD INTOLERANCE: Roderick has an intolerance to regular milk (reaction: diarrhea). He can have Lactaid milk. Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 60 ml of Resource 2.0 TID Revision on: 09/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • ENCOURAGE SNACKS: Encourage Roderick to eat standard snacks from the PM/HS carts Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))	Diet Food Services Aide PCA Diet PCA PCA Dietary aide PCA PCA Restorative Care Aide Diet PCA	D/E

Allergies	Naproxen	D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Steward, Roderick (922131005087)	Admission Date	02/07/2019	Location	8 810 A
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Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
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Diagnosis

Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and thrombosis of unspecified vein(I82.9), Gross hematuria(R31.0), Urinary tract infection, site not specified(N39.0), Malignant neoplasm skin of upper limb, including shoulder(C44.6)

Allergies	Naproxen	D.O.B.	01/10/1941	Physician	Wallace Liang
Diagnosis	Benign hypertension(I10.0), Congestive heart failure(I50.0), Stroke, not specified as haemorrhage or infarction(I64), Old myocardial infarction(I25.2), Anaemia, unspecified(D64.9), Embolism and t...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
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