


## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> <li>• Potential for Expressive Behaviour of (History of WANDERING, VERBAL, SOCIALLY/Sexual Inappropriate, RESISTANCE to care need), urinating/peed near the window, the vent, peeing and moved bowel in garbage related to Vascular Dementia, Anxiety. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</li> </ul>		<ul style="list-style-type: none"> <li>• To promote safety for Mohammad and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025</li> <li>• Mohammad will be supported to adjust to his new environment to lower risk of triggering former (WANDERING, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025</li> </ul>	<ul style="list-style-type: none"> <li>• TRIGGERS leading to VERBAL (yelling, screaming, calling names, etc.) as expression of behaviour include ( frustration, limitation in self expression (language barrier), misunderstanding care intention, etc.) Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</li> <li>• VERBAL Behaviour: If Mohammad is heard yelling, swearing or calling others names (In Arabic); 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: 08/11/2025 Revision by: Maryola Perion (RN)</li> <li>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, language barrier, etc.) Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</li> <li>• RESISTANCE to Care Need: If Mohammad is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</li> <li>• TRIGGERS leading to SOCIALLY Inappropriate (history of exposing self and will urinate in public areas, entering into other residents rooms and not easily redirected. May try to get into a bed that is being already occupied etc.) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• SOCIALLY Inappropriate Behaviour: If Mohammad is noted to (be exposing self and urinating on the floor, peeing and moved bowel in garbage, etc.), redirect him to his room and assist him to the toilet and clean area using appropriate PPE. Report episode to Registered Staff.</li> </ul> <p>If resident is trying to get into another residents room or bed. Try to redirect. If</p>				
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Al-Shehabi, Mohammad (922131005652)		Admission Date	08/11/2025	Location	5 519 A	

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<div>• Potential for Expressive Behaviour of (History of WANDERING, VERBAL, SOCIALLY/Sexual Inappropriate, RESISTANCE to care need), urinating/peed near the window, the vent, peeing and moved bowel in garbage related to Vascular Dementia, Anxiety. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</div>		<div>resident is not redirected, try getting a team member that speaks the same language as him. If not successful, team may have to escort the other resident from the area. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</div> <div>• WANDERING: Permit Mohammad to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div>	Registered Practical Nurse RN			
<div>• Potential for PAIN and alteration in comfort level related to Stroke, History of MVA which led to cervical disk problem. Most Current RAI Pain Score is 0. Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</div>	<div>• Promote RAI Pain Score of 0 through to the next review. Target Date: 11/09/2025</div>	<div>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</div> <div>• NON VERBAL CUES of PAIN for Mohammad include - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</div>	RN Registered Practical Nurse  PCA  Registered Practical Nurse RN			
<div>• At Risk for SOCIAL ISOLATION and/or</div>	<div>• Team members will support</div>	<div>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; music</div>				
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
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alteration to PSYCHO-SOCIAL well-being related to Disinterest, Rest/Sleep Patterns, Conflict with Others	Mo's in decreasing social isolation by participating in activities of personal choice for 15-20 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 11/09/2025  • To support Mo's Psycho-Social well being through to the next review. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 11/09/2025	programs, driving simulator, snoezelen cart, movies, parties, walking groups, socials, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • ONE to ONE: Provide him with individual visits for conversation, bedside activity, reading, reminiscing, walking, Abby Device, etc.) Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Potential for CONSTIPATION related to Vascular Dementia Revision on: 09/02/2025 Revision by: Maryola Perion (RN)	• Mohammad will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025  • To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• COMMUNICATION: Involve/collaborate with (Mohammad/SDM) for decision making regarding constipation management. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.  • 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			
• Alteration in skin integrity related to	• To promote intact skin integrity	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with	Registered			
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
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Resident	Al-Shehabi, Mohammad (922131005652)		Admission Date	08/11/2025	Location	5 519 A

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			Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SMOKING CONTRACT: (Residents name) 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).			Social Worker Administrator Registered Staff	
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA), has history of seizure Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with CVA through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with CVA for changes to health status and alteration or complications affecting neurological function. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • SEIZURE Disorder: Mohammad has potential for seizure activity, injury related to seizure disorder. Inform MD as it occurs. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)			PCA	
• Potential to experience alteration in RESPIRATORY FUNCTION related to: Chronic Obstructive Pulmonary Disorder (COPD). Revision on: 08/11/2025 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: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Chronic Obstructive Pulmonary Disorder (COPD) for changes to health status and alteration or complications affecting respiratory function. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • POSITIONING: To manage shortness of breath (SOB) elevate head of the bed to improve breathing.  • MEDICATION: Administer medication inhalers as per MD order and monitor for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)			Registered Staff PCA	
• Potential to experience alteration in CARDIAC FUNCTION related to: Arteriosclerotic Heart Disease,		• To treat and minimize signs/symptoms or complications associated with	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Arteriosclerotic Heart Disease, Hypertension, Aortic Valve replacement for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/11/2025				
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses						
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Hypertension, Aortic Valve replacement - 2016 Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	Arteriosclerotic Heart Disease, Hypertension, Aortic Valve replacement through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Arteriosclerotic Heart Disease, Hypertension as per MD Order and monitor for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • OXYGEN: Administer Oxygen as per MD order. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN Registered Practical Nurse RN	
• BOWEL Continence - Mohammad is continent and has self recognition of urge to defecate. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad to remain continent of bowels through next review date Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted.  • SELF TOILETING: Mohammad toilets self for bowel movements. Each shift ask if he had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	PCA  PCA	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Vascular Dementia, Language barrier, Moderate difficulty hearing. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• PRIMARY LANGUAGE: Mohammad primary language is Arabic. He is able to speak/understand Arabic.  No longer understands much English. Demonstration may support his understanding.  Can use technology to help support with translation if no staff or family are available. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • INTERPRETER Required: when needed and staff that speaks Arabic (Floor 5 RN on days) and other staff that speaks Arabic Revision on: 09/02/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Mohammad needs (constant) cueing or demonstrative instruction in tasks and activities. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		

<b>Allergies</b>	Varenicline	<b>D.O.B.</b>	03/03/1942	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Al-Shehabi, Mohammad (922131005652)	<b>Admission Date</b>	08/11/2025	<b>Location</b>	5 519 A

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• Altered VISION related to moderately impaired and uses eyeglasses. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• Mohammad will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• EYEGLASSES: Mohammad wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)			PCA	
• Potential to experience (seizure, etc.) related to adverse reaction to Varenicline/Champix. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• Mohammad will be protected from exposure to Varenicline/Champix each day through next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with adverse reaction to Varenicline/Champix for changes to health status and complications. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MEDICATION ALERT: Mohammad has adverse reaction to Varenicline/Champix. Prevent contact with and report if noted to experience symptoms of seizure, etc.. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Mohammad's adverser reaction Varenicline/Champix and minimize risk of exposure to Varenicline/Champix. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)				
• Nutrition Risk Level		• Mohammad will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/09/2025  • Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 08/21/2025 Revision by: Holly Laasanen	• EXTRA SNACK HS: Cheese and crackers or banana or soft cookie (alternating) at HS nourishment pass daily to help prevent hunger in early mornings. Staff may offer toast/any foods on unit in the mornings if he is hungry before breakfast arrives. Revision on: 10/07/2025 Revision by: Holly Laasanen (Dietitian (RD)) • Honor religious rituals related to diet/eating: no pork. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LABELLED SNACK PM: 355 ml can gingerale daily for hydration Revision on: 09/16/2025 Revision by: Holly Laasanen (Dietitian (RD))  • NUTRITION RISK: Mohammad is moderate risk level.			PCA Registered Practical Nurse RN	E
						PCA Registered Practical Nurse RN Dietitian (RD)	D
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
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• Nutrition Risk Level		(Dietitian (RD)) Target Date: 11/09/2025  • Mohammad will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1862 ml/day (25 ml/kg) through to next review date. Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/09/2025	Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Mohammad will receive regular diet, regular texture with minced meat			PCA		
			Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Mohammad drinks REGULAR/THIN Level 0 Fluids.			PCA		
			Revision on: 08/11/2025 Revision by: Ronnie Fung (FSM - Food Services Manager) • FLUID TARGET: Encourage Mohammad to drink at least 1500 ml per day			PCA		
			Revision on: 08/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.			Dietary aide PCA		
			• HIGH CALORIE/PROTEIN AM SNACK: Greek yogurt Mon/Wed/Fri Revision on: 09/16/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	D	
• Potential to experience alteration in MOOD related to Depression, Decline in Health Condition, Stroke, Dementia Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		• Mohammad will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Mohammad for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Mohammad effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)					
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Anxiety, Depression, New environment,		• To promote adequate rest/sleep for Mohammad based on identified sleep	• PREFERENCE: Mohammad prefers snacks prior to bed and to listen to music to fall asleep. Revision on: 08/11/2025					
Allergies	Varenicline		D.O.B.	03/03/1942		Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses							
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Vascular Dementia. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	patterns/preferences each night through to the next review date. Revision on: 08/19/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/09/2025	Revision by: Maryola Perion (RN) • REST PATTERN: Preferred bedtime: No specific time, often up and down, usual wake time: No specific time but an early morning/riser and naps on and off. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • MONITOR: Monitor Mohammad sleeping patterns. Document when awake or asleep. Revision on: 09/22/2025 Revision by: Gurjit Kaur (RN)	PCA    PCA	    Q1H
• URINARY (Mixed) INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad will have urinary incontinence managed every shift through to the next review period. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/09/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is (OCCASIONALLY Incontinen). Report change to level as noted. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	PCA	
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Incontinence	• To protect and maintain skin integrity each day through to the next review. Target Date: 11/09/2025	• 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	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Vascular Dementia. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad will be supported to maintain cognitive function through the review date. Current CPS is 4. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Mohammad is feeling lost or in confused state. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)		
• Increased risk for FALLS related to wandering, history of falls, unsteady gait,	• To promote safety, minimize risk for falls and/or fall related	• COMMUNICATION: Involve/collaborate with (Mohammad)/SDM in decision making in fall prevention Plan of Care.		
<b>Allergies</b>	Varenicline	<b>D.O.B.</b>	03/03/1942	<b>Physician</b> Albert Patrick Ng
<b>Diagnosis</b>	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses			
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refusing to use gait aid. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	injury each day through to the next review period. Target Date: 11/09/2025	Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, quiet environment, etc.) to reduce fall risk for Mohammad. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	PCA	D/E/N		
• Altered ability to complete Activities of Daily Living (ADLs) related to Stroke, Vascular Dementia, COPD Revision on: 08/11/2025 Revision by: Maryola Perion (RN)	• Mohammad will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025  • Mohammad will have ALL ADL care needs met each day through the next review date. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) Target Date: 11/09/2025	• ADL CARE male staff for care when possible and Arabic speaking staff when available as resident no longer comprehends English well  • BATHING: Mohammad prefers (shower) on Thursdays and Sundays on afternoon shift. Resident participates with cueing and instructions from staff. One staff (LIMITED) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Mohammad is Independent and able to turn and reposition self in bed. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • DRESSING: Mohammad is able to (lift his arms and legs with cueing and instructions). One staff member to provide LIMITED assistance for dressing UPPER & Extensive assistance for LOWER body. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • EATING: Mohammad is able to eat independently during meal times. He eats in the Wild flower ding room. Revision on: 08/11/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Mohammad is able to walk Independently with Supervision on the	PCA  PCA  PCA  PCA			
Allergies	Varenicline		D.O.B.	03/03/1942	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses					
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<b>Allergies</b>	Varenicline	<b>D.O.B.</b>	03/03/1942	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Al-Shehabi, Mohammad (922131005652)	<b>Admission Date</b>	08/11/2025	<b>Location</b>	5 519 A

## Care Plan Report

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### Diagnosis

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

<b>Allergies</b>	Varenicline	<b>D.O.B.</b>	03/03/1942	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Vascular dementia, unspecified(F01.9), Stroke, not specified as haemorrhage or infarction(I64), Chronic obstructive pulmonary disease, unspecified(J44.9), Benign hypertension(I10.0), Atherosclero...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Al-Shehabi, Mohammad (922131005652)	<b>Admission Date</b>	08/11/2025	<b>Location</b>	5 519 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
<ul style="list-style-type: none"><li>Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Hard of hearing</li><li>10/15/25: Hearing aid broken</li><li>Revision on: 10/16/2025</li><li>Revision by: Maryola Perion (RN)</li></ul>		<ul style="list-style-type: none"><li>Josephine will be supported to make basic needs known each day through to the review date.</li><li>Revision on: 07/24/2025</li><li>Revision by: Maryola Perion (RN)</li><li>Target Date: 01/18/2026</li></ul>	<ul style="list-style-type: none"><li>PRIMARY LANGUAGE: Josephine's primary language is Polish. The second language is English. She is able to speak/understand Polish and English.</li><li>Revision on: 07/24/2025</li><li>Revision by: Maryola Perion (RN)</li><li>HARD of HEARING and does not use hearing aids: Strategies to support hearing are speak into her right ear loudly, use physical gestures to demonstrate what you are doing, give simple and clear instructions.</li><li>Revision on: 07/24/2025</li><li>Revision by: Chelsea Campbell-Wright (ADOC)</li><li>SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.).</li><li>Revision on: 07/24/2025</li><li>Revision by: Maryola Perion (RN)</li><li>INSTRUCTION GUIDANCE: Josephine needs (constant) cueing or demonstrative instruction in tasks and activities.</li><li>Revision on: 07/24/2025</li><li>Revision by: Maryola Perion (RN)</li></ul>					PCA	
<ul style="list-style-type: none"><li>At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Low Motivation, Rest/Sleep Patterns.</li><li>ISE score = 6/6</li><li>Revision on: 09/21/2025</li><li>Revision by: Kameron Stewart (Recreation Aide)</li></ul>		<ul style="list-style-type: none"><li>Team members will support Josephine in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date.</li><li>Revision on: 09/21/2025</li><li>Revision by: Kameron Stewart (Recreation Aide)</li><li>Target Date: 01/18/2026</li></ul>	<ul style="list-style-type: none"><li>STRUCTURED ACTIVITIES: Invite her to programs of personal interest; (Specify, baking, music programs, movies, tea social, etc.).</li><li>Revision on: 09/21/2025</li><li>Revision by: Kameron Stewart (Recreation Aide)</li><li>SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as (reading paper, telephone conversations, watching TV in own room, walking, conversing with peers, etc.).</li><li>Revision on: 09/21/2025</li><li>Revision by: Kameron Stewart (Recreation Aide)</li><li>HELPFUL HINTS: Identify Helpful Hints to ease communication while providing care/interactions for (Specify; topic of interest such as family, cars, animals, hobbies, former career, history, travel, etc.)</li><li>ONE to ONE: Provide her with individual visits for (conversation, bedside activity, reading, reminiscing, etc.)</li><li>Revision on: 09/21/2025</li><li>Revision by: Kameron Stewart (Recreation Aide)</li><li>SOCIAL INTERACTION: Promote opportunity for Josephine to make friendships</li></ul>					ACT	
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre				Print Date	10/30/2025			
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A			





## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<p>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Low Motivation, Rest/Sleep Patterns.</p> <p>ISE score = 6/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p>			<p>and sit with friends during activities. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p>			
<p>• Potential for PAIN and alteration in comfort level. Most Current RAI Pain Score is 0. Revision on: 08/02/2025 Revision by: Maryola Perion (RN)</p>		<p>• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/18/2026</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>• NON VERBAL CUES of PAIN for Josephine includes - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</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: 08/02/2025 Revision by: Maryola Perion (RN)</p>		<p>RN Registered Practical Nurse</p> <p>PCA</p> <p>Registered Practical Nurse RN</p>	
<p>• URINARY Incontinence related to Dementia Revision on: 08/02/2025 Revision by: Maryola Perion (RN)</p>		<p>• Josephine will receive support to (use toilet) and promote urinary continence each shift through to the next review. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</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: 07/24/2025 Revision by: Maryola Perion (RN)</p> <p>• URINARY Continence level is Frequently Incontinent. Report change to level as noted.</p>		<p>PCA</p>	
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 01/18/2026	Revision on: 08/02/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses protective underwear large Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC)	PCA	
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 08/02/2025 Revision by: Maryola Perion (RN)	• Josephine will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with (Josephine/SDM) for decision making regarding constipation management. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.  • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.  • NUTRITION increased fibre intervention in place. See Nutrition Care Plan.  • BOWEL PROTOCOL: In place as per MD order	Registered Staff  Registered Staff  Diet Registered Staff Registered Staff	
• Strength Training Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increased strength of B/L LE from 3+/5 to 4/5 in next 3 months; Revision on: 10/21/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/18/2026	• 2 person side to side assist for transfer training with RW; Ensure pushing from armrest when getting up and hands back to armrest when sitting in the chair. 2-3 x a week; 2:1 assist gait training with RW with w/c follow up, distance as best tolerated, 2-3 x a week; Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Ambulation/Gait Training Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increased independence in walking from 2 assist to 1 assist in next 6 months; Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Strengthening exs for B/L UE and LE with 1-2lbs, 10 reps, or as best tolerated, 2-3 x a week; Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
<b>Allergies</b>	MSG, Aspartame, Perfume		<b>D.O.B.</b>	05/15/1925
<b>Diagnosis</b>	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses		<b>Physician</b>	Albert Patrick Ng
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Bacic, Josephine (922131005647)	<b>Admission Date</b>	07/24/2025	<b>Location</b> 5 505 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Ambulation/Gait Training Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	Target Date: 01/18/2026					
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Thin fragile Skin Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• 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			
• Expressed Wishes and Beliefs related to Josephine's Medical Treatment and End of Life Care Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To support and honor Josephine's expressed wishes and beliefs through to the End of Life. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• CPR: DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • FAMILY at bedside: Expressed wishes that FAMILY to be present at bedside during end of life. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in CARDIAC FUNCTION related to: Coronary Heart Disease, Hypertension Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)	• To treat and minimize signs/symptoms or complications associated with Coronary Heart Disease, Hypertension through to the next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Heart Disease, Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication as per MD Order and monitor for side effects. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN			
• Potential for Expressive Behaviour of (WANDERING PHYSICAL (Is combative with sons - pushing away and swatting especially with washing, peri care and	• To promote safety for Josephine and/or others during each episode of Expressive Behaviour through to the next	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Josephine for indications to change in or for escalating expressive behaviour risk. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)				
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A



## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
when experiencing delusions, will throw items, pinch or grab others), SOCIALLY Inappropriate (rummaging), RESISTANCE to care need (refuse medication) related to Dementia, history of delusions and hallucinations. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026  • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 2. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026  • Josephine will be supported to adjust to her new environment to lower the risk of triggering the former (WANDERING, PHYSICAL inappropriate, etc.) behaviour episodes through to the next review. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• TRIGGERS leading to PHYSICAL (swatting, pushing away, throwing, pinching or grabbing, etc.) as expression of behaviour include (anger, frustration, fearfulness, confusion, etc.) Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Josephine is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, refusing peri care as expressions of behaviour include confusion, misunderstanding care needs, poor judgement, paranoid thought process, Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • RESISTANCE to Care Need: If Josephine is declining to bathe, change clothes, take medications, eat, peri care, explain resident clearly and loudly in right ear what you are doing. If Josephine continues to escalate re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • TRIGGERS leading to SOCIALLY Inappropriate (rummaging through drawers or paperwork, etc.) as expressions of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Josephine is noted to be (rummaging, etc.) gently redirect her (to move to a quieter area, etc., or provide distraction activity). Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • WANDERING: Permit Josephine to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)			
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (WANDERING PHYSICAL (Is combative with sons - pushing away and swatting especially with washing, peri care and when experiencing delusions, will throw items, pinch or grab others), SOCIALLY Inappropriate (rummaging), RESISTANCE to care need (refuse medication) related to Dementia, history of delusions and hallucinations.</div> <div>Revision on: 07/30/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>		<div>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div>	Registered Practical Nurse RN			
<div>• Altered VISION related to Macular Degeneration.</div> <div>Revision on: 07/30/2025</div> <div>Revision by: Shina Wadhwa (Physical Therapist)</div>	<div>• To treat and minimize complications of macular degeneration through to next review date.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 01/18/2026</div>	<div>• EYEGLASSES: Josephine wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping.</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer ophthalmic medication as as per MD Order. Monitor its effectiveness and for side effects.</div> <div>• VISUAL IMPAIRMENT: Resident has macular degeneration resulting in (blurring of vision).</div> <div>Revision on: 07/24/2025</div> <div>Revision by: Maryola Perion (RN)</div>	PCA   Registered Staff  PCA			
<div>• Increased risk for FALLS related to</div>	<div>• To promote safety, minimize</div>	<div>• COMMUNICATION: Involve/collaborate with Josephine/Stan in decision making in</div>				
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A

## Care Plan Report

Focus		Goal	Interventions						Position	Freq/Resolved
unsteady gait, history of falls, Dementia diagnosis. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/18/2026	fall prevention Plan of Care. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Josephine. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • TOILETING: Follow individual toileting plan (refer to Continence Plan of Care) to minimize unsafe self attempts to use toilet. Revision on: 07/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program. LE strengthening- AROM, with minimal weights 5-10 reps/xcise, squats, sit to stands 5-10 reps/xcise, Sitting balance- perturbations to maintain 10s 5-10 reps, 1:1 gait training with 3 wheeled walker 100 feet, with PT- 3-5x week, participates with group exs classes-3x week Revision on: 08/21/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) • ALARM: Requires Bed alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/29/2025 Revision by: Lucy(Xifeng)Lu (RPN)						PCA	D/E/N
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia, Hard of Hearing. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Josephine will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 07/24/2025	• BATHING: Josephine prefers (tub bath) on Wednesday and Saturday on Day shift. One staff (EXTENSIVE) assistance for bathing. Requires two staff for transfer. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN)						PCA	
Allergies	MSG, Aspartame, Perfume					D.O.B.	05/15/1925		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses									
Facility	Berkshire Care Centre								Print Date	10/30/2025
Resident	Bacic, Josephine (922131005647)					Admission Date	07/24/2025		Location	5 505 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision by: Maryola Perion (RN) Target Date: 01/18/2026  • Josephine will have ALL ADL care needs met each day through the next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	<ul style="list-style-type: none"><li>• BED MOBILITY: Josephine is able to assist with cueing and supervision. One staff EXTENSIVE assistance for bed mobility. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</li><li>• DRESSING: Josephine is able to (lift her arms and legs with cueing and encouragement). One staff to provide (EXTENSIVE assistance for dressing UPPER &amp; LOWER body. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</li><li>• EATING: Josephine is able to eat Independently with 1 Staff to provide set up and supervision for eating. Eats in the wildflower lane dining room. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</li><li>• LOCOMOTION: Josephine is using a wheelchair with one staff to propel her on the unit. She will also use her walker at times and requires one staff to walk with her on the unit with Limited assistance. Revision on: 08/02/2025 Revision by: Maryola Perion (RN)</li><li>• PERSONAL HYGIENE: Josephine is able to (assist with cueing and encouragement). One staff to provide (LIMITED) assistance for hygiene. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</li><li>• HAND HYGIENE: 1 staff to provide (LIMITED) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</li><li>• TOILET USE: Josephine is able to (assist with transfer). One staff to provide (EXTENSIVE) assistance for toileting. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)</li><li>• TRANSFERRING: Josephine is able to transfer with assistance. two staff to provide Extensive assistance for transferring. Revision on: 08/02/2025 Revision by: Maryola Perion (RN)</li><li>• ORAL CARE: Josephine has (upper and lower dentures). 1 staff to provide</li></ul>			PCA   <	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia, Hard of Hearing. Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)			(TOTAL) assistance for oral care, to clean and store her dentures. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 07/30/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Josephine will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Josephine is feeling lost or in confused state. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)				
• Alteration in skin integrity related to RASH  #2 to left lateral calf Revision on: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote intact skin integrity through healing of RASH by next review date. Revision on: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with #2 left lateral calf for changes to health status and alteration or complications affecting skin integrity. Revision on: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TOPICAL TX: Apply topical treatment to #2 left lateral calf as MD Order. Revision on: 07/25/2025		Registered Practical Nurse RN  Registered Practical		
Allergies	MSG, Aspartame, Perfume			D.O.B.	05/15/1925	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Bacic, Josephine (922131005647)			Admission Date	07/24/2025	Location	5 505 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
		Revision by: Danielle Loreto (RAI Coordinator)  • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 07/25/2025 Revision by: Danielle Loreto (RAI Coordinator)	Nurse Registered Practical Nurse				
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of MSG, Aspartame, Perfume. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	• Josephine will be protected from exposure to allergen each day through next review date. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • ALLERGY ALERT: Josephine has ALLERGY to MSG, Aspartame, Perfume. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Josephine's Allergy to (MSG, Aspartame, Perfume) and minimize risk for exposure to allergen. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)					
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	• To promote adequate rest/sleep for Josephine based on identified sleep patterns/preferences each night through to the next review date. Revision on: 07/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• PREFERENCE: Josephine likes to have a snack prior to bed. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) • REST PATTERN: Preferred bedtime: 9:00pm, usual wake time: 8:00am and frequently naps during the day. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)	PCA				
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 07/24/2025	• Josephine will have bowel incontinence managed every shift through to the next review	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.	Registered Staff				
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Maryola Perion (RN)		period. Revision on: 07/24/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• BOWEL Continence level is Infrequently Incontinent. Report change to level as noted. Revision on: 08/02/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.  • INCONTINENCE PRODUCT: Resident uses a pull up. Revision on: 07/24/2025 Revision by: Maryola Perion (RN)			PCA  PCA  PCA	
• Nutrition Risk Level		• Josephine will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026  • Will weigh within GWR 55-60 kg through to next review date. Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/18/2026  • Josephine will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (27 ml/kg using 55 kg weight) through to next review date. Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD))	• NUTRITION RISK: Josephine is moderate risk level. Revision on: 10/22/2025 Revision by: Brittany Hyde (Registered Dietitian) • DIET ORDER: Josephine will receive regular diet, minced texture Revision on: 07/24/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Josephine drinks REGULAR/THIN Level 0 Fluids. Revision on: 07/24/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID TARGET: Encourage Josephine to drink a minimum of 1200 ml/day Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) • PORTION SIZE: Prefers small portions at meals. Revision on: 08/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FOOD INTOLERANCE: Aspartame and MSG (reaction: unknown, not life-threatening per POA). Our menu provides negligible aspartame and MSG. Revision on: 08/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 1 bottle chocolate flavor Boost Plus TID Revision on: 07/28/2025 Revision by: Brittany Hyde (Registered Dietitian) • HIGH FIBRE: Offer 100 ml prune juice at breakfast daily Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)  PCA  PCA  PCA  PCA Restorative Care Aide  PCA	D/E
Allergies	MSG, Aspartame, Perfume		D.O.B.	05/15/1925	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Bacic, Josephine (922131005647)		Admission Date	07/24/2025	Location	5 505 A	

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	Target Date: 01/18/2026			


### Diagnosis

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

<b>Allergies</b>	MSG, Aspartame, Perfume	<b>D.O.B.</b>	05/15/1925	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Atherosclerotic heart disease of native coronary artery(I25.10), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Benign hypertension(I10.0), Other and u...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Bacic, Josephine (922131005647)	<b>Admission Date</b>	07/24/2025	<b>Location</b>	5 505 A



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	<div>• Arnold will have urinary incontinence managed every shift through to the next review period. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 11/05/2025</div>	<div>• 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)</div> <div>• URINARY Continence level is OCCASIONALLY Incontinent. Report change to level PCA as noted. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div> <div>• INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list PCA on the floor. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>				
<div>• Potential for PAIN and alteration in comfort level related to mid/lower back pain. Most Current LTCF Pain Score is 0. Revision on: 10/20/2025 Revision by: Maryola Perion (RN)</div>	<div>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 11/05/2025</div> <div>• Promote RAI Pain Score of 0 through to the next review. Target Date: 11/05/2025</div>	<div>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</div> <div>• NON VERBAL CUES of PAIN for Arnold includes - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 09/23/2025 Revision by: Maryola Perion (RN)</div>	<div>RN Registered Practical Nurse</div> <div>PCA</div> <div>Registered Practical Nurse RN</div>			
<div>• Arny DECLINES PARTICIPATION in structured programs related to personal choice.  ISE score = 4/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</div>	<div>• Arny participates in Independent/Self-Directed activities monthly through to the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 11/05/2025</div>	<div>• SELF-DIRECTED ACTIVITIES: Encourage Arny to engage in self-directed activities such as reading, listening to music, iPad games, word searches, colouring, etc.). Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</div> <div>• FRIENDLY VISIT: Provide him one to one visits as tolerated. Touch base to maintain contact and to converse about topics of interest, identify up-coming special events, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</div>				
Allergies	No Known Allergies	D.O.B.	08/08/1935	Physician	Albert Patrick Ng	
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure(I5...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			• INVITATION: Offer friendly invite to structured programs scheduled in the home. Music programs, reading circles etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Arnold has CKD Revision on: 08/31/2025 Revision by: Maryola Perion (RN)		• To treat and minimize complications associated with CKD through to next review date. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) Target Date: 11/05/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with CKD for changes to health status and alteration or complications affecting renal function. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for CKD as per MD order and monitor for side effects. Revision on: 08/31/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in CARDIAC FUNCTION related to; Coronary Artery Disease, Wellens Syndrome LAD and stents. Query CHF. Revision on: 08/31/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Coronary Artery Disease, Wellens Syndrome LAD and stents, query CHF through to the next review date. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) Target Date: 11/05/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Artery Disease, Wellens Syndrome LAD and stents for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for query CHF as per MD Order and monitor for side effects. Revision on: 08/31/2025 Revision by: Maryola Perion (RN)				Registered Practical Nurse RN
• Strength (Bicycle/peddler)Training Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increased strength for B/L UE from 3+/5 to 4/5 in next 3 months Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 11/05/2025	• Strengthening exs with peddlers or weights of 2-3lbs, 15 mins/10reps,1-2 sets;2-3 x a week; Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist)				PT - Physiotherapist PTA
• Balance Training Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Maintain scores on tinetti to reflect low risk of falls in next 3 months;	• Dynamic balance exs for maintaining Tinetti scores;10 reps/exs, 2-3 x a week; Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist)				PT - Physiotherapist
Allergies	No Known Allergies			D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Berg, Arnold (922131005651)			Admission Date	08/07/2025	Location	5 511 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 08/13/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 11/05/2025				PTA	
• Nutrition Risk Level		<p>• Arnold will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/05/2025</p> <p>• Will weigh within realistic GWR 68-78 kg through to next review date. Revision on: 08/15/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/05/2025</p> <p>• Arnold will be adequately hydrated aeb drinking at least 83% of total fluid requirement: 1798 ml/day (25 ml/kg using 71.9 kg weight) through to next review date. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/05/2025</p>	<p>• NUTRITION RISK: Arnold is low risk level. Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Arnold will receive regular diet, regular texture Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID CONSISTENCY: Arnold drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID TARGET: Encourage Arnold to drink at least 1500 ml/day Revision on: 08/14/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>			Dietitian (RD)	
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to		• To promote adequate rest/sleep for Arnold based on identified sleep	• REST PATTERN: Preferred bedtime 2100, usual wake time 0700 and daytime naps at varied times when he wishes. Revision on: 08/07/2025			PCA	
Allergies	No Known Allergies			D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Berg, Arnold (922131005651)			Admission Date	08/07/2025	Location	5 511 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Dementia, new home Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		patterns/preferences each night through to the next review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/05/2025	Revision by: Danielle Loreto (RAI Coordinator)			
• BOWEL Continence - Arnold is continent and has self recognition of urge to defecate. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Arnold to remain continent of bowels through next review date Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/05/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted.  • SELF TOILETING: Arnold toilets self for bowel movements. Each shift ask if he had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA PCA	
• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need, SEXUAL) nature related to Dementia Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Arnold will be supported to adjust to his/her new environment to lower risk of triggering former VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need, SEXUAL) behaviour episodes through to the next review. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/05/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Arnold for indications to change in or for escalating expressive behaviour risk. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL (calling names, yelling) as expression of behaviour include (loss of control, frustration, misunderstanding care intention) Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • VERBAL Behaviour: If Arnold is heard yelling, or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusing medication) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process) Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 511 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need, SEXUAL) nature related to Dementia</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)			<ul style="list-style-type: none"><li>• RESISTANCE to Care Need: If Arnold is declining to (bathe, change clothes, take medications, eat) re-approach in 10-15 minutes. Report episode to Registered Staff.</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none"><li>• SOCIALLY Inappropriate Behaviour: If Arnold has sexual expressions gently redirect him (to focus on task at hand, to move to quieter area, private space and give him privacy).</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none"><li>• WANDERING: Permit Arnold to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none"><li>• HALLUCINATION: Will see his old landlord being present where he is in the moment when she is not there. Do not argue with the resident. Offer support and assess for risk, safety and any fear.</li></ul> Revision on: 08/07/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
			<ul style="list-style-type: none"><li>• DELUSION: has a history of delusions believing neighbour is girlfriend and people are trying to steal girlfriend.</li></ul>				
			Do not argue with the resident. Offer support and assess for risk, safety and any fear.				
			Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"><li>• Potential to experience alteration in MOOD as exhibited by has a history of delusions believing neighbour is girlfriend and people are trying to steal girlfriend. Has anxiety about being at Berkshire and wants to go home. related to Dementia</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"><li>• Arnold will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/05/2025	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with Arnold/SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed.</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
			<ul style="list-style-type: none"><li>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Arnold for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</li></ul> Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	08/08/1935		Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025		Location	5 511 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Risk for Impaired SKIN INTEGRITY related to Frailty		• To protect and maintain skin integrity each day through to the next review. Target Date: 11/05/2025	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Staff as noted.		PCA	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension) related to Dementia Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Arnold will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/05/2025	• COMMUNICATION: Involve/collaborate with Arnold/SDM for decision making about strategies needed to support effective communication. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • PRIMARY LANGUAGE: Arnold primary language is English. He is able to speak/understand English. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Arnold needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Arnold will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) Target Date: 11/05/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Arnold is feeling lost or in confused state. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Arnold can comprehend and follow. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Increased risk for FALLS related to (Dementia). Limitation of cognitive function/altered judgement Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 11/05/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment: reduce clutter, etc.) to reduce fall risk for Arnold.		PCA	D/E/N
Allergies	No Known Allergies		D.O.B.	08/08/1935	Physician	Albert Patrick Ng
Diagnosis	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Berg, Arnold (922131005651)		Admission Date	08/07/2025	Location	5 511 A

## Care Plan Report

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## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to cognitive loss, decreased understanding and ability to follow direction Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>		<ul style="list-style-type: none"> <li>• PERSONAL HYGIENE: Arnold is able to complete his hygiene independently such as washing his face, lotions, deoderant, bruising hair with set up and supervision. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, apply sanitizer, rub hands together, dry hands for hand hygiene. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• TOILET USE: Arnold is independent with toileting. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• TRANSFERRING: Arnold is independent with transferring. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• ORAL CARE: Arnold has full upper and lower dentures, Needs team to complete denture care. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• SHAVING - Arnold requires the team to complete shaving on his shower days. Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>	PCA  PCA  PCA  PCA  PCA	D
<p>• Expressed Wishes and Beliefs related to Arnold Medical Treatment and End of Life Care Revision on: 08/07/2025 Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 11/05/2025</p>	<p>• 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)</p>		

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	08/08/1935	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Berg, Arnold (922131005651)	<b>Admission Date</b>	08/07/2025	<b>Location</b>	5 511 A



## Care Plan Report


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**Diagnosis**

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	08/08/1935	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Vascular dementia, unspecified(F01.9), Delusional disorder(F22.0), Hallucinations, unspecified(R44.3), Atherosclerotic heart disease of native coronary artery(I25.10), Congestive heart failure (I5...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Berg, Arnold (922131005651)	<b>Admission Date</b>	08/07/2025	<b>Location</b>	5 511 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>• Marion Bliz requires temporary SAFETY CHECKS for escalated behaviour for duration of 72 hours, related try to initiated Physical aggression towards another resident.</li> </ul> Revision on: 10/26/2025 Revision by: Ravinder Kaur (Registered Nurse)		<ul style="list-style-type: none"> <li>• Safety Check initiated on 10/26/2026 as temporary measure to monitor resident each day until completed date 10/29/2025.</li> </ul> Revision on: 10/26/2025 Revision by: Ravinder Kaur (Registered Nurse) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• Check Marion Bliz location every 30 minutes.</li> </ul> Revision on: 10/26/2025 Revision by: Ravinder Kaur (Registered Nurse)		PCA	Q1/2hr
<ul style="list-style-type: none"> <li>• Potential for Acute PAIN and alteration in comfort level related to BPH, parkinson's disease, HTN and hip replacement, Left hip. Most Current RAI Pain Score is (fill in score)</li> </ul> Revision on: 10/24/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> <li>• Promote RAI Pain Score of 0 through to the next review.</li> </ul> Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• 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.</li> </ul>		RN Registered Practical Nurse	
<ul style="list-style-type: none"> <li>• BOWEL Continence - Marian is continent and has self recognition of urge to defecate.</li> </ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> <li>• Marianto remain continent of bowels through next review date</li> </ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• BOWEL Continence level is CONTINENT. Report change to level as noted.</li> </ul> PCA		PCA	
<ul style="list-style-type: none"> <li>• Marian is at high risk for ELOPEMENT related to Dx with Dementia and resided on the secure unit.</li> </ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> <li>• To promote Marian safety and minimize risk for episode of elopement each day through next review date.</li> </ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> <li>• DIVERSION ACTIVITY: Resident responds well to (watching TV, etc.) to divert attention when exit seeking.</li> </ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
<b>Allergies</b>	No Known Allergies		<b>D.O.B.</b>	08/15/1950	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
<b>Facility</b>	Berkshire Care Centre				<b>Print Date</b>	
<b>Resident</b>	Blaz, Marian (922131005670)		<b>Admission Date</b>	10/23/2025	<b>Location</b>	

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Target Date: 01/21/2026					
<ul style="list-style-type: none"><li>Increased risk for FALLS related to HTN, dementia, Parkinson's disease.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.</li></ul> Target Date: 01/21/2026	<ul style="list-style-type: none"><li>CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>FOOTWEAR: Ensure resident wears appropriate footwear at all times.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	D/E/N		
<ul style="list-style-type: none"><li>Expressed Wishes and Beliefs related to Marian Medical Treatment and End of Life Care</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>To support and honor Marian expressed wishes and beliefs through to the End of Life.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>CPR: Marian wishes to have CPR and TRANSFER to hospital.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
<ul style="list-style-type: none"><li>Potential to experience alteration in NEUROLOGICAL FUNCTION related to: hx of multiple TRANSIENT ISCHEMIC ATTACK (TIAs), PARKINSON'S Disease</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>To treat and minimize signs/symptoms or complications associated with diagnosis) through to the next review date.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>MEDICATION: Administer medication for diagnosis as per MD order. Monitor effectiveness and for side effects.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with TIA and parkinson's disease for changes to health status and alteration or complications affecting neurological function.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>Observe SWALLOWING: Inform Registered staff of changes or any signs of difficulty in swallowing (coughing during eating, drooling, etc.).</li></ul>	PCA Registered Staff			
<ul style="list-style-type: none"><li>Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia and new environment.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>To promote adequate rest/sleep for Marian based on identified sleep patterns/preferences each night through to the next review date.</li></ul>	<ul style="list-style-type: none"><li>REST PATTERN: Preferred bedtime 20:30, usual wake time 02:00 and take a nap in the middle of day.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>MONITOR: Monitor Marian sleeping patterns. Document when awake or asleep.</li></ul>	PCA	Q1H		
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Blaz, Marian (922131005670)		Admission Date	10/23/2025	Location	5 524 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension		• To treat and minimize signs/symptoms or complications associated with Diagnosis through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Specify cardiac condition) for changes to health status and alteration or complications affecting cardiac function.  • MEDICATION: Administer medication for (specify Etiology/Diagnosis) as per MD Order and monitor for side effects.		Registered Staff  Registered Practical Nurse RN	
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.  • PHARMACY MEDICATION REVIEW: Request Pharmacy Medication Review when clinically appropriate. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		Registered Staff	
• URINARY INCONTINENCE related to Benign Prostatic Hyperplasia (BPH), Dementia Diagnosis Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• Marian will have urinary incontinence managed every shift through to the next review period. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • URINARY Continence level is FREQUENTLY Incontinent, or TOTAL Incontinent). Report change to level as noted. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Blaz, Marian (922131005670)		Admission Date	10/23/2025	Location	5 524 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	<ul style="list-style-type: none"><li>• Marian will receive support to use toilet and promote urinary continence each shift through to the next review.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>• INCONTINENCE PRODUCT: Resident uses pull up every day.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• VOIDING DIARY: 3 Day voiding diary in place</li></ul>	PCA  PCA	  Q1H		
<ul style="list-style-type: none"><li>• Risk for Impaired SKIN INTEGRITY related to Incontinence, Thin fragile Skin and cognitive impairment.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>• To protect and maintain skin integrity each day through to the next review.</li></ul> Target Date: 01/21/2026	<ul style="list-style-type: none"><li>• 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.</li></ul>	PCA			
<ul style="list-style-type: none"><li>• Potential to experience alteration in MOOD as exhibited by (reported been tearful at times and appear to be sad with a flat affect) related to Dx with Dementia.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>• Marian will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marian indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• RESIDENT STRENGTHS: Build on Marian effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING, , verbally aggression, delusions, resist care, hallucination) nature related to Symptom Progression of Dementia/Alzheimer , Sundowning</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"><li>• To promote safety for Marian and/or others during each episode of Expressive Behaviour through to the next review date.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marian for indications to change in or for escalating expressive behaviour risk.</li></ul> Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• TRIGGERS leading to PHYSICAL (specify; Hitting, Punching, Slapping, Biting, Kicking, Sexual Abuse, etc.) as expression of behaviour include (Specify cause; anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning, hunger, constipation, startling from sleep, etc.)</li></ul>	All			
Allergies	No Known Allergies		D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Blaz, Marian (922131005670)		Admission Date	10/23/2025	Location	5 524 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none"> <li>• TRIGGERS leading to VERBAL ( yelling) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> <li>• VERBAL Behaviour: If Marian is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> <li>• 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: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> <li>• RESISTANCE to Care Need: If Marian is declining to (bathe, change clothes, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> <li>• WANDERING: Permit Marian to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> <li>• HALLUCINATION: see propel partying, a blurred faced person in the kitchen, big leaves, a doll. The team to monitor him each shift, document on PCC when present. Use redirection, distraction techniques as needed. Refer to MD as needed. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> <li>• DELUSION: Believe he is going back to live at home in Mississauga with spouse. Believes family has stolen his items. Use redirection, distraction techniques as needed. Refer to MD as needed Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</li> </ul>	Registered Practical Nurse RN	
• Altered VISION related to Blindness to	• Marian supported to use	• EYEGLASSES: Marian wears non prescription eyeglasses. Assist to clean	PCA	
<b>Allergies</b>	No Known Allergies		<b>D.O.B.</b>	08/15/1950
			<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses			
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Blaz, Marian (922131005670)	<b>Admission Date</b>	10/23/2025	<b>Location</b> 5 524 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
right eyes Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		eyeglasses for vision correction daily through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	eyeglasses as needed and store ( on night table, in night table drawer, etc.) when sleeping. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, slurred speech, mumbled speech, etc.) related to Weak or absent voice Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)		• Marian will be supported to maintain current communication abilities to (SPECIFY: express self, comprehend information, etc.) each day through to the review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026  • Marian will be supported to make basic needs known each day through to the review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• PRIMARY LANGUAGE: Marian primary language is Polish. But he is able or unable to speak/understand most English . Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
• 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) Target Date: 01/21/2026	• ORIENTATION: Gently reorient to ( person, place, time) as needed when Marian is feeling lost or in confused state. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine and activities. PCA Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)				
Allergies	No Known Allergies			D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Blaz, Marian (922131005670)			Admission Date	10/23/2025	Location	5 524 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation</div>		<div>• Marian will have ALL ADL care needs met each day through the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026</div>	<div>• BATHING: Marian prefers showers on Monday and Thursday day shift. He requires one team member wash his lower body. He is able to wash upper body. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN)</div>				
			<div>• BED MOBILITY: Marian requires limited assistance from the team to help him to turn and reposition in bed. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
		<div>• Marian will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026</div>	<div>• DRESSING: Marian is able to dress/undress herself from head to toe with minimum assistance from the team. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
			<div>• EATING: Marian is able to eat by himself on the floor dining room. Supervision required from the team. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
			<div>• LOCOMOTION: Marian is using a cane for locomotion on the unit. He requires supervision/reminder to ensure he uses his cane all the time for ambulation. Walker is available for long distances. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
			<div>• PERSONAL HYGIENE: Marian requires limited assistance from the team to help him with wash his hands, face, comb his hair and peri-care. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
			<div>• HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
			<div>• TOILET USE: Marian requires one staff member to help him transfer on/off the toilet. He is able to cleanse, and pull up his pull up and clothes after. Revision on: 10/23/2025 Revision by: Jenny Liu (RAI Coordinator)</div>				
Allergies	No Known Allergies			D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Blaz, Marian (922131005670)			Admission Date	10/23/2025	Location	5 524 A



## Care Plan Report

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<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	08/15/1950	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Blaz, Marian (922131005670)	<b>Admission Date</b>	10/23/2025	<b>Location</b>	5 524 A


Care Plan Report

Diagnosis

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

Allergies	No Known Allergies	D.O.B.	08/15/1950	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Parkinson's disease(G20), Benign neoplasm of prostate(D29.1), Benign hypertension(I10.0), Transient cerebral ischaemic attack, unspecified(G45.9), Presence of artificia...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Blaz, Marian (922131005670)	Admission Date	10/23/2025	Location	5 524 A

## Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: Restless Leg Syndrome Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Restless Leg Syndrome through to the next review date. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• COMMUNICATION: Involve/ collaborate with (Erna)/ SDM in decision making of neurological care management for Restless Leg Syndrome. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Restless Leg Syndrome as per MD order. Monitor effectiveness and for side effects. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Restless Leg Syndrome for changes to health status and alteration or complications affecting neurological function. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)			PCA	
• Potential to experience alteration in CARDIAC FUNCTION related to: Dyslipidemia Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Dyslipidemia through to the next review date. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• COMMUNICATION: Involve/collaborate with (Erna)/SDM in decision making of Cardiac Care Management for Dyslipidemia. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with (Specify cardiac condition) for changes to health status and alteration or complications affecting cardiac function.			Registered Staff	
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Dementia other than Alzheimer's disease Major Neurocognitive Disorder Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Target Date: 01/14/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.			PCA	
• Potential to experience alteration in MOOD as exhibited by repetitive anxious complaints/concerns non health related to Bipolar Disorder, Dementia, Anxiety	• Erna will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Erna for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/16/2025				
Allergies	No Known Allergies	D.O.B.	04/12/1949	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 10/26/2025 Revision by: Maryola Perion (RN)		Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Erna's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • FAMILY SUPPORT: Erna enjoys visits from the husband. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)				
• Increased risk for FALLS related to history of falls, Dementia other than Alzheimer's disease, Major Neurocognitive Disorder. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/14/2026	• COMMUNICATION: Involve/collaborate with Erna/SDM in decision making in fall prevention Plan of Care. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Erna. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)				
• Potential for Persistent PAIN and		• To promote resident comfort	• COMMUNICATION: Involve/collaborate with (Erna)/SDM) about pain management,				
Allergies	No Known Allergies		D.O.B.	04/12/1949		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025		Location	5 521 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
alteration in comfort level related to dementia, reports of severe, constant, lower back pain. Most Current MDS Pain Score is 0. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)	and effectively manage PERSISTENT pain each day through to the next review. Target Date: 01/14/2026  • Promote RAI Pain Score of 0 through to the next review. Target Date: 01/14/2026	goals of treatment, plan of care, prognosis and treatment options. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse  Registered Practical Nurse RN	
• Potential for URINARY INCONTINENCE related to Dementia Revision on: 10/25/2025 Revision by: Maryola Perion (RN)	• Erna will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is Usually Continent. Report change to level as noted. Revision on: 10/25/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses a pull up. Revision on: 10/25/2025 Revision by: Maryola Perion (RN)	Registered Staff  PCA  PCA	
• Altered VISION related to history of cataract removal, Astigmatism to Left eye as per papers Revision on: 10/25/2025 Revision by: Maryola Perion (RN)	• Erna will be supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• EYEGLASSES: Erna wears eyeglasses. Assist to clean eyeglasses as needed and store in night table drawer when sleeping. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	PCA	
• Nutrition Risk Level	• Erna will be adequately nourished and consuming >75% at meals and snacks through to next review date. Revision on: 10/28/2025	• NUTRITION RISK: Erna is low risk level. Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Erna will receive Gluten restricted diet, Regular texture (Erna is provided gluten-free menu substitutions at meals/snacks)	Dietitian (RD)  PCA	
<b>Allergies</b>	No Known Allergies		<b>D.O.B.</b>	04/12/1949
<b>Diagnosis</b>	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses		<b>Physician</b>	Albert Patrick Ng
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Broom, Erna (922131005668)		<b>Admission Date</b>	10/16/2025
			<b>Location</b>	5 521 A

## Care Plan Report

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## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 10/16/2025 Revision by: Maryola Perion (RN)		patterns/preferences each night through to the next review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	Revision by: Maryola Perion (RN)  • REST PATTERN: Preferred bedtime: Around 8:30pm, usual wake time: between 6am to 8am and like to take 1 afternoon nap Revision on: 10/16/2025 Revision by: Maryola Perion (RN)			PCA	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to hearing worse on the Left ear than the Right ear. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)		• Erna will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• PRIMARY LANGUAGE: Erna's primary language is English. She is able to speak/understand English. Understands some German. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • HEARING AID: Apply/Remove to/from Both ear/s. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored: in the bed side drawer Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • HARD of HEARING: Strategies to support hearing: Approach Erna on her Left ear. Right ear is worse than the Left ear. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)			PCA	D/E
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 10/16/2025 Revision by: Maryola Perion (RN)		• Erna will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/26/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Erna is feeling lost or in confused state. Revision on: 10/16/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.			Registered Staff	
Allergies	No Known Allergies			D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Broom, Erna (922131005668)			Admission Date	10/16/2025	Location	5 521 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Potential for Expressive Behaviour of (History of WANDERING, VERBAL, Rummaging, hoarding, RESISTANCE to care need, history of delusion related to Dementia, Bipolar, Anxiety, Major Neurocognitive Disorder</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> <li>Erna will be supported to adjust to her new environment to lower risk of triggering former (WANDERING, VERBALLY inappropriate, etc.) behaviour episodes through to the next review.</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) Target Date: 01/14/2026	<ul style="list-style-type: none"> <li>ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Erna for indications to change in or for escalating expressive behaviour risk.</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>TRIGGERS leading to VERBAL (yelling, screaming, calling names, etc.) as expressions of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.)</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>VERBAL Behaviour: If Erna is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>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.)</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>RESISTANCE to Care Need: If Erna is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>TRIGGERS leading to SOCIALLY Inappropriate (hoarding, rummaging, etc.) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>SOCIALLY Inappropriate Behaviour: If Erna is seen rummaging and hoarding, staff remove items in her room. Provide redirection, reassurance and health teachings.</li> </ul> Revision on: 10/16/2025 Revision by: Maryola Perion (RN)			
Allergies	No Known Allergies		D.O.B.	04/12/1949	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Broom, Erna (922131005668)		Admission Date	10/16/2025	Location	5 521 A



## Care Plan Report

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## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<p>Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: Erna uses a walker as her aid for ambulation and is able to walk Independently on the unit. Supervision due to being in a locked unit.</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Erna is independent with supervision and cueing from staff to wash/dry her face, comb her hair, peri care.</p> <p>May require one staff extensive assistance at times.</p> <p>Revision on: 10/26/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• HAND HYGIENE: 1 staff to provide (REMINDER) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene.</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TOILET USE: Erna is able to transfer to the toilet. She requires supervision, cueing from staff for her toileting needs.</p> <p>May require one staff Extensive assistance at times.</p> <p>Revision on: 10/26/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TRANSFERRING: Erna is Independent with Supervision from a staff member. Walker as her aid for transfer.</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• ORAL CARE: Erna has her own teeth and requires supervision, cueing and set up from staff.</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p>	PCA	
<p>• Expressed Wishes and Beliefs related to Erna Medical Treatment and End of Life Care</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p>	<p>• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life.</p> <p>Target Date: 01/14/2026</p>	<p>• CPR: Erna wishes to Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details.</p> <p>Revision on: 10/16/2025</p> <p>Revision by: Maryola Perion (RN)</p>		

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	04/12/1949	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Broom, Erna (922131005668)	<b>Admission Date</b>	10/16/2025	<b>Location</b>	5 521 A

## Care Plan Report


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**Diagnosis**

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	04/12/1949	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Bipolar affective disorder, unspecified(F31.9), Hyperlipidaemia, unspecified(E78.5), Cataract, unspecified(H26.9), Other specified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Broom, Erna (922131005668)	<b>Admission Date</b>	10/16/2025	<b>Location</b>	5 521 A

## 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, Low Motivation</p> <p>ISE score = 5/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p>	<p>• Team members will support Donald in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date. Revision on: 06/06/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 12/17/2025</p>	<p>• STRUCTURED ACTIVITIES: Invite Don to programs of personal interest; movies, music programs, card games, (Yahtzee &amp; Uno), scrabble and food related programs, outdoor walks/programs. Revision on: 08/26/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage Don to engage in self-directed activities such as reading paper, telephone conversations, watching TV in own room, walking, conversing with team members and other residents. Revision on: 08/26/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• HELPFUL HINTS: Don worked at Chrysler for 30+ years and is happy to talk about that. He is social, but does not seek engagement. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p> <p>• ONE to ONE: Provide him with individual visits for conversation, bedside activity, reading, reminiscing, sports updates, movie talk and trivia. Revision on: 08/26/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• FAMILY INVOLVEMENT: Wife is highly involved./visits often. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Promote opportunity for Donald to make friendships and sit with friends during activities Revision on: 06/06/2025 Revision by: Kameron Stewart (Recreation Aide)</p>				
<p>• Donald is at high risk for ELOPEMENT related to the home. Stated "I am getting out of here I am not staying here anymore. I want to go home. (6/20/25) Revision on: 06/21/2025 Revision by: Maryola Perion (RN)</p>	<p>• To promote DONALD safety and minimize risk for episode of elopement each day through next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025</p>	<p>• ALARM: Resident wears safety alarm on right wrist to alert of attempted elopement. PCA Respond immediately to alarm and inform Registered Staff. Revision on: 08/11/2025 Revision by: Chelsea Campbell-Wright (ADOC)</p> <p>• ALERT: Donald has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)</p> <p>• ELOPEMENT ALERT: Redirect DONALD away from elevator or exit doors as</p>	PCA			
<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng	
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses					
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>		10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>		5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025				

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Donald is at high risk for ELOPEMENT related to the home. Stated "I am getting out of here I am not staying here anymore. I want to go home. (6/20/25) Revision on: 06/21/2025 Revision by: Maryola Perion (RN)			needed. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential for PAIN and alteration in comfort level related to OSTEOARTHRITIS. Most Current LTCF Pain Score is 0. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Donald)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • NON VERBAL CUES of PAIN for Donald include - facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)				
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 06/17/2025	• COMMUNICATION: Involve/ collaborate with (Donald)/SDM in decision making of musculoskeletal care management. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects.				
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A	
Last Care Plan Review Completed:		09/17/2025					

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Maryola Perion (RN) Target Date: 12/17/2025	Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to health status. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)			
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY of Ceclor, Cipro. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)	• Donald will be protected from exposure to allergen each day through next review date. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making and health teaching about ALLERGY to Ceclor, Cipro. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • ALLERGY ALERT: Donald has ALLERGY to Ceclor, Cipro. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Donald's Allergy to Ceclor, Cipro and minimize risk for exposure to allergen. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)			
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 06/17/2025 Revision by: Maryola Perion (RN)	• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life.			
<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.	Registered Staff	
• Strength Training Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increase strength of B/L LE from 3+/5 to 4/5 in next 3 months: Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/17/2025	• Strengthening exs using 1-3lbs. wt., 1 set, 10rps., 2-3/wk as tolerated, per rehab treatment. Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• Balance Training Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Increase balance scores from 20 to 22 in next 3 months; Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/17/2025	• 1:1 balance training with wall bar/walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week Revision on: 06/05/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	
• BOWEL Continence - Donald is continent and has self recognition of urge to defecate. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Donald to remain continent of bowels through next review date Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted.  • SELF TOILETING: Donald toilets self for bowel movements. Each shift ask if he/she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
• URINARY Continence - Donald is continent and has self recognition of urge to void. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Donald will maintain continence level through next review date Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• URINARY Continence Level is: CONTINENT  • SELF TOILETING: Donald toilets self. Each shift ask if he/she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 05/28/2025	PCA	
<b>Allergies</b>	Ceclor, Cipro		<b>D.O.B.</b>	08/04/1953
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses		<b>Physician</b>	Albert Patrick Ng
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)		<b>Admission Date</b>	05/28/2025
			<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025		

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 12/17/2025	Revision by: Danielle Loreto (RAI Coordinator)		
• Nutrition Risk Level	<p>• Donald will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025</p> <p>• Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/17/2025</p> <p>• Donald will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 2193 ml/day (30 ml/kg using 73.1 kg weight) through to next review date. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/17/2025</p>	<p>• SNACK HS: serve 1 bowl of cereal with milk from floor 5 kitchenette at HS snack daily per POA request Revision on: 06/02/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Brunelle Donald is low risk level. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: Brunelle Donald will receive regular diet, regular texture Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID CONSISTENCY: Brunelle Donald drinks REGULAR/THIN Level 0 Fluids. Revision on: 05/28/2025 Revision by: Niharika Chopra (Food Service Supervisor)</p> <p>• FLUID TARGET: Encourage Donald to drink a minimum of 1754 ml/day. Revision on: 06/05/2025 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>• DIABETIC CARE: Serve diet juice instead of regular juice. Revision on: 06/05/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>PCA Registered Practical Nurse RN Dietitian (RD)</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>Dietary aide PCA</p> <p>PCA</p>	E
• Sleep Patterns; Potential for alteration in sleep patterns related to new environment Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Donald based on identified sleep patterns/preferences each night through to the next review date.	<p>• PREFERENCE: Donald likes to have a snack if hungry before bed and to watch TV. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• REST PATTERN: Preferred bedtime 1900, usual wake time 0800 and daytime naps as he desires. Revision on: 05/28/2025</p>	PCA	
<b>Allergies</b>	Ceclor, Cipro		<b>D.O.B.</b>	08/04/1953
<b>Physician</b>	Albert Patrick Ng			
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses			
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)		<b>Admission Date</b>	05/28/2025
<b>Location</b>			<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025		



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	Revision by: Danielle Loreto (RAI Coordinator)			
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension	• To treat and minimize signs/symptoms or complications associated with (hypertension) through to the next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making of Cardiac Care Management for Hypertension. Revision on: 06/17/2025 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: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for (specify Etiology/Diagnosis) as per MD Order and monitor for side effects.	Registered Practical Nurse RN		
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Type 2. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Target Date: 12/17/2025	• COMMUNICATION: Involve/ collaborate with (Donald)/SDM in decision making of diabetes care management. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status.  • LIBRE MONITORING: Monitor glucose level as specified in manufacture instruction.  • MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • LAB WORK: Monitor lab and diagnostic results for (fasting blood glucose and/or HbA1c) and report results to MD as needed. Follow up as indicated. Revision on: 06/17/2025	Registered Staff  RN Registered Practical Nurse		
<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> <li>Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES Type 2.</li> </ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> <li>Risk for Impaired SKIN INTEGRITY related to Frailty</li> </ul>	<ul style="list-style-type: none"> <li>To protect and maintain skin integrity each day through to the next review.</li> </ul> Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>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.</li> </ul>	PCA		
<ul style="list-style-type: none"> <li>Potential to experience alteration in MOOD related to Depression, Dementia, anxiety</li> </ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>Donald will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</li> </ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Donald for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</li> </ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>RESIDENT STRENGTHS: Build on Donald effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities.</li> </ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>DISTRACTION ACTIVITIES: Donald can be calmed doing activities of interest including (driving the car, listening to music, doing puzzles, watching movies, etc.)</li> </ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> <li>Potential for Expressive Behaviour of verbal, paranoid, physical, delusions, hallucinations and resistive to care in nature related to Acquired Brain Injury, Dementia</li> </ul>	<ul style="list-style-type: none"> <li>To promote safety for Donald and/or others during each episode of (verbal, paranoid, physical, delusions, hallucinations and resistive to</li> </ul>	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve/collaborate with Donald and Brenda about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</li> </ul> Revision on: 06/20/2025 Revision by: Chelsea Campbell-Wright (ADOC)	BSO - Internal Social Worker		
<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	<p>care) through to the next review date.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025</p> <p>• To decrease episodic frequency of (verbal, paranoid, physical, delusions, hallucinations and resistive to care) by next review date. ABS score will be less than 1.</p> <p>Revision on: 09/04/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025</p> <p>• Donald will be supported to adjust to his new environment to lower risk of triggering former (verbal, paranoid, physical, delusions, hallucinations and resistive to care) behaviour episodes through to the next review.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Donald for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to PHYSICAL (Hitting, grabbing) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space)</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Donald is attempting to strikeout; move back from his/her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (yelling, raising his voice) as expression of behaviour include (loss of control, frustration, misunderstanding care intention, believes his wife is cheating on him)</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Donald is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process.)</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Donald is declining to (bathe, change clothes, take medications, eating) re-approach in 10-15 minutes. Report episode to Registered Staff.</p> <p>Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DE-ESCALATION: Donalds calms with redirection, explain to donald what you are   PCA</p>			
<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of verbal, paranoid, physical, delusions, hallucinations and resistive to care in nature related to Acquired Brain Injury, Dementia</li></ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			doing. Donald enjoys playing Yatzee and uno. Donald enjoys watching movies. If Donald is asking to go home validate his feelings, explain to Donald that he is here for safety. Revision on: 06/20/2025 Revision by: Chelsea Campbell-Wright (ADOC) • ENVIRONMENT: Donald is most calm with quiet area in his room watching TV such as CNN, ABC and Movies in room. Revision on: 05/28/2025 Revision by: Chelsea Campbell-Wright (ADOC) • DELUSION: frequently will focus on events that have no occurred and this can lead to frustration.  Will wake up from dreaming and will think the events have taken place  Team to monitor for safety. Do not argue with resident. Offer support and reassurance. Try to redirect into an activity. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		Registered Practical Nurse RN		
<ul style="list-style-type: none"><li>• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension) related to Traumatic Brain Injury and Dementia</li></ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"><li>• Donald will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date.</li></ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"><li>• PRIMARY LANGUAGE: Donald primary language is English and he speaks and understands English.</li></ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• INSTRUCTION GUIDANCE: Donald needs (intermittent) cueing or demonstrative instruction in tasks and activities.</li></ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"><li>• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia</li></ul> Revision on: 05/28/2025		<ul style="list-style-type: none"><li>• Donald will be supported to maintain cognitive function through the review date. Current CPS is 2.</li></ul> Revision on: 06/17/2025	<ul style="list-style-type: none"><li>• ORIENTATION: Gently reorient to (person, place, time) as needed when Donald is feeling lost or in confused state.</li></ul> Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• CUE TASKS: Break tasks into manageable subtasks, Donald can comprehend and</li></ul>				
Allergies	Ceclor, Cipro			D.O.B.	08/04/1953	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Brunelle, Donald (922131005634)			Admission Date	05/28/2025	Location	5 508 A
Last Care Plan Review Completed:		09/17/2025					

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Maryola Perion (RN) Target Date: 12/17/2025	follow. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects. Registered Staff				
• Increased risk for FALLS related to Cognitive loss and change in location. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 12/17/2025	• COMMUNICATION: Involve/collaborate with (Donald)/SDM in decision making in fall prevention Plan of Care. Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. PCA D/E/N Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Donald. PCA Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. PCA Revision on: 06/17/2025 Revision by: Maryola Perion (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 06/17/2025 Revision by: Maryola Perion (RN)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		• Donald will be supported to maintain current self participation in ADL care through to the next review date. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	• BATHING: Donald is independent with his showering. He prefers to shower without assistance. Team will check in for safety. Shower days are Monday and Thursday evening shift PCA  Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Donald is independent with his movement in bed. He does not require assistance. PCA Revision on: 05/28/2025				
Allergies	Ceclor, Cipro		D.O.B.	08/04/1953	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Brunelle, Donald (922131005634)		Admission Date	05/28/2025	Location	5 508 A	
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## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		<p>Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> <li>• <b>DRESSING:</b> Donald is independent with dressing of his upper and lower body. Donald needs encouragement and supervision to ensure his clothes are changed. Revision on: 06/12/2025</li> <li>Revision by: Chelsea Campbell-Wright (ADOC)</li> <li>• <b>EATING:</b> Donald is independent with set up from staff. He eats on home area wildflower for all meals. Revision on: 09/08/2025</li> <li>Revision by: Chelsea Campbell-Wright (ADOC)</li> <li>• <b>LOCOMOTION:</b> Donald is independent with his walking. Requires supervision when off the home area Revision on: 05/28/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• <b>PERSONAL HYGIENE:</b> Donald is independent with his personal hygiene. He requires cues and reminders. When confused please provide set up assistance. Revision on: 06/12/2025</li> <li>Revision by: Chelsea Campbell-Wright (ADOC)</li> <li>• <b>HAND HYGIENE:</b> 1 staff to provide (REMINDER) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands) for hand hygiene. Revision on: 05/28/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• <b>TOILET USE:</b> Donald is independent with his toileting. Monitor for changes in status.</li> </ul> <p>If resident gets confused he may require cues and intermittent 1 team member limited assistance. Revision on: 05/28/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"> <li>• <b>TRANSFERRING:</b> Donald is independent with his transferring. Monitor for changes in status. Report to the nurse for further assessment if required. Revision on: 05/28/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>• <b>ORAL CARE:</b> Donald has his own teeth and is able to complete his own oral care. Donald requires reminders to brush teeth. Revision on: 06/12/2025</li> </ul>	PCA		
<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		Revision by: Chelsea Campbell-Wright (ADOC)		
• Expressed Wishes and Beliefs related to Donald Medical Treatment and End of Life Care Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 12/17/2025	• CPR: Donald wishes to have CPR. TRANSFER to hospital to be made at the time. Revision on: 05/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		

<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			

## Care Plan Report


### Diagnosis

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

<b>Allergies</b>	Ceclor, Cipro	<b>D.O.B.</b>	08/04/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Intracranial injury, unspecified(S06.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Anxiety disorder, unspecified(F41.9), Depressive episode, unspec...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Brunelle, Donald (922131005634)	<b>Admission Date</b>	05/28/2025	<b>Location</b>	5 508 A
<b>Last Care Plan Review Completed:</b>		09/17/2025			



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"><li>• Potential for acute PAIN and alteration in comfort level related to Lumbar Radiculopathy, Malignant neoplasm of ovary, sore legs (7/29/24), impaired mobility. Most Current RAI Pain Score is 0.</li></ul> Revision on: 09/23/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review.</li></ul> Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026 <ul style="list-style-type: none"><li>• Promote RAI Pain Score of 0 through to the next review.</li></ul> Revision on: 09/23/2025 Revision by: Maryola Perion (RN) Target Date: 01/26/2026	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with (Anne)/SDM) about pain management, goals of treatment, plan of care and treatment options.</li></ul> Revision on: 05/17/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• 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.</li></ul> <ul style="list-style-type: none"><li>• NON VERBAL CUES of PAIN for Anne 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.</li></ul> Revision on: 08/30/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. PRN medication may be mixed with Reese's' peanut butter cup.</li></ul> Revision on: 05/17/2024 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse  PCA  Registered Practical Nurse RN			
<ul style="list-style-type: none"><li>• Potential to experience complications and side effects impacting quality of life related to use of use of multi-pharmacy.</li></ul> Revision on: 08/30/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• To monitor effectiveness and for side effects of medication used each day through to the next review date</li></ul> Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	<ul style="list-style-type: none"><li>• MONITORING: Utilize holistic perspective of continuous monitoring of Anne using poly-pharmacy for changes to health status and alteration or complications affecting functioning or quality of life.</li></ul> Revision on: 08/30/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.</li></ul>	Registered Staff			
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of RESISTANCE to care need, yelling and insulting towards staff during care related to Dementia, Major Depressive Disorder, Generalized Anxiety Disorder, Bipolar Depression.</li></ul> Revision on: 06/22/2025	<ul style="list-style-type: none"><li>• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be maintained to 0.</li></ul> Revision on: 06/03/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with (Anne)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</li></ul> Revision on: 09/18/2024 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Anne's for indications to change in or for escalating expressive behaviour risk.</li></ul>	BSO - Internal Social Worker			
Allergies	No Known Allergies	D.O.B.	07/06/1944	Physician	Albert Patrick Ng	
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Childs, Anne (922131005563)	Admission Date	05/07/2024	Location	5 502 C	
Last Care Plan Review Completed:		09/13/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Maryola Perion (RN)	Target Date: 01/26/2026	Revision on: 05/07/2024 Revision by: Katie Savo • TRIGGERS leading to VERBAL (yelling and insulting towards staff during care, etc.) as expressions of behaviour include (frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 06/22/2025 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Anne is heard yelling and insulting towards staff during care; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 06/22/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to sleep in her room/bed,etc.) as expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, etc.) Revision on: 08/14/2024 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Anne is declining to sleep in her room/bed, etc. re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/14/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects. Revision on: 05/17/2024 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN	
• Sleep Patterns Revision on: 06/03/2025 Revision by: Maryola Perion (RN)	• To promote adequate rest/sleep for Anne 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: 01/26/2026	• REST PATTERN: Anne prefers to go to bed around 6:00pm and wakes up at approximately 3:00am/4:00am. She naps periodically throughout the day. Revision on: 05/07/2024 Revision by: Katie Savo	PCA	

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/06/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Childs, Anne (922131005563)	<b>Admission Date</b>	05/07/2024	<b>Location</b>	5 502 C
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report

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## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Increased risk for FALLS related to essential tremors, Lumbar Radiculopathy, Epilepsy, Cataracts, history of falls, Impaired mobility and balance.</li> </ul> Revision on: 03/04/2025 Revision by: Maryola Perion (RN)		Revision on: 03/04/2025 Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> <li>At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to being in bed alot of the time.</li> </ul> ISE Score: 2/6 Revision on: 02/23/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide)	<ul style="list-style-type: none"> <li>To support Anne's Psycho-Social well being through to the next review.</li> </ul> Anne will be encouraged to participate in 20-25 group and/or 1:1, self directed activities per month through the review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 01/26/2026	<ul style="list-style-type: none"> <li>STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1: 1 visits, music programs, special events,religious programs etc.</li> </ul> Revision on: 02/23/2025 Revision by: Hannelore (Hannah) Steinke-Nelson (Recreation Aide) <ul style="list-style-type: none"> <li>ONE to ONE: Provide her with individual visits for conversation, reading, reminiscing, music, humor, doll therapy, etc.</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"> <li>SOCIAL INTERACTION: Promote the opportunity for Anne to make friendships and sit with friends during activities.</li> </ul> Revision on: 06/18/2024 Revision by: Mitchell Atkinson (Recreation Aide)	Recreation Aide	
<ul style="list-style-type: none"> <li>ROM Exs</li> </ul> Revision on: 11/29/2024 Revision by: Shina Wadhwa (Physical Therapist)	<ul style="list-style-type: none"> <li>To maintain ROM/flexibility through B/L UE and LE.</li> </ul> Revision on: 11/29/2024 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/26/2026	<ul style="list-style-type: none"> <li>A-AAROM exs for B/L UE and LE, within pain limits, 10 reps, as best tolerated. 1-2 sets, 2-3 x a week;</li> </ul> Provide Stretching exs for B/L Hams & Calf 1set,5rps.,hold 30 sec, 2-3/week as tolerated. Revision on: 05/28/2025 Revision by: Shina Wadhwa (Physical Therapist)	PT - Physiotherapist PTA	

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/06/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Childs, Anne (922131005563)	<b>Admission Date</b>	05/07/2024	<b>Location</b>	5 502 C
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential to experience alteration in MOOD as exhibited by refused to sleep in her room d/t resident afraid to her room mate, sad, pained, worried facial expressions, repetitive anxious complaints, persistent anger with self or others, related to Depression, Inability to cope with change, Dementia, History of suicidal attempt, Bipolar depression, Decline in health status.</div> <div>Revision on: 09/18/2024</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be maintained to 0.</div> <div>Revision on: 03/04/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 01/26/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Anne)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed.</div> <div>Revision on: 05/16/2024</div> <div>Revision by: Maryola Perion (RN)</div> <div>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Anne for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life.</div> <div>Revision on: 05/16/2024</div> <div>Revision by: Maryola Perion (RN)</div> <div>• RESIDENT STRENGTHS: Build on Anne's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities.</div> <div>Revision on: 05/16/2024</div> <div>Revision by: Maryola Perion (RN)</div> <div>• SLEEP/REST: Promote adequate sleep and rest to stability of Anne's mood. Report changes in sleeping habits to Registered Staff as noted.</div> <div>Revision on: 07/26/2024</div> <div>Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects.</div> <div>Revision on: 05/16/2024</div> <div>Revision by: Maryola Perion (RN)</div> <div>• SUICIDAL IDEATIONS: Report to Registered Staff IMMEDIATELY if Anne expresses thoughts to harm to self.</div> <div>Revision on: 05/16/2024</div> <div>Revision by: Maryola Perion (RN)</div>				
<div>• Risk for Impaired SKIN INTEGRITY related to tremors, fragile skin, dry flaky lower extremities, Incontinence, use of incontinent product, impaired mobility.</div> <div>Revision on: 09/13/2024</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• To protect and maintain skin integrity each day through to the next review.</div> <div>Revision on: 10/02/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>Target Date: 01/26/2026</div>	<div>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.</div> <div>• POSITIONING: Turn, reposition at least every 2 hours when in bed/wheelchair to offload pressure.</div> <div>Revision on: 09/13/2024</div> <div>Revision by: Maryola Perion (RN)</div>	PCA	Q2h		
Allergies	No Known Allergies		D.O.B.	07/06/1944	Physician	Albert Patrick Ng
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Childs, Anne (922131005563)		Admission Date	05/07/2024	Location	5 502 C
Last Care Plan Review Completed:		09/13/2025				

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Dementia Revision on: 08/17/2024 Revision by: Maryola Perion (RN)		• Anne 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: 01/26/2026	• COMMUNICATION: Involve/collaborate with (Anne)/SDM for decision making about strategies needed to support effective communication. Revision on: 08/17/2024 Revision by: Maryola Perion (RN) • PRIMARY LANGUAGE: Anne's primary language is English. She is able o speak/understand English. Revision on: 08/17/2024 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Anne needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 08/17/2024 Revision by: Maryola Perion (RN)				
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 08/17/2024 Revision by: Maryola Perion (RN)		• Anne 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: 01/26/2026  • Anne will have bowel incontinence managed every shift through to the next review period. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• 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 Total Incontinence. Report change to level as noted. PCA				
			• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. PCA				
• URINARY (Mixed) INCONTINENCE related to Dementia Revision on: 08/17/2024 Revision by: Maryola Perion (RN)		• Anne will have urinary incontinence managed every shift through to the next review period. Revision on: 10/02/2024	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. PCA				
			Revision on: 08/17/2024 Revision by: Maryola Perion (RN)				
			• URINARY Continence level is Total Incontinence. Report change to level as noted. PCA				
Allergies	No Known Allergies			D.O.B.	07/06/1944	Physician	Albert Patrick Ng
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Childs, Anne (922131005563)			Admission Date	05/07/2024	Location	5 502 C
Last Care Plan Review Completed:		09/13/2025					

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026  • Anne will receive support to use toilet and promote urinary continence each shift through to the next review. Revision on: 11/04/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/26/2026	Revision on: 09/18/2024 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Anne uses a Blue Brief on Days, Evening and Night shifts. 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	PCA
• SPIRITUAL BELIEFS: Anne is of the Christian Faith. Revision on: 06/18/2024 Revision by: Mitchell Atkinson (Recreation Aide)		• To provide Anne 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: 01/26/2026	• SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice including; Hymn Sing, Catholic Mass, spiritual discussion, spiritual music, etc. Revision on: 06/18/2024 Revision by: Mitchell Atkinson (Recreation Aide)			
• Potential for CONSTIPATION related to decreased mobility, Diagnosis of Dementia, etc.) Revision on: 06/17/2024 Revision by: Maryola Perion (RN)		• Anne will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026  • To minimize the potential for episodes/ complications of constipation through to the next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord	• COMMUNICATION: Involve/collaborate with (Anne/SDM) for decision making regarding constipation management. Revision on: 06/17/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.  • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.  • PHYSICAL ACTIVITY: Promote ACTIVITY/ MOVEMENT to stimulate bowels.  • BOWEL PROTOCOL: In place as per MD order		Registered Staff	Registered Staff  Registered Staff  Registered
Allergies	No Known Allergies		D.O.B.	07/06/1944	Physician	Albert Patrick Ng
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Childs, Anne (922131005563)		Admission Date	05/07/2024	Location	5 502 C
Last Care Plan Review Completed:		09/13/2025				

## 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 Dementia, Epilepsy, Depressive dosry, LUmbar Radiculopathy, tremors and anxiety disorder.</div> <div>Revision on: 06/10/2024</div> <div>Revision by: Laura Seibel (Dietitian (RD))</div>			her hair, washing/drying face, hand and two staff to provide peri care .						
			Revision on: 03/04/2025						
			Revision by: Maryola Perion (RN)						
			• HAND HYGIENE: 1 staff to provide Total assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene.						
			Revision on: 03/04/2025						
			Revision by: Maryola Perion (RN)						
			• TOILET USE: Anne requires two staff to transfer her to and from wheelchair to the toilet or to her bed using a Maxi lift and to assist with incontinent product change, peri care and adjust her clothing.						
			Revision on: 08/30/2025						
			Revision by: Maryola Perion (RN)						
			• TRANSFERRING: Anne requires two staff with the use of a Maxi lift to transfer her to and from bed to wheelchair.						
			Revision on: 10/09/2024						
			Revision by: Maryola Perion (RN)						
			• TRANSFER LIFT/SLING: Maxi lift and Green SIZE of comfort sling needed for transfer.						
			Revision on: 10/09/2024						
			Revision by: Maryola Perion (RN)						
			• ORAL CARE: Anne has her own teeth and requires one team member to provide oral care. Has broken and Fragmented teeth.						
			Revision on: 03/04/2025						
			Revision by: Maryola Perion (RN)						
<div>• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: SEIZURE Disorder, Tremor.</div> <div>Revision on: 05/17/2024</div> <div>Revision by: Maryola Perion (RN)</div>		<div>• To treat and minimize signs/symptoms or complications associated with Epilepsy through to the next review date.</div> <div>Revision on: 10/02/2024</div> <div>Revision by: Jenny Liu (RAI Coord Back-up)</div> <div>Target Date: 01/26/2026</div>	• COMMUNICATION: Involve/ collaborate with (Anne)/ SDM in decision making of neurological care management for SEIZURE Disorder.						
			Revision on: 05/16/2024						
			Revision by: Maryola Perion (RN)						
			• MEDICATION: Administer medication for Epilepsy as per MD order. Monitor effectiveness and for side effects.						
			Revision on: 05/07/2024						
			Revision by: Katie Savo						
			• MONITORING: Utilize holistic perspective of continuous monitoring of Anne with Epilepsy for changes to health status and alteration or complications affecting neurological function.						
Allergies	No Known Allergies			D.O.B.	07/06/1944		Physician	Albert Patrick Ng	
Diagnosis	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre						Print Date	10/30/2025	
Resident	Childs, Anne (922131005563)			Admission Date	05/07/2024		Location	5 502 C	
Last Care Plan Review Completed:		09/13/2025							

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: SEIZURE Disorder, Tremor. Revision on: 05/17/2024 Revision by: Maryola Perion (RN)		Revision on: 05/07/2024 Revision by: Katie Savo • SEIZURE Disorder: If seizure activity occurs alert registered staff immediately; place on side, protect from injury, maintain open airway.  • SEIZURE Disorder: Anne has potential for seizure activity, injury related to seizure disorder. Inform MD as it occurs. Revision on: 05/16/2024 Revision by: Maryola Perion (RN)	PCA Registered Staff All	
• Altered VISION related to Cataract diagnosis. Revision on: 05/16/2024 Revision by: Maryola Perion (RN)	• To treat and minimize complications of cataract through to next review date. Revision on: 10/02/2024 Revision by: Jenny Liu (RAI Coord Back-up) Target Date: 01/26/2026	• COMMUNICATION: Involve/collaborate with (Anne)/SDM for decision making pertaining to change in visual status as needed. Revision on: 05/16/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer ophthalmic medication as per MD Order. Monitor its effectiveness and for side effects. Revision on: 03/04/2025 Revision by: Maryola Perion (RN)		
• COGNITIVE LOSS; alteration in thought processes memory loss, difficulty concentrating, altered judgement, etc. related to progression of Dementia (mixed type) Revision on: 05/07/2024 Revision by: Katie Savo	• Anne is severely impaired in cognition and will have needs interpreted and met each day through to the review date. CPS score is 5. Revision on: 08/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/26/2026	• ORIENTATION: Gently reorient to place, time as needed when Anne is feeling lost or in confused state. Revision on: 05/07/2024 Revision by: Katie Savo • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 05/16/2024 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.  • ENVIRONMENT: Provide environmental clue to promote resident ability to locate room and navigating home area (i.e. name plate, photo, memory box, etc.) outside of room. Revision on: 05/16/2024 Revision by: Maryola Perion (RN)	PCA       Registered Staff	

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/06/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Childs, Anne (922131005563)	<b>Admission Date</b>	05/07/2024	<b>Location</b>	5 502 C
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
• Expressed Wishes and Beliefs related to Anne's Medical Treatment and End of Life Care Revision on: 05/07/2024 Revision by: Katie Savo		• To support and honor Anne's 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: 01/26/2026	• CPR: Anne wishes express NO CPR and NO TRANSFER to hospital. Revision on: 05/07/2024 Revision by: Katie Savo					
• Nutrition Risk Level		• Anne will be adequately nourished aeb consuming 51-100% at meals and snacks through to next review date. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/26/2026  • Will weigh within realistic GWR 68-78 kg through to next review date. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/26/2026  • Anne will be adequately hydrated aeb drinking at least 75% of total fluid requirement: 1760 ml/day (25 ml/kg using 70.4 kg weight) through to next review date. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/26/2026	• Labelled Item Breakfast: 1 vanilla Greek yogurt Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))  • Labelled Item Lunch: 1 vanilla Greek yogurt Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))  • Labelled Items Dinner: 1 vanilla Greek yogurt Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))  • NUTRITION RISK: Anne is MODERATE risk level. Revision on: 10/29/2025 Revision by: Debora Choi (Dietitian (RD))  • DIET ORDER: Anne will receive Regular diet, Pureed texture. Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))  • FLUID CONSISTENCY: Anne drinks REGULAR/THIN Level 0 Fluids. Revision on: 05/19/2024 Revision by: Helen Bradley (Dietitian (RD))  • FLUID TARGET: Encourage Anne to drink a minimum of 1320 ml/day Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))  • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of				PCA Registered Practical Nurse RN 	

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level		meals and snacks daily.  • HIGH FIBRE: Fruit Rite paste at breakfast M-W-F Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LABELLED FLUID: 355 ml gingerale at dinner daily Revision on: 08/08/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA  PCA  PCA	  D/E  D/E


### Diagnosis

Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Essential tremor(G25.0), Radiculopathy, lumbar region(M54.16), Malignant neoplasm of ovary, not specified whether unilateral or bilateral(C56.9), Acquired absence of genital organ(s)(Z90.7), Fracture of medial malleolus, closed(S82.500)

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/06/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Epilepsy, unspecified, not stated as intractable(G40.90), Cataract, unspecified(H26.9), Unspecified dementia(F03), Depressive episode, unspecified(F32.9), Anxiety disorder, unspecified(F41.9), Es...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Childs, Anne (922131005563)	<b>Admission Date</b>	05/07/2024	<b>Location</b>	5 502 C
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"><li>• Potential for altered hematologic symptoms or complications related to Epistaxis from both nostrils. mild amount of fresh blood. (10/19/25)</li></ul> Revision on: 10/20/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>• To treat and/or minimize complications associated with Epistaxis each day through to the next review date.</li></ul> Revision on: 10/20/2025 Revision by: Maryola Perion (RN) Target Date: 10/31/2025	<ul style="list-style-type: none"><li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with epistaxis for complications or changes to health status.</li></ul> Revision on: 10/20/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"><li>• Potential for PAIN and alteration in comfort level related to report intermittent pain in hands and joints, pain Left eye (minimal), Right and left knee/leg pain. Most Current RAI Pain Score is 0.</li></ul> Revision on: 10/17/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>• Promote RAI Pain Score of 0 through to the next review.</li></ul> Target Date: 11/23/2025	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with (Jeanette)/SDM) about pain management, goals of treatment, plan of care, prognosis and treatment options.</li></ul> Revision on: 09/23/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• 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.</li></ul> <ul style="list-style-type: none"><li>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</li></ul> Revision on: 09/23/2025 Revision by: Maryola Perion (RN)		RN Registered Practical Nurse  Registered Practical Nurse RN	
<ul style="list-style-type: none"><li>• Increased risk for FALLS related to wandering, unsteady gait, limping leaning more favourable to the weak leg, swelling on the left knee.</li></ul> Unwitnessed fall on October 17, 2025 Revision on: 10/17/2025 Revision by: Simran Patel (Registered Nurse)		<ul style="list-style-type: none"><li>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.</li></ul> Target Date: 11/23/2025	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with Jeanette/SDM in decision making in fall prevention Plan of Care.</li></ul> Encouraged resident to use the call bell and ask for the assistance. Revision on: 10/17/2025 Revision by: Simran Patel (Registered Nurse) <ul style="list-style-type: none"><li>• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it.</li></ul> Revision on: 10/17/2025 Revision by: Simran Patel (Registered Nurse) <ul style="list-style-type: none"><li>• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker (continue to encourage Jeanette to use it).</li></ul> Revision on: 09/23/2025		PCA   PCA	D/E/N
Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications(E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025	Location	5 525 B



## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Jeanette. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for (transfers, ambulation). Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • ALARM: Requires Bed alarm. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/22/2025 Revision by: Gurjit Kaur (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)			PCA                    	D/E/N
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Diagnosis of diabetes mellitus, peripheral edema, swelling on the left knee. Revision on: 09/23/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 11/23/2025	• 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	
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation, Missing Family/Friends		• Team members will support Jeanette in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; food programs, baking, bingo, concerts, cards, movies, parties, tea social, snoezelen cart, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, etc. Revision on: 09/21/2025				
Allergies	No Known Allergies			D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)			Admission Date	08/25/2025	Location	5 525 B

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation, Missing Family/Friends		Target Date: 11/23/2025	Revision by: Kameron Stewart (Recreation Aide)  • ONE to ONE: Provide her with individual visits for conversation, bedside activity, reading, reminiscing, walking groups, hand massages, etc. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Balance Training Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increase Tinetti scores from 14 to 17 in next 3 months Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 11/23/2025	• 1:1 balance training with wall bar/2WW walker, Include marching, heel raise, mini squats, front, side and back touches. 10 reps/exs, 2-3 x a week Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• Gait Training Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Improved foot clearance while walking from current shuffling gait in next 3 months; Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 11/23/2025	• 1:1 assist gait training with 2WW, rest breaks as needed, cue for proper foot clearance and heel toe pattern, Distance as best tolerated; 2-3 x a week; Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• Strength Training Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increased strength of B/L LE from 3/5 to 3+/5 per MMT in next 3 months. Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 11/23/2025	• Strengthening exs for B/L UE and LE, within pain limits, 1lbs to 2lbs, 10 reps, 1-2 sets, 2-3 x a week; Revision on: 09/06/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• Nutrition Risk Level		• Jeanette will be adequately nourished aeb consuming >75% at meals and snacks through to	• NUTRITION RISK: Jeanette is moderate risk level. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian)			Dietitian (RD)	
Allergies	No Known Allergies		D.O.B.	07/07/1940		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025		Location	5 525 B

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		next review date Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 11/23/2025	• DIET ORDER: Jeanette will receive regular diet, regular texture Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • FLUID CONSISTENCY: Jeanette drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • FLUID TARGET: Encourage Jeanette to drink a minimum of 1050 ml per day. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian)			PCA	
		• Will weigh within GWR of 50-60kg through to next review date. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 11/23/2025				PCA	
		• Jeanette will be adequately hydrated aeb drinking at least 80% of total fluid requirement @25-30ml/kg, through to next review date. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 11/23/2025				PCA	
		• Will meet estimated nutritional requirements of kcal @ 25-30 kcal/kg, protein @ 0.8-1g/kg through to next review date. Revision on: 09/03/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 11/23/2025					
• 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	• 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.				
Allergies	No Known Allergies			D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)			Admission Date	08/25/2025	Location	5 525 B



## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
to use of (multi-pharmacy, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	Revision on: 08/25/2025 Revision by: Maryola Perion (RN)			
• Potential for bruising, bleeding, clotting or other complications related to use of (ANTICOAGULANT) medication. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		• To monitor for bleeding and minimize complications related to use of anticoagulant through the review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	• 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: 08/25/2025 Revision by: Maryola Perion (RN) • BLEEDING ALERT: Notify nurse immediately if Jeanette is bleeding (noted blood in PCA urine/stool, bleeding nose/gums, unexplained bruising, etc.). Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medications as per MD Order. Report abnormal or unexplained bleeding, unexplained or excessive bruising, etc. to MD as noted.			
• Potential to experience alteration in MOOD as exhibited by history of low/depressed mood, will become tearful/crying throughout the day and unable to answer why she is crying, tearful when seeing a picture of her husband who passed away last year, history of persistent anger with self or others, repetitive anxious complaints/concerns non health related, sad, pained, worried facial expressions, reduced social interactions related to Inability to cope with change, Dementia, new environment. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		• Jeanette will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 09/19/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Jeanette for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Jeanette effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)			
Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025	Location	5 525 B

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for gastric discomfort/complications related to diagnosis of Acid Reflux</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• To treat and/or minimize complications associated with acid reflux each day through to the next review date.</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 11/23/2025</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of acid reflux for discomfort/ complications or changes to health status.</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• 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.</div> <div>• MEDICATION: Administer medication as per MD order. Monitor effectiveness and for side effects.</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div>	PCA Registered Staff			
<div>• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES.</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date.</div> <div>Target Date: 11/23/2025</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status.</div>	Registered Staff			
<div>• Potential to experience alteration in CARDIAC FUNCTION related to: Coronary Heart Disease, Hyperlipidaemia, Hypertension, Atrial Fibrillation</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• To treat and minimize signs/symptoms or complications associated with Coronary Heart Disease, Hyperlipidaemia, Hypertension, Atrial Fibrillation through to the next review date.</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 11/23/2025</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.</div> <div>• MEDICATION: Administer medication for Coronary Heart Disease, Hyperlipidaemia, Hypertension, Atrial Fibrillation as per MD Order and monitor for side effects.</div> <div>Revision on: 08/25/2025</div> <div>Revision by: Maryola Perion (RN)</div>	Registered Staff  Registered Practical Nurse RN			
<div>• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new admission, Dementia.</div> <div>Revision on: 08/25/2025</div>	<div>• To promote adequate rest/sleep for Jeanette based on identified sleep patterns/preferences each night</div>	<div>• REST PATTERN: Preferred bedtime: Likes to go to bed at 8pm. Don't go to bed any earlier or she may stay up all night, usual wake time: early riser - no specific time and naps during the day.</div> <div>Revision on: 08/25/2025</div>	PCA			
Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025	Location	5 525 B

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Maryola Perion (RN)		through to the next review date. Revision on: 08/30/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	Revision by: Maryola Perion (RN)				
• Potential for BOWEL INCONTINENCE related to Dementia Diagnosis Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		• Jeanette will have bowel incontinence managed every shift through to the next review period. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • BOWEL Continence level is FREQUENTLY Incontinent. Report change to level as   PCA noted. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and                   PCA document number of occurrences, size and consistency. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list   PCA on the floor. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)				
• URINARY (Mixed) INCONTINENCE related to Dementia Diagnosis Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		• Jeanette will have urinary incontinence managed every shift through to the next review period. Revision on: 08/30/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is FREQUENTLY Incontinent. Report change to level   PCA as noted. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Resident uses an incontinent product. See prevail list   PCA on the floor. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)				
• Potential for Expressive Behaviour of (WANDERING, VERBAL (shouting at		• To promote safety for Jeanette and/or others during each	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Jeanette for indications to change in or for escalating expressive behaviour risk.				
Allergies	No Known Allergies			D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)			Admission Date	08/25/2025	Location	5 525 B

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
family when enforcing a routine), SOCIALLY Inappropriate, RESISTANCE to care (will become agitated when care is given, will refuse to dress self, bath/shower), rummaging behaviors (rummaging through drawers, garbage & rummages her own belongings and not others) hoarding behavior (household items such as tissues, batteries and items of importance, soiled clothing in her closet), related to Inability to COPE, Dementia, Anxiety Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		episode of Expressive Behaviour through to the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (shouting, yelling, screaming, etc.) as expression of behaviour include (frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Jeanette is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Jeanette is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY Inappropriate (hoarding, rummaging, etc.) as expressions of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, etc.) Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Jeanette is rummaging and hoarding, staff provide redirection. Offer alternative, meaningful activities to keep the individual occupied and stimulated. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • WANDERING: Permit Jeanette to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.				
		• Jeanette will be supported to adjust to her new environment to lower risk of triggering former (WANDERING, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025					
Allergies	No Known Allergies		D.O.B.	07/07/1940		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025		Location	5 525 B

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING, VERBAL (shouting at family when enforcing a routine), SOCIALLY Inappropriate, RESISTANCE to care (will become agitated when care is given, will refuse to dress self, bath/shower), rummaging behaviors (rummaging through drawers, garbage &amp; rummages her own belongings and not others) hoarding behavior (household items such as tissues, batteries and items of importance, soiled clothing in her closet), related to Inability to COPE, Dementia, Anxiety</li></ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN)			<div>Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <ul style="list-style-type: none"><li>• SPECIAL CONSIDERATIONS: Responsive behavior will escalate when sundowning - usually around 2pm per admission paper.</li></ul> <div>Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div>				
<ul style="list-style-type: none"><li>• Altered VISION related to minimal difficulty with vision (see large print).</li></ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>• Jeanette will be safe and to prevent decline with vision through to the next review date.</li></ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	<div>Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <ul style="list-style-type: none"><li>• READING: Jeanette uses large print material to aid with reading.</li></ul> <div>Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>PCA</div>				
<ul style="list-style-type: none"><li>• Altered COMMUNICATION as exhibited</li></ul>		<ul style="list-style-type: none"><li>• Jeanette will be supported to</li></ul>	<ul style="list-style-type: none"><li>• PRIMARY LANGUAGE: Jeanette's primary language is English. She is able or</li></ul>				
Allergies	No Known Allergies			D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)			Admission Date	08/25/2025	Location	5 525 B

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
by limitations to (self expression, comprehension, etc.) related to Hard of hearing to Right Ear and Deaf to Left Ear. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025  • Jeanette will be supported to make basic needs known each day through to the review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	unable to speak/understand English. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • COMMUNICATION DEVICE: Jeanette is using a white board that can assist with communication writing down simple questions. Jeanette can at times read lips. Revision on: 09/02/2025 Revision by: Maryola Perion (RN) • HEARING AID; Apply/Remove to/from Right ear. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored: inside the medication room. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Jeanette needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	PCA	D/E		
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	• Jeanette will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 09/19/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Jeanette is feeling lost or in confused state. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Diabetes Mellitus, Hard of hearing. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	• Jeanette will have ALL ADL care needs met each day through the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	• BATHING: Jeanette prefers (shower) on Mondays and Fridays Day shifts. One staff LIMITED assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) • BED MOBILITY: Jeanette is able to turn and reposition in bed for bed	PCA			
Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Fields, Jeanette (922131005658)	Admission Date	08/25/2025	Location	5 525 B	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved		
		Target Date: 11/23/2025	<div>Independently. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• DRESSING: Jeanette is Independent in dressing UPPER &amp; LOWER body. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• EATING: Jeanette is Independent with staff set up and supervision during meal time. Eats in the unit dining room - wildflower lane. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• LOCOMOTION: Jeanette is Independent with Supervision from staff with her ambulation. She may require one staff Limited assistance at times. She has a walker but refusing to use it, requires staff to remind and encourage Jeanette to use it. Two-wheeled walker. Revision on: 09/06/2025 Revision by: Heidhy Dumincil (Registered Practical Nurse)</div> <div>• PERSONAL HYGIENE: Jeanette is able to assist with cueing from staff. One staff to provide LIMITED assistance for hygiene. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• HAND HYGIENE: 1 staff to provide (LIMITED) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• TOILET USE: Jeanette is able to transfer to the toilet with one staff guidance and assistance. One staff to provide LIMITED assistance for toileting needs. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• TRANSFERRING: Jeanette requires one staff Limited assistance for transferring. Revision on: 08/25/2025 Revision by: Maryola Perion (RN)</div> <div>• ORAL CARE: Anna has her own teeth and requires staff to set up and provide cueing and guidance with oral hygiene. Revision on: 08/25/2025</div>						
		• Jeanette will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025						PCA	
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Allergies	No Known Allergies		D.O.B.	07/07/1940	Physician	Albert Patrick Ng			
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre				Print Date	10/30/2025			
Resident	Fields, Jeanette (922131005658)		Admission Date	08/25/2025	Location	5 525 B			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Diabetes Mellitus, Hard of hearing.</li> </ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		Revision by: Maryola Perion (RN)		
<ul style="list-style-type: none"> <li>Expressed Wishes and Beliefs related to Jeanette Medical Treatment and End of Life Care</li> </ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> <li>To support and honor Jeanette expressed wishes and beliefs through to the End of Life.</li> </ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN) Target Date: 11/23/2025	<ul style="list-style-type: none"> <li>CPR: Jeanette wishes express NO CPR, however TRANSFER to hospital decision will be made at the time.</li> </ul> Revision on: 08/25/2025 Revision by: Maryola Perion (RN)		

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/07/1940	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Fields, Jeanette (922131005658)	<b>Admission Date</b>	08/25/2025	<b>Location</b>	5 525 B




## Care Plan Report

### Diagnosis

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/07/1940	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Benign hypertension(I10.0), Hyperlipidaemia, unspecified(E78.5), Atrial fibrillation, unspecified(I48.90), Type 2 diabetes mellitus without (mention of) complications (E...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Fields, Jeanette (922131005658)	<b>Admission Date</b>	08/25/2025	<b>Location</b>	5 525 B

## Care Plan Report

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

## Care Plan Report

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

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Alzheimer's disease, Parkinson's Disease.</div> <div>Revision on: 10/24/2025</div> <div>Revision by: Maryola Perion (RN)</div>		Revision by: Maryola Perion (RN)				
		• PERSONAL HYGIENE: Haifa requires 1 team member to provide extensive assistance to finish hygiene tasks. She is able to be cued to participate in oral care, brushing hair, washing face.	PCA			
		Revision on: 04/22/2025				
		Revision by: Danielle Loreto (RAI Coordinator)				
		• HAND HYGIENE: 1 staff to provide (REMINDER,) assistance to (Specify; use soap/water, apply sanitizer, rub hands together, dry hands) for hand hygiene.	PCA			
		Revision on: 04/22/2025				
		Revision by: Danielle Loreto (RAI Coordinator)				
		• TOILET USE: Haifa will toilet herself however may not perform good peri-care.	PCA			
		She benefits from 1 team member to provide extensive assistance with toileted-Team to offer and encourage her to accept the support.				
		She may require two staff assistance at times.				
<div>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation, Language Barrier (Arabic)</div> <div>ISE score = 6/6</div>	<div>• Team members will support Haifa in decreasing social isolation by participating in activities of personal choice for 15-25 times per month by the next review date.</div>	Revision on: 10/24/2025				
		Revision by: Maryola Perion (RN)				
		• TRANSFERRING: Haifa is independent with transferring	PCA			
		Revision on: 04/22/2025				
		Revision by: Danielle Loreto (RAI Coordinator)				
		• ORAL CARE: Haifa has her own teeth. Team to provide assistance with oral care.	PCA			
		Revision on: 04/22/2025				
		Revision by: Danielle Loreto (RAI Coordinator)				
		• SPECIFIC RESIDENT Request: Haifa's bathroom door has been removed due to safety concerns as Haifa has a history of barricading herself by opening the bathroom door.	PCA			
		Revision on: 08/08/2025				
Revision by: Chelsea Campbell-Wright (ADOC)						
• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; coffee socials, walking groups, movies, Tovertafel etc.						
Revision on: 06/09/2025						
Revision by: Kameron Stewart (Recreation Aide)						
• HELPFUL HINTS: Haifa speaks and understands Arabic, using Google translate may be effective. Haifa in the past was a hairdresser and enjoyed exercising. Enjoys						
Allergies	No Known Allergies		D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Lawrence, Haifa (922131005628)		Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025				

## Care Plan Report

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

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"><li>Increased risk for FALLS related to cognitive loss and new environment, she will lower herself to the floor and will clean the floor.</li></ul> Revision on: 06/22/2025 Revision by: Maryola Perion (RN)			<ul style="list-style-type: none"><li>SPECIAL CONSIDERATION to PREVENT FALLS: AROM and LE strengthening exercises 5-10 reps 1 lb; Sitting balance with perturbations 10 reps maintained unsupported, reaching 10 reps; Standing balance- tandem and static 10 reps, 10 seconds</li></ul> Revision on: 08/26/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) <ul style="list-style-type: none"><li>SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries.</li></ul> Revision on: 04/30/2025 Revision by: Maryola Perion (RN)			PCA	
<ul style="list-style-type: none"><li>Potential for BOWEL INCONTINENCE related to Alzheimer's Disease</li></ul> Revision on: 06/12/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>Haifa will have bowel incontinence managed every shift through to the next review period.</li></ul> Revision on: 06/12/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026	<ul style="list-style-type: none"><li>MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.</li></ul> <ul style="list-style-type: none"><li>BOWEL Continence level is Total Incontinence. Report change to level as noted.</li></ul> Revision on: 07/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</li></ul> <ul style="list-style-type: none"><li>INCONTINENCE PRODUCT: Haifa is using a BLUE brief for Days, Evening and Night shifts.</li></ul> Revision on: 06/12/2025 Revision by: Maryola Perion (RN)			Registered Staff  PCA  PCA  PCA	
<ul style="list-style-type: none"><li>Potential for CONSTIPATION related to Alzheimer's disease.</li></ul> Revision on: 06/03/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>Haifa will have regular soft formed bowel movements every 1-2 days through to the next review.</li></ul> Revision on: 06/03/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026	<ul style="list-style-type: none"><li>COMMUNICATION: Involve/collaborate with (Haifa/SDM) for decision making regarding constipation management.</li></ul> Revision on: 06/03/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.</li></ul>			Registered Staff	
Allergies	No Known Allergies			D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Lawrence, Haifa (922131005628)			Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025					

## Care Plan Report

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

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
• Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension, Pure hypercholesterolaemia Revision on: 04/30/2025 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN)		Nurse RN		
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 04/30/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with OSTEOARTHRITIS through to the next review date. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) Target Date: 01/29/2026	• COMMUNICATION: Involve/ collaborate with (Haifa)/SDM in decision making of musculoskeletal care management. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of OSTEOARTHRITIS as per MD order. Monitor effectiveness and for side effects. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of OSTEOARTHRITIS for discomfort/ complications or changes to health status. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for OSTEOARTHRITIS prescribed and in place; refer to Pain Care Plan. Revision on: 04/30/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in MOOD as exhibited by persistent anger, rep. health complaints, sad, pained, worried facial expressions related to Alzheimer's Dementia Revision on: 04/30/2025 Revision by: Maryola Perion (RN)		• Haifa will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026	• COMMUNICATION: Involve/collaborate with (Haifa)/SDM) about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 04/30/2025 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Haifa for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	No Known Allergies			D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Lawrence, Haifa (922131005628)			Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025					



## Care Plan Report

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

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		yes/no questions, uses simple words/phrases). Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Haifa needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Nutrition Risk Level	<p>• Haifa will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026</p> <p>• Will weigh within realistic weight range of 55-65 kg through to next review date. Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026</p> <p>• Haifa will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1500 ml/day (27 ml/kg using 55.6 kg weight) through to next review date. Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/29/2026</p>	<p>• Honor religious rituals related to diet/eating: NO PORK Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: Haifa is moderate risk level. Revision on: 05/02/2025 Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• DIET ORDER: Haifa will receive regular diet, regular texture Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID CONSISTENCY: Haifa drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FLUID TARGET: Encourage Haifa to drink a minimum of 1200 ml/day Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.</p> <p>• HIGH FIBRE: prune juice at breakfast M-W-F Revision on: 10/21/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	<p>Dietitian (RD)</p> <p>PCA</p> <p>PCA</p> <p>PCA</p> <p>Dietary aide PCA</p> <p>PCA</p>	<p></p> <p></p> <p></p> <p></p> <p></p> <p>D/E</p>

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	11/17/1943	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lawrence, Haifa (922131005628)	<b>Admission Date</b>	04/22/2025	<b>Location</b>	5 503 A
<b>Last Care Plan Review Completed:</b>		10/29/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<p>• Potential for Expressive Behaviour of (WANDERING RESISTANCE, Hoarding, Verbal with care/redirection, physical with care to care need) nature related to Alzheimer's Dementia</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p>	<p>• To promote safety for Haifa and/or others during each episode of (WANDERING RESISTANCE, Hoarding, Verbal with care/redirection, physical with care to care need) through to the next review date.</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>Target Date: 01/29/2026</p> <p>• To decrease the episodic frequency of Expressive behavior by the next review date. ABS score will be less than 2.</p> <p>Revision on: 10/24/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>Target Date: 01/29/2026</p>	<p>• COMMUNICATION: Involve/collaborate with (Haifa)/SDM) about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed.</p> <p>Revision on: 04/30/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Haifa for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 04/30/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to PHYSICAL (Hitting, pushing, frustration) as expression of behaviour include (frustration, fearfulness, confusion, invasion of personal space)</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PHYSICAL Behaviour: If Haifa is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance.</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to VERBAL (swearing, yelling) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention)</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• VERBAL Behaviour: If Haifa is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to shower, refusing medication) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process)</p> <p>Revision on: 04/22/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• RESISTANCE to Care Need: If Haifa is declining to (Shower, change clothes, take</p>	BSO - Internal Social Worker		
<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	11/17/1943	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lawrence, Haifa (922131005628)	<b>Admission Date</b>	04/22/2025	<b>Location</b>	5 503 A
<b>Last Care Plan Review Completed:</b>		10/29/2025			

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved	
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING RESISTANCE, Hoarding, Verbal with care/redirection, physical with care to care need) nature related to Alzheimer's Dementia</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)			medications) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• TRIGGERS leading to SOCIALLY Inappropriate hoarding/ collecting of items</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• SOCIALLY Inappropriate Behaviour: Team to monitor for items being taken and hidden or collected in her room If noted please remove items when she is not present.</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• WANDERING: Permit Haifa to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</li></ul> Revision on: 10/24/2025 Revision by: Maryola Perion (RN)					Registered Practical Nurse RN	
<ul style="list-style-type: none"><li>• Risk for Impaired SKIN INTEGRITY related to Frailty</li></ul>		<ul style="list-style-type: none"><li>• To protect and maintain skin integrity each day through to the next review.</li></ul> Target Date: 01/29/2026	<ul style="list-style-type: none"><li>• 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.</li></ul>					PCA	
<ul style="list-style-type: none"><li>• Haifa is at high risk for ELOPEMENT related to New location</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"><li>• To promote Haifa safety and minimize risk for episode of elopement each day through next review date.</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/29/2026	<ul style="list-style-type: none"><li>• ALERT: Haifa has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately.</li></ul> Revision on: 10/24/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• ELOPEMENT ALERT: Redirect Haifa away from elevator or exit doors as needed.</li></ul> Revision on: 04/22/2025 Revision by: Danielle Loreto (RAI Coordinator)					PCA	
Allergies	No Known Allergies			D.O.B.	11/17/1943		Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre						Print Date	10/30/2025	
Resident	Lawrence, Haifa (922131005628)			Admission Date	04/22/2025		Location	5 503 A	
Last Care Plan Review Completed:		10/29/2025							

## Care Plan Report

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	11/17/1943	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lawrence, Haifa (922131005628)	<b>Admission Date</b>	04/22/2025	<b>Location</b>	5 503 A
<b>Last Care Plan Review Completed:</b>		10/29/2025			


## Care Plan Report

### Diagnosis

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

Allergies	No Known Allergies	D.O.B.	11/17/1943	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Benign hypertension(I10.0), Pure hypercholesterolaemia(E78.0), Primary generalized (osteo)arthrosis(M15.0), Disorders of initiating and maintaining sleep ...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lawrence, Haifa (922131005628)	Admission Date	04/22/2025	Location	5 503 A
Last Care Plan Review Completed:		10/29/2025			

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none"><li>• Use of PASD for tilt wheelchair to assist resident with Activity of Daily Living such as positioning,comfort and prevention of skin breakdown.</li></ul> Revision on: 10/01/2025 Revision by: Gurjit Kaur (RN)		<ul style="list-style-type: none"><li>• John will be effectively supported with use of TILTED wheelchair for prevention of skin breakdown,positioning and comfort each day through to the next review date.</li></ul> Revision on: 10/01/2025 Revision by: Gurjit Kaur (RN) Target Date: 12/13/2025	<ul style="list-style-type: none"><li>• TILTED CHAIR in USE as a PASD to support resident with positioning ,comfort, and PCA prevention of skin break down.</li></ul> Revision on: 10/01/2025 Revision by: Gurjit Kaur (RN)			D/E/N	
<ul style="list-style-type: none"><li>• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Low Motivation, Cognitive Limitation, Rest/Sleep Patterns, Loss of Independence, Missing Family/Friends</li></ul> ISE score = 3/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		<ul style="list-style-type: none"><li>• Team members will support John in decreasing social isolation by participating in activities of personal choice for 15-20 times per month by the next review date.</li></ul> Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 12/13/2025	<ul style="list-style-type: none"><li>• STRUCTURED ACTIVITIES: Invite him to programs of personal interest; (movies, food programs, music programs, pets, etc)</li></ul> Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"><li>• SELF-DIRECTED ACTIVITIES: Encourage him to engage in self-directed activities such as (reading paper, telephone conversations, watching TV in own room, walking, conversing with peers, etc.).</li></ul> Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"><li>• HELPFUL HINTS: John is frequently searching for his wife. John also frequently is looking for snacks, or asking when his next meal is. Encourage participation in quick to complete tasks/program to promote redirection. Previously a custodian. Does not show interest in group programs. Oldies/country music.</li></ul> Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"><li>• ONE to ONE: Provide him with individual visits, bring sensory items to his room &amp; music activities in his room. Keep him comfortable.</li></ul> Revision on: 09/11/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"><li>• FAMILY INVOLVEMENT: Highly involved, visits with wife frequently.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"><li>• SOCIAL INTERACTION: Provide John with emotional visits, encouraging him to</li></ul>				
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng	
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date		10/30/2025
Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location		5 510 A
Last Care Plan Review Completed:		09/13/2025					

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Low Motivation, Cognitive Limitation, Rest/Sleep Patterns, Loss of Independence, Missing Family/Friends  ISE score = 3/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)			have a good laugh. Revision on: 09/11/2025 Revision by: Nick Carroll (Recreation Aide)			
• Risk for Impaired SKIN INTEGRITY related to Incontinence, Impaired Mobility, Left ankle fracture. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 12/13/2025	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Staff as noted.		PCA	
• Increased risk for FALLS related to history of falls, Dementia, Impaired Mobility, Left ankle fracture. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 12/13/2025	• COMMUNICATION: Involve/collaborate with (John)/SDM in decision making in fall prevention Plan of Care. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • BED: place bed in lowest position when in bed. Revision on: 09/10/2025		PCA	D/E/N
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location	5 510 A
Last Care Plan Review Completed:		09/13/2025				



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
		Revision by: Danielle Loreto (RAI Coordinator) • HIP PROTECTORS: John wears hip protectors specify when worn; during day to safeguard against injury. Report to Registered Staff if not wearing. Revision on: 08/05/2025 Revision by: Chelsea Campbell-Wright (ADOC) • SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program. AAROM bilateral upper and lower extremities 5-10 reps, Sitting balance- perturbations to maintain 10s 5-10 reps, 2:1 sit to stands 10 reps, with PT- 3-5x week, participates with group exs classes-3x week Revision on: 09/26/2025 Revision by: Courtney Cipparone (PT - Physiotherapist) • ALARM: Small clip Alarm ON every shift: when in bed and wheelchair for safety. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/12/2025 Revision by: Maryola Perion (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	PCA	D/E/N			
• Potential for (Persistent) PAIN and alteration in comfort level related to Osteoarthritis, Impaired Mobility, General pain, complaints of shoulder pain, Left ankle fracture. Most Current RAI Pain Score is 1. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 12/13/2025  • Promote RAI Pain Score of 0 through to the next review. Target Date: 12/13/2025	• COMMUNICATION: Involve/collaborate with (John)/SDM) about pain management, goals of treatment, plan of care and treatment options. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • NON VERBAL CUES of PAIN for John 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: 04/15/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically	RN Registered Practical Nurse  PCA  Registered Practical Nurse				
<b>Allergies</b>	Arthrotec		<b>D.O.B.</b>	04/28/1945	<b>Physician</b>	Albert Patrick Ng	
<b>Diagnosis</b>	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses						
<b>Facility</b>	Berkshire Care Centre				<b>Print Date</b>	10/30/2025	
<b>Resident</b>	Lebert, John (922131005625)		<b>Admission Date</b>	04/15/2025	<b>Location</b>	5 510 A	
<b>Last Care Plan Review Completed:</b>		09/13/2025					

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"><li>• Potential for (Persistent) PAIN and alteration in comfort level related to Osteoarthritis, Impaired Mobility, General pain, complaints of shoulder pain, Left ankle fracture. Most Current RAI Pain Score is 1.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)			needed. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)			RN	
<ul style="list-style-type: none"><li>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Osteoarthritis, Left ankle fracture.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>• John will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date.</li></ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025 <ul style="list-style-type: none"><li>• John will have ALL ADL care needs met each day through the next review date.</li></ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025	<ul style="list-style-type: none"><li>• BATHING: John prefers (shower) on Mondays and Fridays Day shifts. John requires total assistance with bathing. May be more accepting of a bed bath depending on his moods and expressions.</li></ul> Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) <ul style="list-style-type: none"><li>• BED MOBILITY: John requires total assistance with his movement in bed of 1-2 team. 2nd team member present when expressions or fatigue are present.</li></ul> Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• DRESSING: John requires total assistance with dressing of his upper and lower body of 1 to 2 team members. 2nd team member present when expressions or fatigue are present.</li></ul> Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• EATING: John requires the team to feed him. He can participate at times when he is more alert and able. Team to monitor as his care level varies. He has his meals on the 5th floor in the dining room.</li></ul> Revision on: 09/10/2025			PCA	
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng	
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location	5 510 A	
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## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved	
<p>• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Osteoarthritis, Left ankle fracture.</p> <p>Revision on: 09/13/2025</p> <p>Revision by: Maryola Perion (RN)</p>			Revision by: Danielle Loreto (RAI Coordinator)						
			• LOCOMOTION: John is dependent on the team for his locomotion in his wheelchair.						PCA
			Tilt wheelchair PASD for Safety and comfort: every shift.						
			Revision on: 09/30/2025						
			Revision by: Lara Ismail (RN)						
			• PERSONAL HYGIENE: John requires total assistance by 1-2 staff for peri care. One staff extensive assistance to comb his hair, wash/dry his face and hands, to shave.						PCA
			2nd team member present when expressions or fatigue are present.						
			Revision on: 09/10/2025						
			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.						PCA
		Revision on: 09/10/2025							
		Revision by: Danielle Loreto (RAI Coordinator)							
		• TOILET USE: John is not using the toilet. He is provide his continence care in bed from 1-2 team members total assistance. 2nd team member present when expressions or fatigue are present.						PCA	
		Revision on: 09/10/2025							
		Revision by: Danielle Loreto (RAI Coordinator)							
		• TRANSFERRING: John is safe to transfer to tilt wheelchair with help of Maxi lift and 2 staff assist. Maxi Lift.						PCA	
		Revision on: 09/06/2025							
		Revision by: Heidhy Dumincil (Registered Practical Nurse)							
		• TRANSFER LIFT/SLING: Sling color is green.							
		Revision on: 09/06/2025							
		Revision by: Jenny Liu (RAI Coordinator)							
		• ORAL CARE: John has (all of his own teeth) and requires 1 staff to provide oral care.						PCA	
		Revision on: 09/10/2025							
		Revision by: Danielle Loreto (RAI Coordinator)							
Allergies	Arthrotec			D.O.B.	04/28/1945		Physician	Albert Patrick Ng	
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses								
Facility	Berkshire Care Centre						Print Date	10/30/2025	
Resident	Lebert, John (922131005625)			Admission Date	04/15/2025		Location	5 510 A	
Last Care Plan Review Completed:		09/13/2025							

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia, Osteoarthritis, Left ankle fracture. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)		• SHAVING - John prefers (beard, mustache, face) shaved on shower days and as needed. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)	PCA	D			
• Potential for CONSTIPATION related to (daily use of medication with binding effect, decreased mobility, etc.) Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To minimize the potential for episodes/ complications of constipation through to the next review date Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/13/2025	• 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				
• Potential for Expressive Behaviour of (VERBAL, RESISTANCE to care need) related to Inability to COPE, Dementia Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote safety for John and/or others during each episode of Expressive Behaviour through to the next review date.	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of John for indications to change in or for escalating expressive behaviour risk. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL Calling out, asked repetitive questions, as					
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng	
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location	5 510 A	
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Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 04/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025  • John will be supported to adjust to his new environment to lower the risk of triggering former (PHYSICAL inappropriate, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/13/2025	expressions of behaviour include limitation in self expression, pain, confusion, forgetfulness Revision on: 08/05/2025 Revision by: Chelsea Campbell-Wright (ADOC) • VERBAL Behaviour: If Jon is often repeating anxious questions such as "where is my wife? Can I have something?" Redirect and Validate John's concerns. Attempt offering a snack, toileting or an activity. Validate John's concerns. Use stop and go approach. Report episode to Registered Staff. Revision on: 08/05/2025 Revision by: Chelsea Campbell-Wright (ADOC) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, etc.) Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If John is declining to change clothes, take medications, eat re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/05/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
• Strength Training Revision on: 09/10/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increase strength LT shoulder from 3+/5 to 4/5 in next 3 months; Revision on: 09/10/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/13/2025	• Strengthening exercises for Lt UE using 1-2lbs. wt., 1 set, 10rps., 2-3/wk as tolerated, per rehab treatment. Sit to stand at the wall bar 1-2 person assist, slowly increase standing time to 60sec. 3=5 reps, 2-3 x a week; Revision on: 10/16/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
• ROM Exs Revision on: 09/10/2025 Revision by: Shina Wadhwa (Physical Therapist)		• Increase ROM for B/L LE knee extension from -10 to WFL in next 3 months; Revision on: 09/10/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/13/2025	• B/L LE A-AAROM exs as best tolerated, 10 reps, 1-2 sets; Rt UE AAROM only in pain free range: 10 reps, Passive gentle stretching for B/L Quads and Hams, 20 sec hold, 3-5 reps, 2-3 x a week; Revision on: 09/19/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng	
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses						
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Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location	5 510 A	
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Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> <li>• ROM Exs</li> </ul> Revision on: 09/10/2025 Revision by: Shina Wadhwa (Physical Therapist)					
<ul style="list-style-type: none"> <li>• Potential to experience alteration in MOOD as exhibited by Hx of expression of unrealistic fear, fears, crying, tearfulness, persistent anger with self or others, repetitive anxious complaints &amp; sad, pained, worried facial expression related to Decline in Health Condition, Loss of Independence, Dementia, Pain.</li> </ul> Revision on: 04/23/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> <li>• To decrease the episodic frequency of negative Mood symptoms by the next review date. DRS score will be less than 3.</li> </ul> Revision on: 04/23/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025	<ul style="list-style-type: none"> <li>• 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.</li> </ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• RESIDENT STRENGTHS: Build on John's effort to maintain control. Encourage him/her to express self, state preferences and make safe choices for care and activities.</li> </ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• FAMILY SUPPORT: John enjoys visits from wife and relatives.</li> </ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• SLEEP/REST: Promote adequate sleep and rest to stability of John's mood. Report changes in sleeping habits to Registered Staff as noted.</li> </ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects.</li> </ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> <li>• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia</li> </ul> Revision on: 04/23/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> <li>• John is severely impaired in cognition and will have needs interpreted and met each day through to the review date. CPS score is 6.</li> </ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025	<ul style="list-style-type: none"> <li>• ORIENTATION: Gently reorient to (person, place, time) as needed when John is feeling lost or in confused state.</li> </ul> Revision on: 04/15/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.</li> </ul>	Registered Staff		
<b>Allergies</b>	Arthrotec	<b>D.O.B.</b>	04/28/1945	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lebert, John (922131005625)	<b>Admission Date</b>	04/15/2025	<b>Location</b>	5 510 A
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	<p>• John will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date. Revision on: 04/16/2025 Revision by: Niharika Chopra (Food Service Supervisor) Target Date: 12/13/2025</p> <p>• Will weigh within realistic GWR of 70-80 kg through to next review date. Revision on: 04/24/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/13/2025</p> <p>• John will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1862 ml/day (25 ml/kg) through to next review date. Revision on: 04/24/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/13/2025</p>	<p>• Labelled Item Dinner: ice cream cup (115 ml) daily - encourage and assist him to eat Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• Labelled Item Lunch: 1 can (355 ml) gingerale daily for hydration/bowel regularity Revision on: 04/24/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• NUTRITION RISK: John is HIGH risk level. Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• DIET ORDER: John will receive regular diet, pureed texture Revision on: 09/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p> <p>• FLUID CONSISTENCY: John drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/16/2025 Revision by: Niharika Chopra (Food Service Supervisor)</p> <p>• FLUID TARGET: Encourage John to drink a minimum of 1500 ml/day. Revision on: 04/24/2025 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>• MEDPASS SUPPLEMENTS: 120 ml of Resource 2.0 TID Revision on: 09/04/2025 Revision by: Holly Laasanen (Dietitian (RD))</p>	PCA Registered Practical Nurse RN PCA Registered Practical Nurse RN Dietitian (RD) FSM PCA PCA PCA Dietary aide PCA	E  

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		etc.). Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of John's Allergy to Arthrotec and minimize risk for exposure to allergen. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)		
• Potential for altered genitourinary function or complications related to diagnosis of BENIGN PROSTATIC HYPERTROPHY (BPH). Revision on: 04/15/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with BPH through to next review date. Target Date: 12/13/2025	• COMMUNICATION: Involve/collaborate with (John)/SDM in decision making for BPH care management. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • 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: 04/23/2025 Revision by: Maryola Perion (RN)	Registered Staff	
• Sleep Patterns; Potential for alteration in sleep patterns related to new admission, awake at night. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)	• To promote adequate rest/sleep for John based on identified sleep patterns/preferences each night through to the next review date. Revision on: 07/14/2025 Revision by: Chelsea Campbell-Wright (ADOC) Target Date: 12/13/2025	• REST PATTERN: Preferred bedtime: around 10:00pm, usual wake time: around 9:00am and Naps when he wants Revision on: 04/23/2025 Revision by: Maryola Perion (RN)	PCA	
• 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: 04/15/2025 Revision by: Maryola Perion (RN)	• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)	• COMMUNICATION: Involve/collaborate with (John)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status		
<b>Allergies</b>	Arthrotec		<b>D.O.B.</b>	04/28/1945
<b>Diagnosis</b>	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses		<b>Physician</b>	Albert Patrick Ng
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lebert, John (922131005625)	<b>Admission Date</b>	04/15/2025	<b>Location</b> 5 510 A
<b>Last Care Plan Review Completed:</b>		09/13/2025		



## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 12/13/2025	and alteration or complications affecting functioning or quality of life. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.		Registered Staff	
• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Dementia. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)		• John will be supported to maintain current communication abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 04/18/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 12/13/2025	• PRIMARY LANGUAGE: John's primary language is English. He is able to speak/understand English. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: John needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 04/15/2025 Revision by: Maryola Perion (RN)		• John will have bowel incontinence managed every shift through to the next review period. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.  Monitor for blood in stool and in brief. If noted report to the nurse. Revision on: 05/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL Continence level is Incontinent. Report change to level as noted.		PCA	
			CHECK and CHANGE: John experiences TOTAL incontinence and requires checks and change each time noted to be soiled. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.		PCA	
			• INCONTINENCE PRODUCT: John uses a BLUE brief on Days, Evening and Night		PCA	
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location	5 510 A
Last Care Plan Review Completed:		09/13/2025				

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential for BOWEL INCONTINENCE related to Dementia Revision on: 04/15/2025 Revision by: Maryola Perion (RN)			shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN)			
• URINARY ( Mixed) INCONTINENCE related to Benign Prostatic Hyperplasia (BPH), Dementia Diagnosis Revision on: 04/15/2025 Revision by: Maryola Perion (RN)		• John will have urinary incontinence managed every shift through to the next review period. Revision on: 04/20/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 12/13/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level.  Monitor for hematuria- report to the nurse if noted. Revision on: 05/09/2025 Revision by: Danielle Loreto (RAI Coordinator) • URINARY Continence level is TOTAL Incontinent. Report change to level as noted. PCA Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • SCHEDULED TOILETING: Check and change John every 2 hours and PRN. PCA Q2h Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • CHECK and CHANGE: John experiences TOTAL incontinence and requires checks PCA and change each time noted to be soiled. Revision on: 09/10/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: John uses a BLUE brief on Days, Evening and Night PCA shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN)			
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS		• To treat and minimize signs/symptoms or complications associated with Osteoarthritis through to the	• COMMUNICATION: Involve/ collaborate with (John)/SDM in decision making of musculoskeletal care management. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of Osteoarthritis as per MD			
Allergies	Arthrotec		D.O.B.	04/28/1945	Physician	Albert Patrick Ng
Diagnosis	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lebert, John (922131005625)		Admission Date	04/15/2025	Location	5 510 A
Last Care Plan Review Completed:		09/13/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	next review date. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025	order. Monitor effectiveness and for side effects. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 04/15/2025 Revision by: Maryola Perion (RN)		
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD). Revision on: 04/15/2025 Revision by: Maryola Perion (RN)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Target Date: 12/13/2025	• COMMUNICATION: Involve/collaborate with (John)/SDM in decision making for GERD Management. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) • POSITIONING: Encourage resident to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals.  • MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.	PCA Registered Staff  Registered Staff	
• Expressed Wishes and Beliefs related to John's Medical Treatment and End of Life Care Revision on: 04/15/2025 Revision by: Maryola Perion (RN)	• To support and honor John's expressed wishes and beliefs through to the End of Life. Revision on: 04/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/13/2025	• DNR - do not attempt CPR: Decision to transfer to hospital will be made at the time - see PoET Individualized Summary for details. Revision on: 09/17/2025 Revision by: Gurjit Kaur (RN)		

<b>Allergies</b>	Arthrotec	<b>D.O.B.</b>	04/28/1945	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lebert, John (922131005625)	<b>Admission Date</b>	04/15/2025	<b>Location</b>	5 510 A
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report


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**Diagnosis**

Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Fracture of ankle NOS, closed(S82.890)

<b>Allergies</b>	Arthrotec	<b>D.O.B.</b>	04/28/1945	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hyperplasia of prostate(N40), Gastric ulcer, unspecified as acute or chronic, without haemorrhage or perforation(K25.9), Unspecified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lebert, John (922131005625)	<b>Admission Date</b>	04/15/2025	<b>Location</b>	5 510 A
<b>Last Care Plan Review Completed:</b>		09/13/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved			
<ul style="list-style-type: none"> <li>Potential for Acute PAIN and alteration in comfort level related to Recurrent UTIs, TIA, lower back pain. Most Current RAI Pain Score is 0.</li> </ul> Revision on: 09/23/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> <li>To promote resident comfort and effectively manage ACUTE pain as episode occurs through to the next review.</li> </ul> Target Date: 01/15/2026  <ul style="list-style-type: none"> <li>Promote RAI Pain Score of 0 through to the next review.</li> </ul> Target Date: 01/15/2026	<ul style="list-style-type: none"> <li><b>MONITORING:</b> Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</li> <li><b>NON VERBAL CUES</b> of PAIN for Bonnie includes - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed.</li> <li><b>MEDICATION:</b> Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</li> </ul> Revision on: 10/06/2025 Revision by: Maryola Perion (RN)  Revision on: 07/09/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse  PCA   Registered Practical Nurse RN				
<ul style="list-style-type: none"> <li><b>STRONG PARTICIPATION</b> in Activities.</li> </ul> ISE score = 5/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	<ul style="list-style-type: none"> <li>Bonnie will be supported to maintain participation in activities 30-40 times per month by the next review date.</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 01/15/2026	<ul style="list-style-type: none"> <li><b>STRUCTURED ACTIVITIES:</b> Invite Bonnie to programs of personal interest; baking, arts &amp; crafts, colouring, concerts, cards, movies, parties, tea social, walking programs, reading/reminiscing groups, etc.</li> <li><b>SELF-DIRECTED ACTIVITIES:</b> Encourage Bonnie to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, etc.</li> <li><b>HELPFUL HINTS:</b> Bonnie is a retired high school art teacher, she loves to converse and tell stories. She participates in programs of all domains but prefers art programs and walking.</li> <li><b>ONE to ONE:</b> Provide her with individual visits for conversation, bedside activity, reading, conversing/reminiscing, colouring, etc</li> <li><b>SENSORY STIMULATION:</b> Provide her with Sensory Stimulation for Hand</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
<b>Allergies</b>	Sulfa Antibiotics	<b>D.O.B.</b>	08/25/1952	<b>Physician</b>	Albert Patrick Ng		
<b>Diagnosis</b>	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025		
<b>Resident</b>	Levac, Bonnie (922131005640)		<b>Admission Date</b>	06/27/2025	<b>Location</b>	5 506 A	
<b>Last Care Plan Review Completed:</b>		10/15/2025					

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<p>• STRONG PARTICIPATION in Activities.</p> <p>ISE score = 5/6</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p>			<p>Massage, Tactile Books, Snoezelen Activity, Reading Aloud, Sensory Pictures, etc.</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p> <p>• FAMILY INVOLVEMENT: Family is highly involved and visits often; Husband visits and takes her for walks/outings regularly.</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p> <p>• SOCIAL INTERACTION: Bonnie interacts positively with most residents and staff.</p> <p>Revision on: 09/21/2025</p> <p>Revision by: Kameron Stewart (Recreation Aide)</p>			Recreation Aide	
<p>• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.)</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>• To monitor effectiveness and for side effects of medication used each day through to the next review date.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>Target Date: 01/15/2026</p>	<p>• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about medicinal regime and appropriate medication use.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.</p>			Registered Staff	
<p>• Potential for Expressive Behaviour of WANDERING, RESISTANCE to care, Verbal, Physical, Socially Inappropriate related to Amnesic Dementia, Hx of Hallucinations/delusion, Depression, Anxiety.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p>		<p>• To promote safety for Bonnie /or others during each episode of Expressive Behaviour through to the next review date.</p> <p>Revision on: 06/27/2025</p> <p>Revision by: Jenny Liu (RAI Coordinator)</p> <p>Target Date: 01/15/2026</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Bonnie for indications to change in or for escalating expressive behaviour risk.</p> <p>Revision on: 07/09/2025</p> <p>Revision by: Maryola Perion (RN)</p> <p>• TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change, refusing medication, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</p> <p>Revision on: 06/27/2025</p>				
Allergies	Sulfa Antibiotics			D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Levac, Bonnie (922131005640)			Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025					

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved					
		<ul style="list-style-type: none"><li>• To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 1.</li></ul> Revision on: 07/09/2025 Revision by: Maryola Perion (RN) Target Date: 01/15/2026	Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• RESISTANCE to Care Need: If Bonnie is declining to (bathe, change clothes, take medications, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• TRIGGERS leading to SOCIALLY Inappropriate (collects used toilet paper and put in pocket or dresser, hide toilet paper, flush briefs down the toilet; rummage through owen drawers, etc.) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• SOCIALLY Inappropriate Behaviour: If Bonnie is noted to (hoarding/rummaging.) gently redirect her.</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• WANDERING: Permit Bonnie to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• HALLUCINATION: hearing/seeing people in her home who are not there. Do try to distract the person by involving them in something they find interesting. like watching TV</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) <ul style="list-style-type: none"><li>• DELUSION: Believes there are other people in her house and someone else owns the home she lives in. Do try to distract the person by involving them in something they find interesting ( watching TV ect.)</li></ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)						Registered Practical Nurse RN				
			Registered Practical Nurse RN										
			Registered Practical Nurse RN										
• Potential to experience alteration in		• Bonnie will be supported to	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of for										
Allergies	Sulfa Antibiotics			D.O.B.	08/25/1952		Physician	Albert Patrick Ng					
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses												
Facility	Berkshire Care Centre						Print Date	10/30/2025					
Resident	Levac, Bonnie (922131005640)			Admission Date	06/27/2025		Location	5 506 A					
Last Care Plan Review Completed:		10/15/2025											

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
MOOD related to Depression, Anxiety, Amnesic Dementia. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)	maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • RESIDENT STRENGTHS: Build on Bonnie effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • DISTRACTION ACTIVITIES: Bonnie can be calmed doing activities of interest including (Specify; listening to music, doing puzzles, watching movies, etc.) Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Potential for altered hematologic symptoms or complications related to diagnosis of Vit B12 ANEMIA. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)	• To treat and/or minimize complications associated with Vit B12 ANEMIA each day through to the next review date. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) Target Date: 01/15/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making of hematologic care management for Vit B12 ANEMIA. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Vit B12 ANEMIA for complications or changes to health status. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.  • MEDICATION: Administer medication for Vit B12 ANEMIA as per MD Order. Monitor effectiveness and for side effects. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)	Registered Staff		
• Altered COMMUNICATION as exhibited by limitations to (self expression) related to Amnesic Dementia. Revision on: 07/09/2025	• Bonnie will be supported to maintain current communication abilities to (express self, comprehend information, etc.)	• PRIMARY LANGUAGE: Bonnie primary language is English. She is able to speak/understand English. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
<b>Allergies</b>	Sulfa Antibiotics	<b>D.O.B.</b>	08/25/1952	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Levac, Bonnie (922131005640)	<b>Admission Date</b>	06/27/2025	<b>Location</b>	5 506 A
<b>Last Care Plan Review Completed:</b>		10/15/2025			



## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Maryola Perion (RN)		each day through to the review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026  • Bonnie will be supported to make basic needs known each day through to the review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • INSTRUCTION GUIDANCE: Bonnie needs constant cueing or demonstrative instruction in tasks and activities. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)				
• Increased risk for FALLS related to history of fall at home. Limitation of cognitive function/altered judgement, dementia, wandering. Revision on: 07/09/2025 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/15/2026	• COMMUNICATION: Involve/collaborate with Bonnie/Paul in decision making in fall prevention Plan of Care. Revision on: 06/27/2025 Revision by: Chelsea Campbell-Wright (ADOC) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment reduce clutter, night light, to reduce fall risk for Bonnie Revision on: 06/27/2025 Revision by: Chelsea Campbell-Wright (ADOC) • BED: place bed in lowest position to lower risk for injury. Revision on: 10/13/2025 Revision by: Tola Omolade (ADOC) • ACTIVITY: Engage Bonnie in meaningful activity to decrease boredom and or restlessness. Offer Bonnie a change to rest. Resident likes to: fold towels, look at pictures in picture books and family pictures, sorting activities Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC)				
<b>Allergies</b>	Sulfa Antibiotics			<b>D.O.B.</b>	08/25/1952	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses						
<b>Facility</b>	Berkshire Care Centre					<b>Print Date</b>	10/30/2025
<b>Resident</b>	Levac, Bonnie (922131005640)			<b>Admission Date</b>	06/27/2025	<b>Location</b>	5 506 A
<b>Last Care Plan Review Completed:</b>		10/15/2025					

## Care Plan Report

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

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 01/15/2026	Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
<ul style="list-style-type: none"> <li>• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Dementia, Anxiety, Depression</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> <li>• To promote adequate rest/sleep for Bonnie on identified sleep patterns/preferences each night through to the next review date.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	<ul style="list-style-type: none"> <li>• REST PATTERN: Preferred bedtime 21:00, usual wake time; early riser, may get restlessness when waking up too early.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
<ul style="list-style-type: none"> <li>• Potential for BOWEL INCONTINENCE related to Dementia diagnosis.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> <li>• Bonnie will have bowel incontinence managed every shift through to the next review period.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.</li> </ul>		Registered Staff	
		<ul style="list-style-type: none"> <li>• Bonnie will receive support to (use toilet) and promote optimal bowel continence each day through to the next review.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	<ul style="list-style-type: none"> <li>• BOWEL Continence level is occasionally Incontinent. Report change to level as noted.</li> </ul> Revision on: 10/06/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> <li>• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> <li>• INCONTINENCE PRODUCT: Resident uses white color brief.</li> </ul> Revision on: 06/28/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
<ul style="list-style-type: none"> <li>• Bonnie at high risk for ELOPEMENT related to wandering.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> <li>• To promote Bonnie safety and minimize risk for episode of elopement each day through next review date.</li> </ul> Revision on: 06/27/2025	<ul style="list-style-type: none"> <li>• ALERT: Bonnie has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately.</li> </ul> Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025				

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• DIVERSION ACTIVITY: Resident responds well to ( playing music, doing puzzles, knitting, reading, conversing, singing, watching TV, etc.) to divert attention when exit seeking. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • ELOPEMENT ALERT: Redirect Bonnie away from elevator or exit doors as needed. PCA Revision on: 07/09/2025 Revision by: Maryola Perion (RN)			
• COGNITIVE LOSS; alteration in thought processes ( memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dx with Amnestic dementia. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• Bonnie will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 5. Revision on: 07/09/2025 Revision by: Maryola Perion (RN) Target Date: 01/15/2026	• ORIENTATION: Gently reorient to ( person, place, time) as needed when Bonnie is feeling lost or in confused state. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.		PCA  Registered Staff	
• Expressed Wishes and Beliefs related to Bonnie Medical Treatment and End of Life Care Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• To support and honor Bonnie expressed wishes and beliefs through to the End of Life. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• CPR: Bonnie wishes to have CPR and transfer to hospital decisions to be made as needed Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Altered ability to complete Activities of Daily Living (ADLs) related to dx with Amnestic Dementia, Depression. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• Bonnie will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)	• BATHING: Bonnie prefers showers and her shower days are Thursday and Monday in the day shift. Resident participates by washing her front. Two staff members to provide extensive assistance to wash her back and lower extremities. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Bonnie is able to turn and reposition in bed without any assistance from the staff. She may require one staff limited assistance at times. PCA			
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025				

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		Target Date: 01/15/2026	<p>Revision on: 10/06/2025 Revision by: Maryola Perion (RN)</p> <p>• DRESSING: Bonnie is able to assist in lifting her arms and limbs with cueing and guidance from staff. One staff member to provide Extensive assistance for dressing UPPER &amp; LOWER body.</p> <p>Revision on: 10/06/2025 Revision by: Maryola Perion (RN)</p> <p>• EATING: Bonnie is able to eat by herself once set up by the team. May require cueing and reminders from staff.</p> <p>Revision on: 10/06/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: Bonnie is Independent with Supervision from staff when ambulating on and off the unit.</p> <p>Revision on: 10/06/2025 Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Bonnie is able to wash her face, hands and comb her hair. but requires one team member to provide peri-care due to incontinence.</p> <p>Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide REMINDER assistance to ( use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene.</p> <p>Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• TOILET USE: Bonnie is able to transfer on/off the toilet with cueing and guidance from staff. However she is mostly incontinent and requires one staff extensive assistance with toilet use.</p> <p>Revision on: 07/09/2025 Revision by: Maryola Perion (RN)</p> <p>• TRANSFERRING: Bonnie is independent with transferring.</p> <p>Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)</p> <p>• ORAL CARE: Bonnie has her own teeth. Team member to provide reminders, cueing and guidance to complete her oral care.</p> <p>Revision on: 07/09/2025 Revision by: Maryola Perion (RN)</p>				PCA	
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng		
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A		
Last Care Plan Review Completed:		10/15/2025						

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to dx with Amnesitic Dementia, Depression. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			• FOOT CARE: PSW to complete toenail care on her bath days. Report long toe nails PCA or other abnormalities as noted. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: TRANSIENT ISCHEMIC ATTACK (TIAs)		• To treat and minimize signs/symptoms or complications associated with TIA through to the next review date. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with TIA for changes to health status and alteration or complications affecting neurological function. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
• URINARY INCONTINENCE related to Dementia Diagnosis Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)		• Bonnie will have urinary incontinence managed every shift through to the next review period. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/15/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator) • URINARY Continence level is FREQUENTLY Incontinent. Report change to level PCA as noted. Revision on: 06/27/2025 Revision by: Jenny Liu (RAI Coordinator)			
Allergies	Sulfa Antibiotics		D.O.B.	08/25/1952	Physician	Albert Patrick Ng
Diagnosis	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Levac, Bonnie (922131005640)		Admission Date	06/27/2025	Location	5 506 A
Last Care Plan Review Completed:		10/15/2025				

## Care Plan Report

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

## Care Plan Report

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


### Diagnosis

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

<b>Allergies</b>	Sulfa Antibiotics	<b>D.O.B.</b>	08/25/1952	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Occlusion and stenosis of carotid artery(I65.2), Anxiety disorder, unspecified(F41.9), Depressive episode, unspecified(F32.9), Delusional disorder(F22.0), Other hallucinations(R44.2), Urinary tra...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Levac, Bonnie (922131005640)	<b>Admission Date</b>	06/27/2025	<b>Location</b>	5 506 A
<b>Last Care Plan Review Completed:</b>		10/15/2025			



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"><li>• Potential for Persistent PAIN and alteration in comfort level related to Degenerative Disk Disease, back pain present, arthralgia/myalgia. Most Current LTCF Pain Score is 1.</li></ul> Revision on: 10/14/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review.</li></ul> Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026  <ul style="list-style-type: none"><li>• Promote RAI Pain Score of 0 through to the next review.</li></ul> Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with (Yvonne)/SDM) about pain management, goals of treatment, plan of care and treatment options.</li></ul> Revision on: 07/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• 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.</li></ul> <ul style="list-style-type: none"><li>• NON VERBAL CUES of PAIN for Yvonne include - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed.</li></ul> Revision on: 07/16/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed.</li></ul> Revision on: 07/16/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse  PCA  Registered Practical Nurse RN			
<ul style="list-style-type: none"><li>• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility and transfer).</li></ul> Revision on: 09/01/2025 Revision by: Suzanne Azar (RN)	<ul style="list-style-type: none"><li>• Yvonne will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility and transfer) each day through to the next review date.</li></ul> Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	<ul style="list-style-type: none"><li>• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of two 1/4 bed rails.</li></ul> Revision on: 09/01/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none"><li>• 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.</li></ul> Revision on: 09/01/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none"><li>• 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.</li></ul> Revision on: 09/01/2025 Revision by: Suzanne Azar (RN)	PCA	D/E/N		
<ul style="list-style-type: none"><li>• Risk for Impaired SKIN INTEGRITY related to Incontinence, Dementia and dry skin to bil. legs. Edema on both ankles.</li></ul> Revision on: 08/03/2025	<ul style="list-style-type: none"><li>• To protect and maintain skin integrity each day through to the next review.</li></ul> Revision on: 09/29/2025	<ul style="list-style-type: none"><li>• 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.</li></ul>	PCA			
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified (E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	
Last Care Plan Review Completed:		10/14/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Maryola Perion (RN)	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• HEALTH EDUCATION: Engage Yvonne in health education regarding prevention of skin impairment and management of her edema on both ankles. Encourage to elevate her leg when in bed. Revision on: 08/03/2025 Revision by: Maryola Perion (RN)				
• SPIRITUAL BELIEFS: Yvonne is Jehovah's witness Revision on: 07/16/2025 Revision by: Nick Carroll (Recreation Aide)		• SPIRITUAL PROGRAMS: Encourage Yvonne to continue reading her book of religious scriptures independently. Engage Yvonne in conversation about her past being a Jehovah's witness Revision on: 07/16/2025 Revision by: Nick Carroll (Recreation Aide) • SELF-DIRECTED ACTIVITIES Provide Yvonne with colouring materials & montessori materials. Revision on: 07/16/2025 Revision by: Nick Carroll (Recreation Aide)				
• Potential to experience (rash, hives, anaphylaxis, etc.) related to ALLERGY to Penicillin. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)	• Yvonne will be protected from exposure to allergen each day through next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• COMMUNICATION: Involve/collaborate with (Yvonne)/SDM in decision making and health teaching about ALLERGY to Penicillin. Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with allergy for changes to health status and complications. Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • ALLERGY ALERT: Yvonne has ALLERGY to Penicillin. Prevent contact with and report if noted to experience symptoms (rash, hives, swelling, difficulty breathing, etc.). Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of Yvonne's Allergy to Penicillin and minimize risk for exposure to allergen. Revision on: 07/16/2025 Revision by: Maryola Perion (RN)				
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, arthralgia/myalgia, Dementia. Revision on: 07/16/2025	• Yvonne will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care	• BATHING: Yvonne prefers shower on Tuesday and Friday in the evening shift. She PCA requires one staff physically help in part of the bath activities. She is able to wash her front. However she has been refusing her shower for the last six months according to the granddaughter.				
Allergies	Penicillin		D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025				

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Maryola Perion (RN)		needs are met each day through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	Staff will continue to encourage Yvonne as she is refusing. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Yvonne is able to turn and reposition in bed independently. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • DRESSING: Yvonne is independent and able to remove and change her clothing. Staff will continue to remind Yvonne. She may require one staff limited assistance at times. Revision on: 10/14/2025 Revision by: Maryola Perion (RN) • EATING: Supervision- Yvonne requires cueing, reminder when eating. she eats on the floor dining room Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • LOCOMOTION: Supervision- Yvonne walks independently on the unit, requires supervision from the team due to wandering. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL HYGIENE: Yvonne is Independent and requires supervision from the team to ensure she completed her personal hygiene properly. Revision on: 10/14/2025 Revision by: Maryola Perion (RN) • HAND HYGIENE: 1 staff to provide REMINDER assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator) • TOILET USE: Supervision-Yvonne is able to go on/off the toilet; able to pull her pants up after. Staff to help her locate the toilet when needed. Revision on: 10/14/2025 Revision by: Maryola Perion (RN) • TRANSFERRING: Yvonne is able to transfer herself between surfaces without any assistive device or staff. Revision on: 07/02/2025		PCA	
Allergies	Penicillin		D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025				

## Care Plan Report

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

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Low Motivation		Coordinator) Target Date: 01/14/2026	Revision by: Kameron Stewart (Recreation Aide) • SOCIAL INTERACTION: Promote opportunity for Yvonne to make friendships and sit with friends during activities. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)			
• BOWEL Continence - Yvonne is continent and has self recognition of urge to defecate. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)		• Yvonne to remain continent of bowels through next review date Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• BOWEL Continence level is CONTINENT. Report change to level as noted.  • SELF TOILETING: Yvonne toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA  PCA	
• Nutrition Risk Level		• Yvonne will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026  • Will weigh within GWR/IBW/Realistic weight range of 50-55 kg through to next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• NUTRITION RISK: Yvonne is moderate risk level. Revision on: 08/01/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DIET ORDER: Yvonne will receive regular diet, regular texture Revision on: 07/04/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FLUID CONSISTENCY: Yvonne drinks REGULAR/THIN Level 0 Fluids. Revision on: 07/02/2025 Revision by: Brittany Hyde (Registered Dietitian) • FLUID TARGET: Encourage Yvonne to drink a minimum of 1480 ml per day. Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)		Dietitian (RD)  PCA  PCA  PCA	
Allergies	Penicillin		D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
• Nutrition Risk Level	• Yvonne will be adequately hydrated aeb drinking at least 80% of total fluid requirement @ 25ml/kg through to next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026				
• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD) Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status. Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • POSITIONING: Encourage resident to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals.	PCA Registered Staff		
• Altered VISION related to Glaucoma Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	• Yvonne to use eyeglasses for vision correction daily through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• EYEGLASSES:Yvonne wears eyeglasses. Assist to clean eyeglasses as needed and store ( on night table, in night table drawer, etc.) when sleeping. Revision on: 07/02/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA		
• Potential for Expressive Behaviour of (WANDERING, refuse care, verbally/physically abusive) nature related to dx with Dementia, Delusions, Hallucinations, Anxiety and chronic depression Revision on: 07/02/2025	• To promote safety for Yvonne and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator)	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk.  • TRIGGERS leading to PHYSICAL (swat, push) as expression of behaviour include ( anger, frustration, fearfulness, confusion, invasion of personal space, Sundowning, hunger, constipation, startling from sleep, etc.)	Registered Staff		
Allergies	Penicillin	D.O.B.	11/27/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Lilly-Walters, Yvonne (922131005639)	Admission Date	07/02/2025	Location	5 502 B
Last Care Plan Review Completed:		10/14/2025			

## Care Plan Report

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

## Care Plan Report

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



## Care Plan Report

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

<b>Allergies</b>	Penicillin	<b>D.O.B.</b>	11/27/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lilly-Walters, Yvonne (922131005639)	<b>Admission Date</b>	07/02/2025	<b>Location</b>	5 502 B
<b>Last Care Plan Review Completed:</b>		10/14/2025			

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Altered COMMUNICATION as exhibited by limitations to self expression, comprehension, slurred speech, mumbled speech related to Dementia Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Yvonne will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases). Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Yvonne needs intermittent cueing or demonstrative instruction in tasks and activities. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Yvonne will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• ORIENTATION: Gently reorient to (person, place, time) as needed when Yvonne is feeling lost or in confused state. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Yvonne can comprehend and follow. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to Dementia, DDD, history of delusions and hallucinations. Limitation of cognitive function/altered judgement Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 09/29/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/14/2026	• COMMUNICATION: Involve/collaborate with (Yvonne)/SDM in decision making in fall prevention Plan of Care. Revision on: 07/16/2025 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 06/26/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment: reduce clutter in room, etc. to reduce fall risk for Yvonne. Revision on: 07/30/2025 Revision by: Chelsea Campbell-Wright (ADOC) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 07/16/2025				
Allergies	Penicillin		D.O.B.	11/27/1948		Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Lilly-Walters, Yvonne (922131005639)		Admission Date	07/02/2025		Location	5 502 B
Last Care Plan Review Completed:		10/14/2025					

## Care Plan Report

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

<b>Allergies</b>	Penicillin	<b>D.O.B.</b>	11/27/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lilly-Walters, Yvonne (922131005639)	<b>Admission Date</b>	07/02/2025	<b>Location</b>	5 502 B
<b>Last Care Plan Review Completed:</b>		10/14/2025			

## Care Plan Report

### Diagnosis

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

<b>Allergies</b>	Penicillin	<b>D.O.B.</b>	11/27/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Cervical disc disorder unspecified site(M50.9), Hypothyroidism, unspecified(E03.9), Glaucoma, unspecified...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Lilly-Walters, Yvonne (922131005639)	<b>Admission Date</b>	07/02/2025	<b>Location</b>	5 502 B
<b>Last Care Plan Review Completed:</b>		10/14/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
<ul style="list-style-type: none"> <li>• Alteration in skin integrity with risk for infection or complications related to SKIN TEAR to Left lateral calf #24.</li> </ul> Revision on: 10/24/2025 Revision by: Jane Del Rosario (RPN)	<ul style="list-style-type: none"> <li>• To promote optimal healing of SKIN TEAR within the next review date.</li> </ul> Revision on: 10/24/2025 Revision by: Jane Del Rosario (RPN) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR to Left lateral calf #24. for changes to health status and alteration or complications affecting skin integrity.</li> </ul> Revision on: 10/24/2025 Revision by: Jane Del Rosario (RPN) <ul style="list-style-type: none"> <li>• TREATMENT PLAN: Administer treatment for SKIN TEAR to Left lateral calf #24. as per MD Order.</li> </ul> Revision on: 10/24/2025 Revision by: Jane Del Rosario (RPN) <ul style="list-style-type: none"> <li>• 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.</li> </ul> Revision on: 10/24/2025 Revision by: Jane Del Rosario (RPN)			
<ul style="list-style-type: none"> <li>• Increased risk for FALLS related to wandering, cognitive loss and relocation, history of falls, impaired mobility and balance, self transferring, walking without assistance, non compliant with the use of wheelchair.</li> </ul> Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> <li>• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.</li> </ul> Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• PURPOSEFUL ROUNDING: Conduct purposeful rounding every hour during the day and evening and every 2 hours overnight to assess resident's needs; for pain, positioning, peri-needs or possessions for safety.</li> </ul> <ul style="list-style-type: none"> <li>• COMMUNICATION: Involve/collaborate with (Marion)/SDM in decision making in fall prevention Plan of Care.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• ENVIRONMENT: Secure environment: reduce clutter, to reduce fall risk for Marion.</li> </ul> Revision on: 05/24/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"> <li>• BED: ( place bed in lowest position with the brakes on) to lower risk for injury.</li> </ul> Revision on: 04/21/2025	PCA Registered Practical Nurse RN	D/E/N	
<b>Allergies</b>	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin... See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	12/31/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	MacDonald, Marion (922131005626)	<b>Admission Date</b>	04/17/2025	<b>Location</b>	5 525 A
<b>Last Care Plan Review Completed:</b>		10/21/2025			



## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
			Revision by: Lara Ismail (RN)			Practical Nurse	
			• ACTIVITY: Engage Teresa in meaningful activity to decrease boredom and or restlessness. Resident likes to listen to celtic music, country music like dolly Parten, enjoys playing uno and solitaire, crosswords, sorting money Revision on: 06/03/2025 Revision by: Chelsea Campbell-Wright (ADOC)			PCA	
			• FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation). Revision on: 04/29/2025 Revision by: Maryola Perion (RN)			PCA	D/E/N
			• HIP PROTECTORS: Marion wears hip protectors at all times to safeguard against injury. Report to Registered Staff if not wearing. Revision on: 05/19/2025 Revision by: Shabnam Mustary (RPN)			PCA	
			• SPECIAL CONSIDERATION to PREVENT FALLS: Resident participates in the Optimal Mobility Program. LE strengthening- AAROM, Sitting balance- unsupported 10s, reaching and perturbations 5x, AAROM bilateral upper and lower extremities 5-10 reps/xcise, hamstring and calf stretches 30s, 3 reps bilateral Revision on: 10/10/2025 Revision by: Courtney Cipparone (PT - Physiotherapist)			Personal Support Workers PCA Registered Staff	D/E/N
			• ALARMS: Requires small clip alarm when in Bed/Chair, Padded wheelchair alarm: Check placement and working order every shift. Marion will often remove alarm. Staff respond when alarm is heard. Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC)			PCA RN Registered Practical Nurse	
			• SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)				
• Alteration in skin integrity with risk for infection or complications related to #18 - Skin Tear - No Skin Loss Left Hand, 5th Digit (Small Finger)		• To promote optimal healing of SKIN TEAR within the target date. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with SKIN TEAR for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)				
Allergies	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025		Location	5 525 A
Last Care Plan Review Completed:		10/21/2025					

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Onset date: Oct. 11, 2025 Revision on: 10/15/2025 Revision by: Maryola Perion (RN)		Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• TREATMENT PLAN: Administer treatment for SKIN TEAR as per MD Order. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</li> <li>• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</li> </ul>			
<ul style="list-style-type: none"> <li>• Alteration in skin integrity related to #19 - Bruise - Blue/Purple Right Thigh Lateral Onset date: Oct. 14, 2025 Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</li> </ul>		<ul style="list-style-type: none"> <li>• To promote intact skin integrity through healing of BRUISE of Rt. upper thigh lateral by next review date. Revision on: 10/13/2025 Revision by: Lucy(Xifeng)Lu (RPN) Target Date: 01/21/2026</li> </ul>	<ul style="list-style-type: none"> <li>• MONITORING: Utilize the holistic perspective of continuous monitoring of her bruises to Rt. upper thigh lateral for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/13/2025 Revision by: Lucy(Xifeng)Lu (RPN)</li> <li>• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/15/2025 Revision by: Maryola Perion (RN)</li> </ul>			
<ul style="list-style-type: none"> <li>• Alteration in skin integrity with risk for infection or complications related to #17 - Skin Tear - Right Thigh Lateral and left pinky finger Revision on: 10/11/2025 Revision by: Hetal Patel (RN)</li> </ul>		<ul style="list-style-type: none"> <li>• To promote optimal healing of SKIN TEAR within the next review date. Revision on: 09/30/2025 Revision by: Janina Lucero (RN) Target Date: 01/21/2026</li> </ul>	<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with #17 - Skin Tear - Right Thigh Lateral and left pinky finger for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/11/2025 Revision by: Hetal Patel (RN)</li> <li>• TREATMENT PLAN: Administer treatment for #17 - Skin Tear - Right Thigh Lateral and left pinky finger as per MD Order. Revision on: 10/11/2025 Revision by: Hetal Patel (RN)</li> <li>• 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: 09/30/2025 Revision by: Janina Lucero (RN)</li> </ul>			
<ul style="list-style-type: none"> <li>• Gait Training Revision on: 10/01/2025 Revision by: Shina Wadhwa (Physical Therapist)</li> </ul>		<ul style="list-style-type: none"> <li>• Maintain walking endurance and capability in next 3 months; Revision on: 10/01/2025</li> </ul>	<ul style="list-style-type: none"> <li>• 2:1 assist hand in hand ambulation 20-40ft; increase walking endurance as best tolerated; 2-3 x a week; Revision on: 10/01/2025</li> </ul>		PT - Physiotherapist	
Allergies	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/21/2026	Revision by: Shina Wadhwa (Physical Therapist)	PTA		
<ul style="list-style-type: none"> <li>Potential to experience complications and side effects impacting quality of life related to use of ( multi-pharmacy, etc.)</li> </ul> Revision on: 07/25/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"> <li>To monitor effectiveness and for side effects of medication used each day through to the next review date.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve/collaborate with (Marion)/SDM in decision making and health teaching about medicinal regime and appropriate medication use.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>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.</li> </ul> Revision on: 07/25/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.</li> </ul>	Registered Staff		
<ul style="list-style-type: none"> <li>STRONG PARTICIPATION in Activities</li> </ul> Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide)	<ul style="list-style-type: none"> <li>Marion will be supported to maintain participation in activities 25-35 times per month by the next review date.</li> </ul> Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>STRUCTURED ACTIVITIES: Invite Marion to programs of personal interest, Montessori, sensory stimulation, movies, music programs, social events, card games, walking groups, trivia sessions and math quizzing.</li> </ul> Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> <li>ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities - to promote her participation in programs of personal interest.</li> </ul> Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> <li>HELPFUL HINTS: Marion enjoys playing card games on her own, or with a staff/resident. Enjoys singing especially 50s-70s classics, Marion also enjoys engaging in doll therapy.</li> </ul> Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> <li>SENSORY STIMULATION: Provide Marion with sensory stimulation for hand massage, tactile books, Snoezelen happiness projector and the Tovertafel.</li> </ul> Revision on: 10/21/2025 Revision by: Nick Carroll (Recreation Aide) <ul style="list-style-type: none"> <li>FAMILY INVOLVEMENT: Husband visits a few times per week</li> </ul>			
<b>Allergies</b>	Barium Sulfate, HYDROMORPHONE, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	12/31/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	MacDonald, Marion (922131005626)	<b>Admission Date</b>	04/17/2025	<b>Location</b>	5 525 A
<b>Last Care Plan Review Completed:</b>		10/21/2025			



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• STRONG PARTICIPATION in Activities Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide)		Revision on: 06/09/2025 Revision by: Kameron Stewart (Recreation Aide)				
• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Incontinence, Right ankle with mild swelling. Revision on: 05/19/2025 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Target Date: 01/21/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.	PCA			
• Alteration in skin integrity related to swelling to bil. ankle. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator)	• To promote intact skin integrity through healing of swelling by target date. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with swelling for changes to health status and alteration or complications affecting skin integrity. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator) • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 05/04/2025 Revision by: Jenny Liu (RAI Coordinator)				
• Potential for PAIN and alteration in comfort level related to Osteoarthritis, Impaired Mobility, Marion is able to removes the alarm: gets up from bed/wheelchair/ambulate. Most Current RAI Pain Score is 0. Revision on: 05/01/2025 Revision by: Maryola Perion (RN)	• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • NON VERBAL CUES of PAIN for Marion include - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 04/29/2025	RN Registered Practical Nurse  PCA			
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN			
• Potential to experience alteration in CARDIAC FUNCTION related to: Hypertension, Dyslipidemia Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Hypertension, Dyslipidemia through to the next review date. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	• COMMUNICATION: Involve/collaborate with (Marion)/SDM in decision making of Cardiac Care Management for Hypertension. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hypertension, Dyslipidemia for changes to health status and alteration or complications affecting cardiac function. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Hypertension, Dyslipidemia as per MD Order and monitor for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN			
• Potential for muscular dysfunction, contractures and bone deformity related to OSTEOARTHRITIS. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Osteoarthritis through to the next review date. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	• COMMUNICATION: Involve/ collaborate with (Marion)/SDM in decision making of musculoskeletal care management. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of Osteoarthritis as per MD order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 04/29/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to:	• To treat and minimize signs/symptoms or complications	• COMMUNICATION: Involve/ collaborate with (Marion)/ SDM in decision making of neurological care management for Brain aneurysm 1990 and acquired brain injury	PCA			
<b>Allergies</b>	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		<b>D.O.B.</b>	12/31/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025	
<b>Resident</b>	MacDonald, Marion (922131005626)		<b>Admission Date</b>	04/17/2025	<b>Location</b>	5 525 A
<b>Last Care Plan Review Completed:</b>		10/21/2025				

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia SEIZURE Disorder Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	associated with ( Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia, seizure) through to the next review date. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	from aneurysm, encephalomalacia SEIZURE Disorder Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for Seizure disorder as per MD order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Brain aneurysm 1990 and acquired brain injury from aneurysm, encephalomalacia for changes to health status and alteration or complications affecting neurological function. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Potential for Expressive Behaviour of (WANDERING, VERBAL, RESISTANCE to care need) nature related to Alzheimer's Dementia Revision on: 04/29/2025 Revision by: Maryola Perion (RN)	• To promote safety for Marion and/or others during each episode of (verbal, resistiveness, wandering) through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026  • To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS will be less than 4. Revision on: 07/25/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marion for indications to change in or for escalating expressive behaviour risk. Revision on: 07/25/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (yelling, calling names) as expression of behaviour include (possible feeling of loss of control, frustration, limitation in self expression, misunderstanding care intention) Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) • VERBAL Behaviour: If Marion is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of refusing to change clothing, refusal to shower, eat, etc as expression of behaviour include confusion, misunderstanding care needs, poor judgement, invading personal space Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) • RESISTANCE to Care Need: If Marion is declining to have care such as change clothing, refusal to shower, refusal of continence care, 2 Staff members to assist with			
<b>Allergies</b>	Barium Sulfate, HYDROMORPHONE, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	12/31/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	MacDonald, Marion (922131005626)	<b>Admission Date</b>	04/17/2025	<b>Location</b>	5 525 A
<b>Last Care Plan Review Completed:</b>		10/21/2025			

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING, VERBAL, RESISTANCE to care need) nature related to Alzheimer's Dementia</li></ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN)			providing personal care. Staff members use stop and go approach. One staff member to offer encouragement and reassurance. Team to talk Marion about mother for example saying what mother is doing today, mother wants you to have care, etc. Other staff member provides care. Report episode to Registered Staff. Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) • WANDERING: Permit Marion to safely roam in common area with 1 staff member. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC) • MEDICATION: Administer medication for therapeutic treatment of (Expressed Behaviour) as per MD Order. Monitor effectiveness and for side effects. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • BSO RECOMMENDATIONS: Marion enjoys activities such as cards, sorting, looking through picture books, cat therapy and celtic music Revision on: 08/01/2025 Revision by: Chelsea Campbell-Wright (ADOC)			Registered Practical Nurse RN	
<ul style="list-style-type: none"><li>• ROM Exs</li></ul> Revision on: 04/23/2025 Revision by: Shina Wadhwa (Physical Therapist)		<ul style="list-style-type: none"><li>• Increased B/L shoulder strength for flexion from 3/5 to 3+/5 in next 3 months;</li></ul> Revision on: 10/14/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>• Passive gentle stretching for B/L Hams and Calf; 3-5 reps, 20sec hold, 2-3 x a week;</li><li>Strengthening exs with B/L UE and LE with 1-2lbs, 10 reps or as best tolerated-2-3 x a week;</li></ul> Revision on: 10/14/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA	
<ul style="list-style-type: none"><li>• Nutrition Risk Level</li></ul>		<ul style="list-style-type: none"><li>• Marion will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date.</li></ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"><li>• NUTRITION RISK: "Teresa" is moderate risk level.</li></ul> Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)	
			<ul style="list-style-type: none"><li>• DIET ORDER: Marion will receive Regular diet, Regular texture</li></ul> Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA	
			<ul style="list-style-type: none"><li>• FLUID CONSISTENCY: Marion drinks REGULAR/THIN Level 0 Fluids.</li></ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)			Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025					

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
• Nutrition Risk Level		• Will weigh within realistic GWR 60-70 kg through to next review date. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026  • "Teresa" will be adequately hydrated aeb drinking at least 80% of total fluid requirement: 1670 ml/day (25 ml/kg using 66.8 kg weight) through to next review date. Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/21/2026	• FLUID TARGET: Encourage Marion (Teresa) to drink a minimum of 1336 ml/day Revision on: 10/09/2025 Revision by: Holly Laasanen (Dietitian (RD))  • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.				PCA   Dietary aide PCA	
• Altered VISION Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Marion supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	• EYEGLASSES: Marion wears eyeglasses. Ensure clean eyeglasses before putting it on her. Eyeglasses put on in the morning and get off at bedtime: Secured in the med-cart. Revision on: 07/25/2025 Revision by: Maryola Perion (RN)				PCA	
• Sleep Patterns; Potential for alteration in sleep patterns related to relocation, confusion, cognitive loss. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Marion based on identified sleep patterns/preferences each night through to the next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI	• REST PATTERN: Preferred bedtime 2100, usual wake time 0700 and daytime naps at varied times. Monitor for fatigue. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)				PCA	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng	
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025		Location	5 525 A	
Last Care Plan Review Completed:		10/21/2025						

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Sleep Patterns; Potential for alteration in sleep patterns related to relocation, confusion, cognitive loss.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		Coordinator) Target Date: 01/21/2026				
<ul style="list-style-type: none"> <li>Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM</li> </ul>		<ul style="list-style-type: none"> <li>To treat and/or minimize signs/symptoms of (HYPOTHYROIDISM) through to the next review date.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve/ collaborate with (Marion)/SDM in decision making of thyroid care management.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with (HYPOTHYROIDISM) for changes to health status and alteration or complications affecting endocrine function.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>LAB WORK: Monitor lab and diagnostic results and report results to MD as needed. Follow up as indicated.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> <li>Potential for BOWEL INCONTINENCE related to Limited mobility and cognitive loss.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> <li>Marion will have bowel incontinence managed every shift through to the next review period.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.</li> </ul> <ul style="list-style-type: none"> <li>BOWEL Continence level is (Total Incontinence). Report change to level as noted.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</li> </ul> <ul style="list-style-type: none"> <li>INCONTINENCE PRODUCT: Marion uses a Blue Brief on Days, Evening and night</li> </ul>		Registered Staff  PCA  PCA  PCA	
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN)			
• URINARY (Mixed) INCONTINENCE related to altered mobility Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Marion will have urinary incontinence managed every shift through to the next review period. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 04/29/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is (TOTAL Incontinent). Report change to level as noted. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Marion uses a Blue Brief on Days, Evening and night shifts. Revision on: 06/12/2025 Revision by: Maryola Perion (RN) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed.		PCA	
• Marion is at high risk for ELOPEMENT related to change in environment Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote Marion safety and minimize risk for episode of elopement each day through next review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	• ALERT: Marion has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Marion away from elevator or exit doors as needed.		PCA	
• Potential to experience alteration in MOOD as exhibited by (restlessness, looking for husband) related to Alzheimer's Dementia Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Marion will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Marion for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Marion effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 04/17/2025			
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
			Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> <li>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension,) related to Alzheimer's Dementia</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> <li>• Marion will be supported to make basic needs known each day through to the review date.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases).</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>• INSTRUCTION GUIDANCE: Marion needs (intermittent) cueing or demonstrative instruction in tasks and activities.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> <li>• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Alzheimer's Dementia</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> <li>• Marion is severely impaired in cognition and will have needs interpreted and met each day through to the review date. CPS score is 5.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• ORIENTATION: Gently reorient to (person, place, time) as needed when Marion is feeling lost or in a confused state.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• PERSONAL ROUTINE: Provide consistency in care routine and activities.</li> </ul> Revision on: 04/29/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>• CUE TASKS: Break tasks into manageable subtasks, Marion can comprehend and follow.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
<ul style="list-style-type: none"> <li>• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Limited Mobility</li> </ul>		<ul style="list-style-type: none"> <li>• Marion will have ALL ADL care needs met each day through the next review date.</li> </ul> Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/21/2026	<ul style="list-style-type: none"> <li>• BATHING: Marion prefers shower on Tuesday and Friday afternoons. Resident participates by moving arms when cues and cues to use face cloth.</li> </ul> 2 team maximal assistance. <ul style="list-style-type: none"> <li>Nail care to be provided on shower/bath day.</li> </ul> Revision on: 10/26/2025 Revision by: Lara Ismail (RN) <ul style="list-style-type: none"> <li>• BED MOBILITY: Marion is able to reposition self in bed without support.</li> </ul> PCA <ul style="list-style-type: none"> <li>She may require 1 to 2 team members extensive to maximal assistance when fatigued or confused.</li> </ul>			
Allergies	Barium Sulfate, HYDROMorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944	Physician	Albert Patrick Ng
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025	Location	5 525 A
Last Care Plan Review Completed:		10/21/2025				



## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			<p>Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</p> <p>• DRESSING: Marion is able to move arms and legs when cued</p> <p>2 staff to provide MAXIMAL assistance upper and lower body.</p> <p>Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Marion requires cueing and supervision from staff. May require one staff</p> <p>to feed her at times. Eats in the unit dining room - wildflower Lane.</p> <p>Revision on: 04/29/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: Marion requires 2 person assistance arm and arm with ambulation.</p> <p>Wheelchair as mode of locomotion and requires one staff to propel her on the unit. Marion will try to get up and walk by herself. Staff to monitor.</p> <p>Revision on: 05/01/2025 Revision by: Maryola Perion (RN)</p> <p>• PERSONAL HYGIENE: Marion is able to (move arms and assist to wash when</p> <p>cued if not confused in the moment).</p> <p>Two staff to provide MAXIMAL assistance for hygiene.</p> <p>Revision on: 04/29/2025 Revision by: Maryola Perion (RN)</p> <p>• HAND HYGIENE: 1 staff to provide TOTAL assistance to (use soap/water, apply</p> <p>sanitizer, rub hands together, dry hands) for hand hygiene.</p> <p>Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: Marion requires 2 team members maximal assistance with toileting</p> <p>and continence care.</p> <p>Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Marion requires 2 team member maximal assistance for</p> <p>transferring.</p> <p>Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• ORAL CARE: Marion has her own teeth intact. Team to brush teeth and provide</p> <p>oral care.</p>				PCA	
Allergies	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies		D.O.B.	12/31/1944		Physician	Albert Patrick Ng	
Diagnosis	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	MacDonald, Marion (922131005626)		Admission Date	04/17/2025		Location	5 525 A	
Last Care Plan Review Completed:		10/21/2025						

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Limited Mobility		Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Expressed Wishes and Beliefs related to Marion Medical Treatment and End of Life Care Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 01/21/2026	• CPR: Marion Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 04/17/2025 Revision by: Danielle Loreto (RAI Coordinator)		

<b>Allergies</b>	Barium Sulfate, HYDROmorphone, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	12/31/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	MacDonald, Marion (922131005626)	<b>Admission Date</b>	04/17/2025	<b>Location</b>	5 525 A
<b>Last Care Plan Review Completed:</b>		10/21/2025			

## Care Plan Report

### Diagnosis


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

### Allergies

Barium Sulfate, HYDROmorphine, Naproxen, Nitrofurantoin

<b>Allergies</b>	Barium Sulfate, HYDROmorphine, Naproxen, Nitrofurantoin...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	12/31/1944	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Cerebral aneurysm, nonruptured(I67.1), Benign hypertension(I10.0), Primary generalized (osteo)arthrosis(M15.0), Hypothyroidism, unspecified(E03.9), Alzheimer's disease, unspecified(G30.9), Other ...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	MacDonald, Marion (922131005626)	<b>Admission Date</b>	04/17/2025	<b>Location</b>	5 525 A
<b>Last Care Plan Review Completed:</b>		10/21/2025			

## Care Plan Report

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

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		(Dietitian (RD)) Target Date: 01/07/2026	• FLUID CONSISTENCY: David drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
		• Dave will be adequately hydrated aeb drinking at least 80% of total fluid requirement 2475 ml/day (25 ml/kg using 99 kg weight) through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/07/2026	• FLUID TARGET: Encourage Dave to drink at least 1980 ml/day Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA	
			• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.		Dietary aide PCA	
• David is at high risk for ELOPEMENT related to wandering and on locked unit. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• To promote David safety and minimize risk for episode of elopement each day through next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• ALERT: David has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			
			• ELOPEMENT ALERT: Redirect David away from elevator or exit doors as needed. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
• Potential for Expressive Behaviour of ( WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, Hoarding and rummaging, RESISTANCE to care need) nature related to Sundowning. Alzheimer's disease. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of (Expressive Behaviour) by the next review date. ABS score will be less than 3. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) Target Date: 01/07/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of (resident name) for indications to change in or for escalating expressive behaviour risk.  • TRIGGERS leading to VERBAL (yelling, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		Registered Staff	
			• VERBAL Behaviour: If David is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff.			
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
			<div>Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing/brief, etc.) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.) Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • RESISTANCE to Care Need: If David is declining to ( change clothes/brief, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • TRIGGERS leading to SOCIALLY Inappropriate (hoarding papers and rummage through drawers) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.) Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • SOCIALLY Inappropriate Behaviour: If David is noted to (rummaging and hoarding.) gently redirect him. Staff to check and remove it when needed. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • WANDERING: Permit David to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • HALLUCINATION: Will speak and ask questions to people who he thinks are living in the bathroom mirror. Report to registered staff when present, consult with MD and ensure safely for David and other resident/staff. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • DELUSION: Believes there are people who live in the bathroom mirror and will often not want to go into the bathroom as he doesn't want to disturb them. Will often urinate in other areas as result of that. Approach David calmly, reduce stimuli, and use simple language to establish a connection to reality. Revision on: 10/09/2025</div>				Registered Practical Nurse RN	
Allergies	Shingrix		D.O.B.	01/21/1953		Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Martin, David (922131005666)		Admission Date	10/09/2025		Location	5 519 C	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Potential for Expressive Behaviour of ( WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, Hoarding and rummaging, RESISTANCE to care need) nature related to Sundowning. Alzheimer's disease. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			Revision by: Jenny Liu (RAI Coordinator)			
• Potential to experience alteration in MOOD related to Alzheimer's Disease Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• David will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of David for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • RESIDENT STRENGTHS: Build on David's effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)			
• Potential for Acute PAIN and alteration in comfort level related to Acid reflux. Most Current RAI Pain Score is 0. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • NON VERBAL CUES of PAIN for David includes - facial grimacing, tight fists,		RN Registered Practical Nurse  PCA	
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
		crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc. Report these to Registered staff when observed. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	Registered Practical Nurse RN			
• Risk for Impaired SKIN INTEGRITY related to Incontinence and cognitive impairment, Feet have pitting edema 2+ and legs.. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	• To protect and maintain skin integrity each day through to the next review. Target Date: 01/07/2026	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted.  • HEALTH EDUCATION: Encourage David to elevate his legs when in bed due to edema. Revision on: 10/16/2025 Revision by: Maryola Perion (RN)	PCA			
• Potential to experience (Specify; rash, hives, anaphylaxis, etc.) related to ALLERGY of Shingrix. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	• David will be protected from exposure to allergen each day through next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status and complications. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • ALLERGY ALERT: David has ALLERGY to Shingrix Prevent contact with and report if noted to experience symptoms (Specify; rash, hives, swelling, difficulty breathing, etc.). Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • MD/PHARMACY ALERT: Notify the MD and Pharmacy of David Allergy to Shingrix and minimize risk for exposure to allergen. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)				
• BOWEL Continence -David is continent and has self recognition of urge to	• David to remain continent of bowels through next review date Revision on: 10/09/2025	• BOWEL Continence level is Usually CONTINENT. Report change to level as noted. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	PCA			
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
defecate. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> <li>• SELF TOILETING: David toilets self for bowel movements. Each shift ask if he/she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
<ul style="list-style-type: none"> <li>• URINARY INCONTINENCE related to Alzheimer's disease.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> <li>• David will have urinary incontinence managed every shift through to the next review period.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		
	<ul style="list-style-type: none"> <li>• David will receive support to (use toilet) and promote urinary continence each shift through to the next review.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> <li>• URINARY Continence level is (FREQUENTLY Incontinent). Report change to level as noted.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> <li>• INCONTINENCE PRODUCT: Resident uses medium size brief every shift per wife request.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	PCA	
<ul style="list-style-type: none"> <li>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Alzheimer's disease.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	<ul style="list-style-type: none"> <li>• David will be supported to make basic needs known each day through to the review date.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> <li>• PRIMARY LANGUAGE: David primary language is English. He is able to speak/understand English.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		
		<ul style="list-style-type: none"> <li>• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc..</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		

<b>Allergies</b>	Shingrix	<b>D.O.B.</b>	01/21/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Martin, David (922131005666)	<b>Admission Date</b>	10/09/2025	<b>Location</b>	5 519 C

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Expressed Wishes and Beliefs related to David Medical Treatment and End of Life Care Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		• To support and honor David expressed wishes and beliefs through to the End of Life. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 10/09/2025 Revision by: Gurjit Kaur (RN)				
• Increased risk for FALLS related to wandering and alzheimer's disease. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with (David)/SDM in decision making in fall prevention Plan of Care. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • ENVIRONMENT: Secure environment : reduce clutter, etc. to reduce fall risk for David. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear at all times. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)				
• Potential to experience alteration in ENDOCRINE FUNCTION related to low thyroid. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		• To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• COMMUNICATION: Involve/ collaborate with (David)/SDM in decision making of thyroid care management. Revision on: 10/22/2025 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: 10/09/2025				
Allergies	Shingrix		D.O.B.	01/21/1953		Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025		Location	5 519 C

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		Revision by: Jenny Liu (RAI Coordinator) • MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order. Monitor effectiveness and for side effects. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		
• Potential for gastric discomfort/complications related to diagnosis of Acid reflux. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	• To treat and/or minimize complications associated with GERD each day through to the next review date. Target Date: 01/07/2026	• COMMUNICATION: Involve/collaborate with (David)/SDM in decision making for GERD Management. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status.  • POSITIONING: Encourage resident to avoid lying down for at least one hour after eating; elevate head of bed, encourage resident to sit/stand upright after meals.  • MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.	Registered Staff   PCA Registered Staff  Registered Staff	
• Altered VISION related to aging and wear glasses. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)	• David supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	• EYEGLASSES: David wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping. Revision on: 10/22/2025 Revision by: Maryola Perion (RN) • READING: David uses large print material to aid with reading. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	PCA  PCA	
• COGNITIVE LOSS; alteration in thought processes ( memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Alzheimer's Disease Revision on: 10/09/2025	• David will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/22/2025 Revision by: Maryola Perion (RN)	• ORIENTATION: Gently reorient to ( person, place, time) as needed when is David is feeling lost or in confused state. Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) • PERSONAL ROUTINE: Provide consistency in care routine and activities. Revision on: 10/09/2025	PCA	
<b>Allergies</b>	Shingrix	<b>D.O.B.</b>	01/21/1953	<b>Physician</b> Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses			
<b>Facility</b>	Berkshire Care Centre	<b>Print Date</b>	10/30/2025	
<b>Resident</b>	Martin, David (922131005666)	<b>Admission Date</b>	10/09/2025	<b>Location</b> 5 519 C

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Jenny Liu (RAI Coordinator)		Target Date: 01/07/2026	Revision by: Jenny Liu (RAI Coordinator)		Registered Staff	
<ul style="list-style-type: none"> <li>• Altered ability to complete Activities of Daily Living (ADLs) related to Alzheimer's disease, Acid reflux, high cholesterol and low thyroid.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		<ul style="list-style-type: none"> <li>• David will have ALL ADL care needs met each day through the next review date.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> <li>• BATHING: David prefers shower Evening shift Tuesday and Saturday. Need assistance from one person during shower.</li> </ul> Revision on: 10/26/2025 Revision by: Lara Ismail (RN)		PCA	
		<ul style="list-style-type: none"> <li>• David will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator) Target Date: 01/07/2026	<ul style="list-style-type: none"> <li>• BED MOBILITY: David is Independent but may require Extensive assistance from one team member to help him to turn and reposition in bed.</li> </ul> Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> <li>• DRESSING: David is able to assist minimally by lifting his arms and legs with cueing from staff. Requires two staff Maximal assistance to dress his upper and lower body.</li> </ul> Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> <li>• EATING: David is able to eat by himself once set up done by the team.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
			<ul style="list-style-type: none"> <li>• LOCOMOTION: David is independent with supervision from staff. He is not using any assistive device at this time.</li> </ul> He may require one staff Limited assistance when walking if he is getting unsteady or weak.           Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> <li>• PERSONAL HYGIENE: David is able to wash hands, face and comb his hair; But he requires extensive assistance from one team member to provide peri-care.</li> </ul> Revision on: 10/22/2025 Revision by: Maryola Perion (RN)		PCA	
			<ul style="list-style-type: none"> <li>• HAND HYGIENE: 1 staff to provide REMINDER assistance to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene.</li> </ul> Revision on: 10/09/2025 Revision by: Jenny Liu (RAI Coordinator)		PCA	
Allergies	Shingrix		D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Martin, David (922131005666)		Admission Date	10/09/2025	Location	5 519 C

## Care Plan Report

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<b>Allergies</b>	Shingrix	<b>D.O.B.</b>	01/21/1953	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Martin, David (922131005666)	<b>Admission Date</b>	10/09/2025	<b>Location</b>	5 519 C

Care Plan Report

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

Allergies	Shingrix	D.O.B.	01/21/1953	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Pure hypercholesterolaemia(E78.0), Gastro-oesophageal reflux disease without oesophagitis(K21.9), Hypothyroidism, unspecified(E03.9), Malignant neoplasm o...See last page for a complete listing of the Resident's diagnoses				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Martin, David (922131005666)	Admission Date	10/09/2025	Location	5 519 C

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Potential to experience alteration in CARDIAC FUNCTION related to: Hyperlipidaemia</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> <li>To treat and minimize signs/symptoms or complications associated with Hyperlipidaemia through to the next review date.</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve/collaborate with (Lillian)/SDM in decision making of Cardiac Care Management for Hyperlipidaemia.</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with Hyperlipidaemia for changes to health status and alteration or complications affecting cardiac function.</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MEDICATION: Administer medication for Hyperlipidaemia as per MD Order and monitor for side effects.</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
<ul style="list-style-type: none"> <li>Potential for Expressive Behaviour of (WANDERING, SOCIALLY Inappropriate, hoarding), verbal, resisting care nature related to Vascular Dementia, Severe Anxiety and Bipolar</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> <li>To decrease the episodic frequency of Expressive Behaviour by the next review date. ABS score will be less than 5.</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025 <ul style="list-style-type: none"> <li>Lillian will be supported to adjust to his/her new environment to lower risk of triggering former (WANDERING, socially inappropriate behaviour, hoarding) behaviour episodes through to the next review.</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lillian for indications to change in or for escalating expressive behaviour risk.</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>TRIGGERS leading to VERBAL (yelling, screaming, calling names, etc.) as expressions of behaviour include (frustration, misunderstanding care intention, etc.)</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>VERBAL Behaviour: If Lillian is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expressions of behaviour include (confusion, misunderstanding care needs, poor judgement, paranoid thought process, etc.)</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>RESISTANCE to Care Need: If Lillian is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</li> </ul>				
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng	
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING, SOCIALLY Inappropriate, hoarding), verbal, resisting care nature related to Vascular Dementia, Severe Anxiety and Bipolar</li></ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)			<p>Revision on: 10/07/2025 Revision by: Maryola Perion (RN)</p> <ul style="list-style-type: none"><li>• TRIGGERS leading to SOCIALLY Inappropriate (hoarding briefs new and used ones, placing toilet p[aper in her brief, wandering) as expression of behaviour include (Specify cause; confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</li></ul> <p>Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"><li>• SOCIALLY Inappropriate Behaviour: If Lillian is noted to (placing toilet paper in her brief, hoarding briefs or other items) gently redirect her and try to assist her to removing the paper towel as well to enter her room when she is not present and check for hoarded items and remove.</li></ul> <p>Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"><li>• WANDERING: Permit Lillian to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</li></ul> <p>Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <ul style="list-style-type: none"><li>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</li></ul> <p>Revision on: 10/07/2025 Revision by: Maryola Perion (RN)</p>		Registered Practical Nurse RN	
<ul style="list-style-type: none"><li>• Potential to experience alteration in MOOD as exhibited by persistent anger with self or others related to Vascular Dementia, Bipolar, Severe Anxiety.</li></ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"><li>• Lillian will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date.</li></ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"><li>• HEALTH EDUCATION: Provide education and support to (Lillian)/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed.</li></ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		RN Registered Practical Nurse	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A



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Focus		Goal	Interventions		Position	Freq/Resolved
• Potential to experience alteration in MOOD as exhibited by persistent anger with self or others related to Vascular Dementia, Bipolar, Severe Anxiety. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)			Revision by: Danielle Loreto (RAI Coordinator)  • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)			
• Potential for PAIN and alteration in comfort level related to history of femur fracture and possible migraine disorder. Most Current Ltcf Pain Score is 0. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		• Promote RAI Pain Score of 0 through to the next review. Target Date: 12/17/2025	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		RN Registered Practical Nurse  Registered Practical Nurse RN	
• Potential for CONSTIPATION Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		• Lillian will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025  • To minimize the potential for episodes/ complications of constipation through to the next review date.	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for constipation management and changes to health status and symptoms/ complications of constipation.  • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.  • BOWEL PROTOCOL: In place as per MD order		Registered Staff  Registered Staff  Registered Staff	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Potential for CONSTIPATION</li> </ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN)		Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025				
<ul style="list-style-type: none"> <li>Use of PASD (one right side 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility).</li> </ul> Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)		<ul style="list-style-type: none"> <li>Lillian will be effectively supported with use of (bed rails) to optimize Activity of Daily Living (bed mobility) each day through to the next review date.</li> </ul> Revision on: 10/02/2025 Revision by: Suzanne Azar (RN) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of bed rails.</li> </ul> Revision on: 10/02/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL).</li> </ul> <ul style="list-style-type: none"> <li>BED RAIL (One PARTIAL): 1/4 Rail to RIGHT side in USE as a PASD to assist resident with (specify; bed mobility, transfer in/out of bed). Monitor every shift.</li> </ul> Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)		Registered Staff  PCA	  D/E/N
<ul style="list-style-type: none"> <li>Temporary-Activities related to Move In</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		<ul style="list-style-type: none"> <li>Lillian will be engaged and invited to participate in all spheres of activities offered during the first days/weeks upon move in.</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>INVITATION: Invite and Encourage resident to attend scheduled programs. Also extend invite to Spiritual focused programs.</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"> <li>CALENDAR: Provide program calendar(verbally review if needed).</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"> <li>SOCIAL Introduction: Introduce her to other residents of similar age, interest, language, etc. as she can tolerate.</li> </ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)			
<ul style="list-style-type: none"> <li>Lillian has potential to experience a safety hazard/burn injury related to personal SMOKING habits.</li> </ul> Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> <li>Lillian will be safe when choosing to smoke through to the next review</li> </ul> Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve (Lillian/SDM) in review of smoking legislation (No smoking inside the home or within 9 meters from any doorway) and identify the designated area/s where smoking is permitted.</li> </ul> Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)		Social Worker	
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>• CHECK: Room and personal belongings to be checked for smoking materials every shift.</li> <li>• STORAGE: Smoking materials to be appropriately stored by (Nurse) and (Lillian) to return cigarettes/lighter/matches after each smoke break.</li> </ul> Revision on: 09/19/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	D/E/N
<ul style="list-style-type: none"> <li>• Risk for Impaired SKIN INTEGRITY related to Frailty, Incontinence peripheral edema.</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>• To protect and maintain skin integrity each day through to the next review.</li> </ul> Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Staff as noted.</li> </ul>	PCA	
<ul style="list-style-type: none"> <li>• Nutrition Risk Level</li> </ul>	<ul style="list-style-type: none"> <li>• Lillian will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date.</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>• NUTRITION RISK: Lillian is high risk level.</li> </ul> Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian)	Dietitian (RD)	
	<ul style="list-style-type: none"> <li>• Will weigh within GWR/IBW/Realistic weight range of 58-64 kg/BMI 22-25 through to next review date.</li> </ul> Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>• DIET ORDER: Lillian will receive regular diet, regular texture</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
	<ul style="list-style-type: none"> <li>• Lillian will be adequately hydrated aeb drinking at least 80% of total fluid requirement</li> </ul>	<ul style="list-style-type: none"> <li>• FLUID CONSISTENCY: Lillian drinks REGULAR/THIN Level 0 Fluids.</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> <li>• FLUID TARGET: Encourage Lillian to drink a minimum of 1160ml per day.</li> </ul> Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian)	PCA	
		<ul style="list-style-type: none"> <li>• EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.</li> </ul>	Dietary aide PCA	
		<ul style="list-style-type: none"> <li>• MEDPASS SUPPLEMENTS: 237ml boost fruit beverage TID</li> </ul>		
		(Hx of refusing Resource 2.0)		
		Revision on: 10/01/2025 Revision by: Brittany Hyde (Registered Dietitian)		
Allergies	No Known Allergies		D.O.B.	02/20/1952
			Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre		Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025
			Location	5 522 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Nutrition Risk Level		@25 ml/kg, through to next review date. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 12/17/2025  • Will meet estimated nutritional requirements of 25-30 kcal/kg, protein @ 1.2-1.5g/kg through to next review date. Revision on: 09/24/2025 Revision by: Brittany Hyde (Registered Dietitian) Target Date: 12/17/2025					
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Vascular Dementia, BiPolar and Severe Anxiety Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Lillian based on identified sleep patterns/preferences each night through to the next review date. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	• REST PATTERN: Preferred bedtime 2230-2300, usual wake time 1000-1100 and daytime naps when she wants to. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	
• Potential for BOWEL INCONTINENCE related to Vascular Dementia Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		• (Resident name) will have bowel incontinence managed every shift through to the next review period. 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 OCCASIONALLY Incontinent. Report change to level as noted. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)  • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.			Registered Staff  PCA  PCA	
Allergies	No Known Allergies		D.O.B.	02/20/1952		Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025		Location	5 522 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none"><li>• INCONTINENCE PRODUCT: Resident uses a white brief throughout all shifts.</li></ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
<ul style="list-style-type: none"><li>• URINARY (Mixed) INCONTINENCE related to Vascular Dementia</li></ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"><li>• Lillian will have urinary incontinence managed every shift through to the next review period.</li></ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/17/2025	<ul style="list-style-type: none"><li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level.</li></ul> Revision on: 10/07/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• URINARY Continence level is ( FREQUENTLY Incontinent). Report change to level as noted.</li></ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• INCONTINENCE PRODUCT: Resident uses white brief throughout all shifts</li></ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA  <	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
concentrating, altered judgement) related to progression of Vascular Dementia Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		through the review date. Current CPS is 3. Revision on: 10/07/2025 Revision by: Maryola Perion (RN) Target Date: 12/17/2025	Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Lillian can comprehend and follow. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"> <li>Increased risk for FALLS related to Vascular Dementia as evidence by Limitation of cognitive function/altered judgement</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> <li>To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period.</li> </ul> Target Date: 12/17/2025	<ul style="list-style-type: none"> <li>CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: Walker Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>ENVIRONMENT: Secure environment reduce clutter, night light, quiet environment, etc.) to reduce fall risk Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)</li> <li>SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/07/2025 Revision by: Maryola Perion (RN)</li> </ul>			PCA	D/E/N
<ul style="list-style-type: none"> <li>Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation</li> </ul>		<ul style="list-style-type: none"> <li>Lillian 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.</li> </ul> Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>BATHING: Lillian can participate with 1 team member limited assistance with washing herself on her bath days. She has per shower/bath (offer a choice) on Thursday and Sunday on the day shift.  Team members to perform nail care. Revision on: 10/26/2025 Revision by: Lara Ismail (RN)</li> <li>BED MOBILITY: Lillian is independent with movement in bed.</li> </ul>			PCA	PCA
Allergies	No Known Allergies			D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)			Admission Date	09/18/2025	Location	5 522 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 12/17/2025	<p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• DRESSING: Lillian is highly involved. She can do much of the dressing herself but needs guidance limited 1 team member assistance to complete task for both upper and lower body. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: Lillian is independent with eating. She may require her meat to be cut up at times. Team to monitor for the need to assist with set up as her care level varies. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• LOCOMOTION: Independent with the locomotion on the home area. Requires supervision when off the home area. Resident walks with walker. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: Lillian can complete most of her hygiene care needs on her own but needs guidance limited assistance from 1 team member to complete tasks. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide REMINDERS to use soap/water, apply sanitizer, rub hands together, dry hands, etc. for hand hygiene. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: Lillian is able to transfer on and off the toilet on her own is able to toilet on her own. Monitor for the need for assistance due to her incontinence she may require 1 team member limited assistance to assist with her continence care. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: Lillian is independent with her transferring. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• ORAL CARE: Lillian has full upper dentures, partial lower dentures and is able to complete her own oral and denture care. Monitor for changes in ability to do so. PCA</p> <p>Revision on: 09/18/2025</p> <p>Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• FOOT CARE: PSW) to complete toenail care on shower days. Report long toe nails PCA</p>			
Allergies	No Known Allergies		D.O.B.	02/20/1952	Physician	Albert Patrick Ng
Diagnosis	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	McCullough, Lillian (922131005663)		Admission Date	09/18/2025	Location	5 522 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		or other abnormalities as noted. Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Expressed Wishes and Beliefs related to (Lillian Medical Treatment and End of Life Care Revision on: 09/18/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To support and honor (resident's name) expressed wishes and beliefs through to the End of Life. Target Date: 12/17/2025	• DO NOT ATTEMPT CPR: Transfer to hospital decision will be made as needed - see PoET Individualized Summary for details. Revision on: 10/06/2025 Revision by: Gurjit Kaur (RN)		

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	02/20/1952	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	McCullough, Lillian (922131005663)	<b>Admission Date</b>	09/18/2025	<b>Location</b>	5 522 A




## Care Plan Report

### Diagnosis

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	02/20/1952	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Bipolar affective disorder, unspecified(F31.9), Anxiety disorder, unspecified(F41.9), Hyperlipidaemia, unspecified(E78.5), Lipid storage disorder, unspecified(E75.6), Vascular dementia, unspecifi...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	McCullough, Lillian (922131005663)	<b>Admission Date</b>	09/18/2025	<b>Location</b>	5 522 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<p>• STRONG PARTICIPATION in Activities.</p> <p>Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)</p>	<p>• Maria will be supported to maintain participation in activities 10-20 times per month by the next review date.</p> <p>Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026</p>	<p>• STRUCTURED ACTIVITIES: Invite her to programs of personal interest; Friendly/1: 1 visits, arts &amp; crafts, discussion group, exercise programs, Montessori programs, music programs, reading programs, reminiscing groups, sensory cart,&amp; YouTube videos.</p> <p>Revision on: 08/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as listening to music (Mariachi bands), visiting with residents &amp; team members, adult colouring, reading independently, folding towels. Also provide her with baby dolls &amp; electronic pets.</p> <p>Revision on: 08/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• ASSISTANCE: Provide assistance/encouragement to get her to scheduled activities ACT - Accompany off home area, Walk with, Guide to, Cue Direction, Reminders, etc.</p> <p>Revision on: 05/27/2020 Revision by: Shayna Lee Wonsch (Activation Manager)</p> <p>• ONE to ONE: Provide her with individual visits for iPad videos,talking about churches, looking at pictures of Mexico. Engage Maria in different discussions. Also provide her with baby dolls &amp; electronic pets.</p> <p>Revision on: 08/08/2025 Revision by: Nick Carroll (Recreation Aide)</p> <p>• SENSORY STIMULATION: Provide her with Sensory Stimulation for (Specify; Hand Massage, Tactile Books, Snoezelen Activity, Reading Aloud, Sensory Pictures.</p> <p>Revision on: 10/22/2025 Revision by: Nick Carroll (Recreation Aide)</p>				
<p>• Potential for (Persistent) PAIN and alteration in comfort level related to Osteoarthritis, left leg/knee pain/sore rt fall. Most Current RAI Pain Score is 0.</p> <p>Revision on: 08/07/2025 Revision by: Maryola Perion (RN)</p>	<p>• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review.</p> <p>Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026</p> <p>• Promote RAI Pain Score of 0</p>	<p>• COMMUNICATION: Involve/collaborate with Maria/SDM about pain management, goals of treatment, plan of care, prognosis and treatment options.</p> <p>Revision on: 02/21/2021 Revision by: Maryola Perion (RN)</p> <p>• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.</p> <p>• NON VERBAL CUES of PAIN for Maria includes - (facial grimacing, tight fists,</p>	<p>RN Registered Practical Nurse  PCA</p>			
<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/14/1948	<b>Physician</b>	Albert Patrick Ng	
<b>Diagnosis</b>	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19 (U07.5)					
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025	
<b>Resident</b>	Micuda, Maria (922131005225)	<b>Admission Date</b>	05/16/2019	<b>Location</b>	5 507 A	
<b>Last Care Plan Review Completed:</b>		08/22/2025				

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		through to the next review. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed for pain. Revision on: 07/04/2023 Revision by: Sonpreet Kaur Gurm (RPN)				Registered Practical Nurse RN	
• Potential for Expressive Behaviour of wandering, verbal/physical, socially inappropriate, resistance to care need/baths, wandering to other residents room and will take their belongings, hoarding. putting soiled bed sheets/pad (soaked with urine) underneath her bed, scratching, hides hip protector in her drawers/closet/underneath her mattress, hitting/scratching and slapping/punching/ biting psWs related to: Dementia, MDD Revision on: 05/19/2025 Revision by: Maryola Perion (RN)		• To promote safety for Maria and/or others during each episode of expressive behaviors through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026  • To decrease the episodic frequency of Expressive behavior by the next review date. ABS score will be less than 2. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with SDM about identified Risk of Expressive Behaviour, discuss triggering factors, and plan of care needs/options as needed. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)  • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Maria for indications to change in or for escalating expressive behaviour risk. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • TRIGGERS leading to PHYSICAL (punching staff, scratching, etc.) as expression of behaviour include (cause: anger, confusion, etc) Revision on: 11/21/2023 Revision by: Maryola Perion (RN) • PHYSICAL Behaviour: If Maria is attempting to strikeout, scratch; move back from her reach. Calmly indicate that care will continue when she is calm/ready. Seek Registered Staff assistance. Revision on: 11/21/2023 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (yelling, screaming) as expression of behaviour include (Specify cause: frustration, limitation in self expression, misunderstanding care intention) Revision on: 09/16/2019 Revision by: Maryola Perion (Registered Nurse) • VERBAL Behaviour: If Maria is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt				Registered Staff BSO - Internal BSO - External Social Worker	
Allergies	No Known Allergies		D.O.B.	07/14/1948		Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Micuda, Maria (922131005225)		Admission Date	05/16/2019		Location	5 507 A	
Last Care Plan Review Completed:		08/22/2025						

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
		to resolve her concern. Report episode to Registered Staff. Revision on: 05/15/2021 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of (refusal to bathe/shower, etc.) as expression of behaviour include (misunderstanding care needs, poor judgment) Revision on: 12/07/2024 Revision by: Maryola Perion (RN) • RESISTANCE to Care Need: If Maria is refusing to (bathe, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 12/07/2024 Revision by: Maryola Perion (RN) • TRIGGERS leading to SOCIALLY Inappropriate (hoarding left over food, utensils, etc. in her room/drawer, underneath her bed, threw a glass of fluids to floor/staff, wandering to other residents room and will take their belongings, putting soiled bed sheets/pad(soaked with urine) underneath her bed) as expression of behaviour include decreased insight, poor judgment. Revision on: 04/23/2024 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: If Maria is noted to (hoarding left over food, utensils, etc. in her room/drawer, underneath her bed, threw a glass of fluids to floor/staff, putting soiled bed sheets/pad(soaked with urine) underneath her bed) gently redirect her to focus on task at hand or escort to quieter area. Revision on: 04/23/2024 Revision by: Maryola Perion (RN) • SOCIALLY Inappropriate Behaviour: Registered staff/staff is encouraged to not wander into room/take other residents belongings. Revision on: 06/07/2022 Revision by: Maryola Perion (RN) • WANDERING: Permit Maria to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed. Revision on: 09/16/2019 Revision by: Maryola Perion (Registered Nurse)			
• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed	• Maria will be effectively supported with use of two 1/4	• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of two 1/4 bed rails.			
<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/14/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Micuda, Maria (922131005225)	<b>Admission Date</b>	05/16/2019	<b>Location</b>	5 507 A
<b>Last Care Plan Review Completed:</b>		08/22/2025			

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
mobility and transfer). Revision on: 03/18/2025 Revision by: Suzanne Azar (RN)		bed rails to optimize Activity of Daily Living (transfer and bed mobility) each day through to the next review date. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN) Target Date: 01/18/2026	Revision on: 03/18/2025 Revision by: Suzanne Azar (RN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use two 1/4 bed rails as to support appropriate bed mobility and transfer. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN) • BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 03/18/2025 Revision by: Suzanne Azar (RN)			PCA	D/E/N
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, etc.) Revision on: 09/11/2024 Revision by: Maryola Perion (RN)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 09/11/2024 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.			Registered Staff	
• Potential for BOWEL INCONTINENCE related to Dementia. Revision on: 09/11/2024 Revision by: Maryola Perion (RN)		• Maria will receive support to use toilet and promote optimal bowel continence each day through to the next review. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 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 Occasionally Incontinent. Report changes to level as noted. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency. Revision on: 09/11/2024 Revision by: Maryola Perion (RN)			Registered Staff  PCA  PCA	
Allergies	No Known Allergies		D.O.B.	07/14/1948	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Micuda, Maria (922131005225)		Admission Date	05/16/2019	Location	5 507 A	
Last Care Plan Review Completed:		08/22/2025					

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• Potential for BOWEL INCONTINENCE related to Dementia. Revision on: 09/11/2024 Revision by: Maryola Perion (RN)		• INCONTINENCE PRODUCT: Maria uses a Blue Brief on Days, Evening, Night shifts. Revision on: 03/11/2025 Revision by: Maryola Perion (RN)	PCA			
• Potential for CONSTIPATION related to daily use of medication with binding effect. Revision on: 05/17/2024 Revision by: Katie Savo	• Maria will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with (Maria/SDM) for decision making regarding constipation management. Revision on: 12/07/2024 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of Maria for constipation management and changes to health status and symptoms/ complications of constipation. Revision on: 05/17/2024 Revision by: Katie Savo • FLUIDS: Encourage resident to meet daily beverage minimums. See Nutrition Care Plan.  • PHYSICAL ACTIVITY: Promote ACTIVITY/ MOVEMENT to stimulate bowels.  • NUTRITION increased fibre intervention in place. See Nutrition Care Plan.  • BOWEL PROTOCOL: In place as per MD order	Registered Staff  Registered Staff Diet Registered Staff Registered Staff			
• Increased risk for FALLS related to: Dementia, Wandering, Repetitive physical movement, Hx of falls, Dementia, places self on floor.. Revision on: 03/27/2024	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Revision on: 12/20/2024	• COMMUNICATION: Involve/collaborate with SDM in decision making in fall prevention Plan of Care. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • CALL BELL: Place call bell within reach of Maria, check that it is in working order	Registered Staff  PCA	D/E/N		
Allergies	No Known Allergies		D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Micuda, Maria (922131005225)		Admission Date	05/16/2019	Location	5 507 A
Last Care Plan Review Completed:		08/22/2025				

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Ramil Santillan (Quality Improvement Coordinator)		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	and remind/encourage to use it. Maria may not remember how to use it when needed. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • ENVIRONMENT: Secure environment (reduce clutter) to reduce fall risk for Maria. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • BED: Maria's bed is placed against the wall in her room as per her personal preference. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • FOOTWEAR: Ensure resident wears appropriate footwear. Revision on: 03/27/2024 Revision by: Ramil Santillan (Quality Improvement Coordinator) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 08/07/2025 Revision by: Maryola Perion (RN)			PCA	
• Risk for/Impaired SKIN INTEGRITY related to Dementia, incontinence with bladder, wearing incontinent product. Revision on: 12/29/2023 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 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	
• Urinary (mixed) incontinence Revision on: 10/02/2023 Revision by: Katie Wolters-Savo (RAI Coordinator)		• Maria will maintain current level of bladder function through the review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 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: 10/03/2023 Revision by: Maryola Perion (RN) • URINARY Continence level is Total Incontinence. Report changes to level as noted. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • INCONTINENCE PRODUCT: Maria uses a Blue Brief on Days, Evening, Night shifts.			PCA	
Allergies	No Known Allergies			D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Micuda, Maria (922131005225)			Admission Date	05/16/2019	Location	5 507 A
Last Care Plan Review Completed:		08/22/2025					

## Care Plan Report

Focus		Goal	Interventions	Position	Freq/Resolved
			Revision on: 03/11/2025 Revision by: Maryola Perion (RN) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary Incontinence; Requires check and change every 2 hours and as needed.	PCA	
• Potential to experience FOOT/FEET complications related to toenail issues. Revision on: 12/28/2022 Revision by: Katherine Arca (RPN)		• To maintain adequate Foot/Feet/Toenail care and minimize episodes of inflammation, infection or complications through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with Maria/SDM in decision making for footcare treatment plan. Revision on: 12/07/2024 Revision by: Maryola Perion (RN) • TREATMENT PLAN: Maria requires footcare/treatment every 6-8 weeks. Revision on: 12/07/2024 Revision by: Maryola Perion (RN)	Footcare Nurse - Internal	
• Potential to experience alteration in MOOD as exhibited by (repetitive questions, persistent anger with self or others, repetitive physical movement) related to Dementia, MDD Revision on: 08/07/2021 Revision by: Maryola Perion (RN)		• To decrease the episodic frequency of Negative Mood Symptoms by the next review date. DRS score will be maintained to 0. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with SDM about MOOD Disturbance, discuss contributing factors, and plan of care needs/options as needed. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • HEALTH EDUCATION: Provide education and support to Maria/SDM pertaining to Mood Disturbance, symptom management, treatment and possible availability of community resources as needed. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Maria for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • RESIDENT STRENGTHS: Build on Maria's effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse	
• Strength		• In 3 months to improve the	• Strength exe. with use of 1-3lbs. wt for B/L UE and LE, 1set, 10rps, 2-3/wk as	PT -	
Allergies	No Known Allergies		D.O.B.	07/14/1948	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Micuda, Maria (922131005225)		Admission Date	05/16/2019	Location 5 507 A
Last Care Plan Review Completed:		08/22/2025			



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
Revision on: 03/11/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	strength of the B/L UE≤ from 3+5 to 4/5 Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	tolerated. Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	Physiotherapist PTA		
• Balance. Revision on: 03/11/2021 Revision by: Milap Patel (Reg.PHYSICAL THERAPIST)	• In 3 months To improve the dynamic standing balance to reduce fall risk from 16 to 19 per Tinetti scores Revision on: 05/12/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 01/18/2026	• Dynamic balance exe. at the rails +1A,1set,10rps.,2-3/wk as tolerated. Revision on: 09/25/2023 Revision by: Shina Wadhwa (PT - Physiotherapist)	PT - Physiotherapist PTA		
• Potential for muscular dysfunction, contractures and bone deformity related to Osteoarthritis. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with Osteoarthritis through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/ collaborate with SDM in decision making of musculoskeletal care management. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication for management of Osteoarthritis as per MD order. Monitor effectiveness and for side effects. Revision on: 12/29/2023 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of Osteoarthritis for discomfort/ complications or changes to health status. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • PAIN MANAGEMENT for Osteoarthritis prescribed and in place; refer to Pain Care Plan. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)			
• Altered COMMUNICATION as exhibited by limitations to (self expression,	• Maria will be supported to maintain current communication	• COMMUNICATION: Involve/collaborate with Maria/SDM for decision making about strategies needed to support effective communication.			
Allergies	No Known Allergies	D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Micuda, Maria (922131005225)	Admission Date	05/16/2019	Location	5 507 A
Last Care Plan Review Completed:		08/22/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
comprehension, etc.) related to Dementia, Language Barrier Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	abilities to (express self, comprehend information, etc.) each day through to the review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • PRIMARY LANGUAGE: Maria's primary language is Spanish. She is able to speak/understand English. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • INTERPRETER Required: Maria speaks Spanish. Interpreter as needed and ask assistance of staff that speaks/understands Spanish. Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • INSTRUCTION GUIDANCE: Maria needs (constant) cueing or demonstrative instruction in tasks and activities. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	ACT	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, poor judgement, etc.) related to Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	• Maria will be supported to maintain cognitive function through the review date. Current CPS is 3/6. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• COMMUNICATION: Involve/collaborate with SDM in decision making of Cognitive Loss for Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN) • ORIENTATION: Gently reorient to (person, place, time) as needed when Maria is feeling lost or in confused state. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)		
• Altered ability to complete Activities of Daily Living (ADLs) related to Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN)	• Maria will be supported to cope with changing functional abilities and have ADL care needs met each day through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator)	• BATHING: Maria prefers (shower/tub bath) on (Wednesdays and Sundays on Evening shift). Maria participates by (providing a washcloth and cues). One staff (EXTENSIVE) assistance for bathing. Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Maria is able to turn and reposition herself independently in bed. Maria may require one to two staff Extensive assistance at night time.	PCA PCA	
<b>Allergies</b>	No Known Allergies		<b>D.O.B.</b>	07/14/1948
<b>Diagnosis</b>	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)		<b>Physician</b>	Albert Patrick Ng
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Micuda, Maria (922131005225)	<b>Admission Date</b>	05/16/2019	<b>Location</b> 5 507 A
<b>Last Care Plan Review Completed:</b>		08/22/2025		

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved	
	Coordinator) Target Date: 01/18/2026	Revision on: 08/07/2025 Revision by: Maryola Perion (RN) • DRESSING: Maria requires One to two staff MAXIMAL assistance for dressing UPPER & LOWER body. Maria may be resistant to changing her clothing. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • EATING: Maria is Independent with set up. Eats in the unit dining room - 5th floor. She may require cueing and encouragement from staff. Revision on: 09/11/2024 Revision by: Maryola Perion (RN) • LOCOMOTION: Maria is Independent with her ambulation and requires Supervision from staff due to being in a locked unit. Maria may require one staff weight bearing assist when she is unsteady or weak. Revision on: 02/18/2025 Revision by: Maryola Perion (RN) • PERSONAL HYGIENE: Maria requires one to two team members extensive assistance with providing peri care. Staff to set up her wash/face cloth in her washroom and cue and guide her in washing her face and brushing her teeth. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • HAND HYGIENE: 1 staff to provide REMINDER assistance to apply sanitizer or use wipes for hand hygiene. Revision on: 01/23/2022 Revision by: Maryola Perion (RN) • TOILET USE: Maria requires one to two team members extensive assistance to assist with changing and reapplying a new incontinence product and providing pericare. Revision on: 05/19/2025 Revision by: Maryola Perion (RN) • TRANSFERRING: Maria is able to transfer independently from a sitting to standing position. She may require one to two staff Extensive assistance at times when getting up in the morning. Revision on: 08/07/2025 Revision by: Maryola Perion (RN)	PCA		
<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/14/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Micuda, Maria (922131005225)	<b>Admission Date</b>	05/16/2019	<b>Location</b>	5 507 A
<b>Last Care Plan Review Completed:</b>		08/22/2025			

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"> <li>Altered ability to complete Activities of Daily Living (ADLs) related to Dementia Revision on: 02/21/2021 Revision by: Maryola Perion (RN)</li> </ul>		<ul style="list-style-type: none"> <li>ORAL CARE: Maria is Independent with set up with her oral hygiene. Some teeth are missing. Staff will continue to remind Maria to do her oral hygiene in the morning and evening before going to bed. Revision on: 05/19/2025 Revision by: Maryola Perion (RN)</li> <li>FOOT CARE: PSW to complete toenail care on bath/shower days. Report long toe nails or other abnormalities as noted. Revision on: 12/07/2024 Revision by: Maryola Perion (RN)</li> </ul>	PCA			
<ul style="list-style-type: none"> <li>Maria is at high risk for elopement related to: Exit seeking, Wandering, Dementia. Revision on: 01/06/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</li> </ul>	<ul style="list-style-type: none"> <li>To promote Maria's safety and minimize risk for episode of elopement each day through next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026</li> </ul>	<ul style="list-style-type: none"> <li>ALERT: Maria has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 02/21/2021 Revision by: Maryola Perion (RN)</li> <li>ELOPEMENT ALERT: Redirect Maria away from elevator or exit doors as needed Revision on: 02/21/2021 Revision by: Maryola Perion (RN)</li> </ul>	PCA			
<ul style="list-style-type: none"> <li>Expressed Wishes and Beliefs related to Maria Medical Treatment and End of Life Care Revision on: 01/06/2021 Revision by: Katie Wolters-Savo (RAI Coordinator)</li> </ul>	<ul style="list-style-type: none"> <li>To support and honor Maria's expressed wishes and beliefs through to the End of Life. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026</li> </ul>	<ul style="list-style-type: none"> <li>CPR: Maria wishes to have CPR and TRANSFER to hospital. Revision on: 12/30/2020 Revision by: Clarisa Amir (RPN)</li> </ul>				
<ul style="list-style-type: none"> <li>SPIRITUAL BELIEFS: Maria is of the</li> </ul>	<ul style="list-style-type: none"> <li>To provide Maria spiritual</li> </ul>	<ul style="list-style-type: none"> <li>SPIRITUAL PROGRAMS: Encourage her to attend spiritual programs of her choice</li> </ul>	ACT			
<b>Allergies</b>	No Known Allergies		<b>D.O.B.</b>	07/14/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)					
<b>Facility</b>	Berkshire Care Centre				<b>Print Date</b>	10/30/2025
<b>Resident</b>	Micuda, Maria (922131005225)		<b>Admission Date</b>	05/16/2019	<b>Location</b>	5 507 A
<b>Last Care Plan Review Completed:</b>		08/22/2025				

## Care Plan Report


Focus		Goal	Interventions			Position	Freq/Resolved
catholic Faith. Revision on: 11/20/2019 Revision by: Hannelore Steinke-Nelson (Activation aide)		support as interested through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	including church services (Parkwood, Catholic), spiritual music, prayer circles, spiritual celebrations, etc. Revision on: 05/27/2020 Revision by: Shayna Lee Wonsch (Activation Manager) • SELF-DIRECTED SPIRITUAL Activities: Maria engages in prayer using her rosary. Revision on: 10/22/2025 Revision by: Nick Carroll (Recreation Aide)				
• Sleep Patterns. Revision on: 05/31/2019 Revision by: Maryola Perion (Registered Nurse)		• To promote adequate rest/sleep for Maria based on identified sleep patterns/preferences each night through to the next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026	• REST PATTERN: Preferred bedtime: 20:00-21:00, usual wake time: 6:00-7:00 Revision on: 06/02/2019 Revision by: Maryola Perion (Registered Nurse) • SLEEPWEAR: Maria prefers to wear her own clothes. Revision on: 06/02/2019 Revision by: Maryola Perion (Registered Nurse)			PCA    PCA	
• Nutrition Risk Level (diet details)		• Maria will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 12/20/2024 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/18/2026  • Will weigh within Realistic weight range 65-75 kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 01/18/2026  • Maria will be adequately	• NUTRITION RISK: Maria is moderate risk level. Revision on: 03/28/2023 Revision by: Anna Slack (Registered Dietitian) • DIET ORDER: Maria will receive regular diet, minced texture. Revision on: 02/28/2024 Revision by: Anna Slack (Registered Dietitian) • FLUID CONSISTENCY: Maria drinks REGULAR/THIN Level 0 Fluids. Revision on: 04/27/2021 Revision by: Olivia Kuhlmann (Dietetic Intern) • FLUID TARGET: Encourage Maria to drink a minimum 1290ml per day Revision on: 02/10/2025 Revision by: Brittany Hyde • EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily.  • MEDPASS SUPPLEMENTS: 60mL Resource 2.0 with medpass BID Revision on: 10/22/2025			Dietitian (RD) Dietary Manager PCA   Diet PCA  PCA  Dietary aide PCA	
Allergies	No Known Allergies			D.O.B.	07/14/1948	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Micuda, Maria (922131005225)			Admission Date	05/16/2019	Location	5 507 A
Last Care Plan Review Completed:		08/22/2025					

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level (diet details)	<p>hydrated aeb drinking at least 1290ml per day based on 75% of total fluid requirement of 1720-2064ml @ 25-30 ml/kg, 68.8kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 01/18/2026</p> <p>• Will meet estimated nutritional requirements of 1720-2064 kcal @ 25-30 kcal/kg, 69-83g protein @ 1-1.2g/kg through to next review date. Revision on: 02/10/2025 Revision by: Brittany Hyde Target Date: 01/18/2026</p>	<p>Revision by: Brittany Hyde (Registered Dietitian)</p> <p>• HIGH FIBRE: Offer 200ml prune juice at breakfast Revision on: 06/10/2024 Revision by: Laura Seibel (Dietitian (RD))</p> <p>• LABELLED SNACK: Maria receives ice cream at AM nourishment pass on Monday, Wednesday and Fridays and popsicles on Tuesday, Thursday, Saturday, Sunday Revision on: 05/09/2025 Revision by: Ronnie Fung (FSM - Food Services Manager)</p>	PCA	D/E

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	07/14/1948	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Primary generalized (osteo)arthrosis(M15.0), Bell's palsy(G51.0), Depressive episode, unspecified(F32.9), Personal history of COVID-19(U07.5)				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Micuda, Maria (922131005225)	<b>Admission Date</b>	05/16/2019	<b>Location</b>	5 507 A
<b>Last Care Plan Review Completed:</b>		08/22/2025			

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Potential for altered hematologic symptoms or complications related to blood clots noted in her colostomy bag.</li> </ul> Revision on: 10/30/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"> <li>To treat and/or minimize complications associated blood clots each day through to the next review date.</li> </ul> Revision on: 10/30/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with blood clots for complications or changes to health status.</li> </ul> Revision on: 10/30/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"> <li>Alteration in skin integrity related to BRUISE to left outer wrist.</li> </ul> Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)		<ul style="list-style-type: none"> <li>To promote intact skin integrity through healing of BRUISE by (specify date of expected healing or end of treatment and remember to adjust goal target date)</li> </ul> Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve/collaborate with (resident name)/SDM in decision making for treatment of bruise as skin issue.</li> </ul> Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)			<ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with bruise to left outer wrist. for changes to health status and alteration or complications affecting skin integrity.</li> </ul> Revision on: 10/29/2025 Revision by: Navkiran Kaur (Registered Practical Nurse)	
<ul style="list-style-type: none"> <li>Lori has AKI.</li> </ul> Revision on: 10/28/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> <li>To treat and minimize complications associated with AKI through to next review date.</li> </ul> Revision on: 10/28/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with AKI for changes to health status and alteration or complications affecting renal function.</li> </ul> Revision on: 10/28/2025 Revision by: Maryola Perion (RN)				
<ul style="list-style-type: none"> <li>Lori has potential for recurrence of SUBSTANCE ABUSE, withdrawal</li> </ul>		<ul style="list-style-type: none"> <li>Lori will remain free of non-prescribed narcotics through</li> </ul>	<ul style="list-style-type: none"> <li>SET BOUNDARIES: Discuss behavioural limits and expectations with Lori. Be very clear with limits to establish behaviour boundaries.</li> </ul>			Social Worker Director of	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
symptoms, mood/behaviour disturbances related to history of NARCOTIC Abuse Revision on: 10/28/2025 Revision by: Maryola Perion (RN)		next review date. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	Revision on: 10/28/2025 Revision by: Maryola Perion (RN)			Care Executive Director	
• Potential to experience alteration in RESPIRATORY FUNCTION related to: Diagnosis of Respiratory Acidosis (RFH - 10/25/25) Revision on: 10/28/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with Respiratory Acidosis each day through to next review date. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Respiratory Acidosis for changes to health status and alteration or complications affecting respiratory function. Revision on: 10/28/2025 Revision by: Maryola Perion (RN) • POSITIONING: To manage shortness of breath (SOB) elevate head of the bed to improve breathing.  • OXYGEN: Administer Oxygen as per MD/NP order. Revision on: 10/28/2025 Revision by: Maryola Perion (RN)			Registered Staff PCA	
• Alteration in skin integrity with risk for infection or complications related to wound (Stage #2) to coccyx secondary to Pressure Injury Revision on: 10/28/2025 Revision by: Suzanne Azar (RN)		• To minimize risk of WOUND (Stage #2) infection each day until fully healed. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026  • To promote optimal healing of WOUND (Stage #2) within (specify date of expected healing or end of treatment date or next review date *** and remember to also alter the goal target date to the same). Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026	• TREATMENT PLAN: Administer treatment for Stage 2 pressure injury to coccyx area as per MD Order. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident with Stage #2 Wound to coccyx for changes to health status, wound infection and alteration or complications affecting skin integrity. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • WEEKLY ASSESSMENT: Assess and evaluate pressure injury weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) • POSITIONING: Has Turning/Repositioning to off load pressure intervention in place; see Skin Impairment Risk Care Plan. Initiated Oct. 28th Revision on: 10/28/2025 Revision by: Suzanne Azar (RN)				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Ogla, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A



## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>• Alteration in skin integrity with risk for infection or complications related to wound (Stage #2) to coccyx secondary to Pressure Injury</li> </ul> Revision on: 10/28/2025 Revision by: Suzanne Azar (RN)			<ul style="list-style-type: none"> <li>• PAIN Management of STAGE #2 WOUND: Has intervention for (specify pre or post) dressing change; Refer to PAIN Care Plan.</li> </ul> Revision on: 10/28/2025 Revision by: Suzanne Azar (RN) <ul style="list-style-type: none"> <li>• NUTRITIONAL SUPPLEMENT for Skin Healing in place; refer to Dietary Care Plan. Dietitian (RD)</li> </ul> RD referral sent Oct. 28th. Revision on: 10/28/2025 Revision by: Suzanne Azar (RN)			
<ul style="list-style-type: none"> <li>• Alteration in skin integrity related to BRUISE #5 to Left Antecubital Space.</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)		<ul style="list-style-type: none"> <li>• To promote intact skin integrity through healing of BRUISE by the next review date.</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with BRUISE #5 to Left Antecubital Space for changes to health status and alteration or complications affecting skin integrity.</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) <ul style="list-style-type: none"> <li>• 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.</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)			
<ul style="list-style-type: none"> <li>• Alteration in skin integrity related to MASD Right abdominal fold #1</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)			<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD #1 on right abdominal fold for changes to health status and alteration or complications affecting skin integrity.</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN) <ul style="list-style-type: none"> <li>• TOPICAL TX: Apply topical treatment to MASD #1 on right abdominal fold as MD Order.</li> </ul> Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)		Registered Practical Nurse RN  Registered Practical Nurse Registered Practical Nurse	
<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
<b>Facility</b>	Berkshire Care Centre				<b>Print Date</b>	10/30/2025
<b>Resident</b>	Oglan, Lori (922131005665)		<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Alteration in skin integrity related to MASD Right abdominal fold #1 Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)			• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 10/25/2025 Revision by: Jane Del Rosario (RPN)			
• Potential to experience complications and side effects impacting quality of life related to use of (multi-pharmacy, use of anti-psychotic medications, etc.) Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		• To monitor effectiveness and for side effects of medication used each day through to the next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026  • To promote Lori's understanding of treatment regime and possible side effects of medication taken through to the next review. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026	• COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making and health teaching about medicinal regime and appropriate medication use. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • MONITORING: Utilize holistic perspective of continuous monitoring of resident using (anti-psychotic medication, poly-pharmacy, etc.) for changes to health status and alteration or complications affecting functioning or quality of life. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • MEDICATION REVIEW: Complete Medication Review with MD/NP Quarterly and as needed.		Registered Staff	
• Potential for CHRONIC PAIN and alteration in comfort level related to SPINAL FUSION, Migraine, CHRONIC BACK PAIN, Leg pain. Most Current RAI Pain Score is 3. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		• To promote resident comfort and effectively manage PERSISTENT pain each day through to the next review. Target Date: 01/06/2026  • Promote RAI Pain Score of 0 through to the next review. Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		RN Registered Practical Nurse  Registered Practical Nurse RN	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

## Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved
<div>• Potential to experience alteration in CARDIAC FUNCTION related to: Dyslipidemia Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	<div>• To treat and minimize signs/symptoms or complications associated with Dyslipidemia through to the next review date. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) Target Date: 01/06/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making of Cardiac Care Management for Dyslipidemia. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div> <div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Dyslipidemia 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 Dyslipidemia 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>• Potential for BOWEL INCONTINENCE related to Colostomy Bag, Leaking. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div>	<div>• Lori will have bowel incontinence managed every shift through to the next review period. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026</div>	<div>• BOWEL Continence level is FREQUENTLY Incontinent. Report change to level as noted. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)</div> <div>• BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.</div> <div>• COLOSTOMY: Resident has Colostomy bag number :14404 and Flange no. 18134. Change flange as per MD Order. Revision on: 10/10/2025 Revision by: Maryola Perion (RN)</div> <div>• OSTOMY BAG CHANGE: Check OSTOMY every 2 hours; Empty contents of ostomy bag when 1/3 full of stool and release gas as needed. Report any redness, drainage or leaking of ostomy immediately if noted Revision on: 10/15/2025 Revision by: Juanelle Boussey (Staff Development Coordinator)</div>			PCA          PCA	
<div>• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility and transfer). Revision on: 10/14/2025</div>	<div>• Lori will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility and</div>	<div>• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of two 1/4 bed rails. Revision on: 10/14/2025 Revision by: Suzanne Azar (RN)</div>				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	D.O.B.	07/06/1955	Physician	Albert Patrick Ng	
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Oglan, Lori (922131005665)	Admission Date	10/08/2025	Location	5 512 A	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision by: Suzanne Azar (RN)		transfer) each day through to the next review date. Revision on: 10/14/2025 Revision by: Suzanne Azar (RN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use two 1/4 bed rails as to support appropriate bed mobility and transfer. Revision on: 10/14/2025 Revision by: Suzanne Azar (RN) • BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility, transfer in/out of bed. Monitor every shift. Revision on: 10/14/2025 Revision by: Suzanne Azar (RN)		PCA	D/E/N
• Lori has potential to experience a safety hazard/burn injury related to personal SMOKING habits. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Lori will be safe when choosing to smoke through to the next review Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• COMMUNICATION: Involve (Lori/SDM) in review of smoking legislation (No smoking inside the home or within 9 meters from any doorway) and identify the designated area/s where smoking is permitted. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • CHECK: Room and personal belongings to be checked for smoking materials every shift.  • STORAGE: Smoking materials to be appropriately stored by (Nurse) and Lori to return cigarettes/lighter/matches after each smoke break. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		Social Worker  PCA  Clerk	   D/E/N
• Nutrition Risk Level		• Lori will be adequately nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026  • Will weigh within realistic GWR 65-75 kg through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen	• LABELLED SNACK PM: Instead of standard snack, provide: Banana (Mon/Wed/Fri) Cheese and crackers (Tues/Sat) ½ peanut butter sandwich on white bread (Thurs/Sun) Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • SNACK HS: Allow Lori to have the standard snack options from the HS snack cart daily Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD))  • NUTRITION RISK: Lori is HIGH risk level. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA Registered Practical Nurse RN  PCA Registered Practical Nurse RN Dietitian (RD)	D   E
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

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Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level  Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	(Dietitian (RD)) Target Date: 01/06/2026  • Lori will be adequately hydrated aeb drinking 100% of total fluid requirement 2070 ml/day (30 ml/kg using 69 kg weight) through to next review date. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 01/06/2026	• DIET ORDER: Lori will receive regular diet, regular texture Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID CONSISTENCY: Lori drinks REGULAR/THIN Level 0 Fluids. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • FLUID TARGET: Encourage Lori to drink 2070 ml/day. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD)) • DINING INSTRUCTIONS: Ileostomy diet: - Provide coffee/tea at breakfast only - Provide lactose-free milk to drink - Dilute juice with water 50/50 - No raw vegetables/salads (serve cooked vegetables) - Encourage adding some salt to her meals Revision on: 10/17/2025 Revision by: Holly Laasanen (Dietitian (RD)) • MEDPASS SUPPLEMENTS: 1 scoop of Beneprotein powder once daily with 20:00 medpass (mix in 200 ml lactose-free milk or mix in apple sauce) Revision on: 10/28/2025 Revision by: Holly Laasanen (Dietitian (RD)) • LABELLED SNACK: Powerade (591 ml) given at AM snack for resident to sip on throughout the day Revision on: 10/17/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA  PCA  PCA  Registered Practical Nurse  PCA	D/E
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Alzheimer Disease Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote adequate rest/sleep for Lori based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• REST PATTERN: Preferred bedtime 2300, usual wake time 0900 and daytime naps when she wants to Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITOR: Monitor Lori sleeping patterns. Document when awake or asleep. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA  PCA	Q1H

<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Oglan, Lori (922131005665)	<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A

## Care Plan Report

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<ul style="list-style-type: none"> <li>Lori -is experiencing colonization with Antibiotic Resistant Organism ESBL as of confirmed date: Noted on Admission paper work</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>		<ul style="list-style-type: none"> <li>To lower risk of infection and prevent transmission of identified Antibiotic Resistant Organism through to the next review.</li> <li>Target Date: 01/06/2026</li> </ul>	<ul style="list-style-type: none"> <li>HEALTH EDUCATION: Engage with resident/SDM to enhance their knowledge of infection control practices (hand hygiene, visitation, PPEs, isolation, transmission, etc.) for Antibiotic Resistant Organism.</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>MONITORING: Utilize holistic perspective of monitoring resident for (signs/symptoms of secondary infection, overall health condition, etc.).</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>			
<ul style="list-style-type: none"> <li>Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Alzheimer's Disease, bipolar</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>		<ul style="list-style-type: none"> <li>To promote safety for Lori and/or others during each episode through to the next review date.</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>Target Date: 01/06/2026</li> <li>To decrease episodic frequency of Expressive Behaviour by next review date.</li> <li>ABS score will be less than 5.</li> <li>Revision on: 10/21/2025</li> <li>Revision by: Maryola Perion (RN)</li> <li>Target Date: 01/06/2026</li> <li>Lori will be supported to adjust to her new environment to lower risk of triggering former (WANDERING, PHYSICAL inappropriate, VERBALLY inappropriate, resistiveness to care, delusions, hallucinations)</li> </ul>	<ul style="list-style-type: none"> <li>ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lori for indications to change in or for escalating expressive behaviour risk.</li> <li>Revision on: 10/21/2025</li> <li>Revision by: Maryola Perion (RN)</li> <li>TRIGGERS leading to PHYSICAL (Hitting, Punching, Slapping) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space)</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>PHYSICAL Behaviour: If Lori is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance.</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.)</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> <li>VERBAL Behaviour: If Lori is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff.</li> <li>Revision on: 10/08/2025</li> <li>Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>			
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
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Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Alzheimer's Disease, bipolar</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		etc.) behaviour episodes through to the next review. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>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.)</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
			<ul style="list-style-type: none"> <li>RESISTANCE to Care Need: If (Lori is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered Staff.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
			<ul style="list-style-type: none"> <li>TRIGGERS leading to SOCIALLY Inappropriate as expression of behaviour include (hoarding items.)(taking off her colostomy bag and throwing it on the floor multiple times a day. Will often do this over and over again)</li> </ul> Revision on: 10/29/2025 Revision by: Danielle Loreto (RAI Coordinator)			
			<ul style="list-style-type: none"> <li>SOCIALLY Inappropriate Behaviour: if noted collecting and hoarding items. Remove from her room when she is not in there. Try to redirect in the moment when accepting.</li> </ul>			
			When resident is taking off her colostomy bag team to approach to reapply. If resident refuses, reapproach in 10-15 minutes. May offer to place a towel to protect her clothing however not often accepting of intervention. Team to monitor for pain, bleeding, feces on surfaces as a result of ripping the bag off. Report all incidents to the nurse.			
			Revision on: 10/29/2025 Revision by: Danielle Loreto (RAI Coordinator)			
			<ul style="list-style-type: none"> <li>WANDERING: Permit Lori to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
			<ul style="list-style-type: none"> <li>MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</li> </ul> Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		Registered Practical Nurse RN	
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Alzheimer's Disease, bipolar</div> <div>Revision on: 10/08/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>		<div>• HALLUCINATION: Seeing her children or other children when they are not present.</div> <div>Team to not argue with her. Allow her to express her concerns. Team to offer support and reassurance. Notify MD if her hallucinations are impacting her functioning.</div> <div>Revision on: 10/08/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• DELUSION: when in hospital she believed that the staff was there to harm her. She also believed she had children which she does not.</div> <div>team to not argue with her. Allow her to express her concerns. Team to offer support and reassurance. Notify MD if her hallucinations are impacting her functioning.</div> <div>Revision on: 10/08/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>	<div>Registered Practical Nurse RN</div> <div>Registered Practical Nurse RN</div>			
<div>• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES</div> <div>Revision on: 10/08/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>	<div>• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date.</div> <div>Target Date: 01/06/2026</div>	<div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status.</div>	<div>Registered Staff</div>			
<div>• Potential for gastric discomfort/complications related to diagnosis of Gastroesophageal Reflux Disease (GERD).</div> <div>Revision on: 10/08/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>	<div>• To treat and/or minimize complications associated with GERD each day through to the next review date.</div> <div>Target Date: 01/06/2026</div>	<div>• COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making for GERD Management.</div> <div>Revision on: 10/21/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of GERD for discomfort/ complications or changes to health status.</div>	<div>Registered Staff</div>			
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
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Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025	Location	5 512 A



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Focus	Goal	Interventions	Position	Freq/Resolved
		<ul style="list-style-type: none"> <li>• 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.</li> <li>• MEDICATION: Administer medication for GERD as per MD order. Monitor effectiveness and for side effects.</li> </ul>	PCA Registered Staff  Registered Staff	
<ul style="list-style-type: none"> <li>• URINARY (Functional) INCONTINENCE related to Cognitive loss, mobility loss.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>• Lori will have urinary incontinence managed every shift through to the next review period.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>• URINARY Continence level is TOTAL Incontinent. Report change to level as noted.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>• INCONTINENCE PRODUCT: Resident uses Blue brief throughout all shifts.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA   PCA	
<ul style="list-style-type: none"> <li>• Lori is at high risk for ELOPEMENT related to New admission time to adjust</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>• To promote Lori safety and minimize risk for episode of elopement each day through next review date.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>• ALERT: Lori has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"> <li>• ELOPEMENT ALERT: Redirect Lori away from elevator or exit doors as needed.</li> </ul> Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
<ul style="list-style-type: none"> <li>• Risk for Impaired SKIN INTEGRITY related to Impaired Mobility, Frailty, Incontinence</li> </ul>	<ul style="list-style-type: none"> <li>• To protect and maintain skin integrity each day through to the next review.</li> </ul> Target Date: 01/06/2026	<ul style="list-style-type: none"> <li>• 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.</li> <li>• POSITIONING: Turn, reposition every 2 hours (OR SPECIFY the frequency if more/less often as per the residents preference/request) when in bed/wheelchair to offload pressure. New pressure injury to coccyx Oct. 27th</li> </ul> Revision on: 10/28/2025 Revision by: Suzanne Azar (RN)	PCA  PCA	Q2h

<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Oglan, Lori (922131005665)	<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A

## Care Plan Report

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• Potential to experience alteration in MOOD related to Depression Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Lori will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Lori for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Lori effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)					
• Alteration in skin integrity related to MASD under rt.breast. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN)		• To promote intact skin integrity through healing of MASD under rt.breast by the target date. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD under rt.breast for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) • COMMUNICATION: Involve/collaborate with (Lori)/SDM in decision making for treatment of skin issues. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOPICAL TX: Apply topical treatment to (right breast) as MD Order. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			Registered Practical Nurse RN		Registered Practical Nurse Registered Practical Nurse
• Altered COMMUNICATION as exhibited by limitations to (self expression,		• Lori will be supported to maintain current communication	• SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.).					
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		D.O.B.	07/06/1955		Physician	Albert Patrick Ng	
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Resident	Oglan, Lori (922131005665)		Admission Date	10/08/2025		Location	5 512 A	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
comprehension, slurred speech, mumbled speech, etc.) related to Alzheimer's Disease Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		abilities each day through to the review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026	Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: Lori needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Alteration in skin integrity related to MASD around stoma. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN)		• To promote intact skin integrity through healing of RASH by the target date. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) Target Date: 01/06/2026	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD (Redness) around stoma for changes to health status and alteration or complications affecting skin integrity. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) • COMMUNICATION: Involve/collaborate with Lori Oglan in decision making for treatment of skin issues. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN) • TOPICAL TX: Apply topical treatment to MASD (Redness) around stoma.as MD Order. Revision on: 10/08/2025 Revision by: Baljinder Sidhu (RPN)  • WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			Registered Practical Nurse RN	
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Alzhiemer's Disease Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Lori will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)	• COMMUNICATION: Involve/collaborate with Lori/SDM in decision making of Cognitive Loss for Alzheimer's Disease . Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • ORIENTATION: Gently reorient to (person, place, time) as needed when Alzheimer's Disease is feeling lost or in confused state.				
<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng	
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
<b>Facility</b>	Berkshire Care Centre				<b>Print Date</b>	10/30/2025	
<b>Resident</b>	Oglan, Lori (922131005665)		<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 01/06/2026	Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Lori can comprehend and follow. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Increased risk for FALLS related to HISTORY OF FALLS, IMPAIRED JUDGEMENT Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 01/06/2026	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment: reduce clutter, etc. to reduce fall risk for Lori. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)  • BED: place bed in lowest position, etc. to lower risk for injury. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation. Revision on: 10/21/2025 Revision by: Maryola Perion (RN) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 10/21/2025 Revision by: Maryola Perion (RN)		PCA	D/E/N
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation		• Lori will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI	• BATHING: Lori prefers (shower or tub bath) on (Evening shift Wednesday and Saturday). Resident is able to move her body and assist with washing her upper body. Due to her expressed behaviours she may require stop and go approaches. 2 team member maximal assistance.  Nail care to be provided on shower/bath day. Revision on: 10/26/2025		PCA	
<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies		<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses					
<b>Facility</b>	Berkshire Care Centre				<b>Print Date</b>	10/30/2025
<b>Resident</b>	Oglan, Lori (922131005665)		<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Coordinator) Target Date: 01/06/2026	Revision by: Lara Ismail (RN)  • BED MOBILITY: Lori is able to move herself once in bed from side to side. Due to varied strength she may require 1-2 team member maximal assistance. Monitor for changes and need for increased support. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • DRESSING: Lori requires 2 team member maximal assistance to dress her upper and lower body. If expressed behaviours are not present she may only require 1 team member extensive assistance. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • EATING: Lori is able to eat independently. Observe for the need of set up assistance as her care level varies. She eats her meals in the dining room on the 5th floor. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • LOCOMOTION: Lori requires 1 team member to porter her in a loaner transport chair. She is able to propel her wheelchair on short distances. She has refused Physio assessment on admission. Revision on: 10/26/2025 Revision by: Maryola Perion (RN)  • PERSONAL HYGIENE: Lori can assist with participating in her personal hygiene with set up of her tooth brush and wash cloth. She does require 1 team member extensive assistance to complete all other hygiene tasks. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • HAND HYGIENE: 1 staff to provide her reminders assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene. Intermittent assist required. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TOILET USE: Requires 2 team member maximal assistance to toilet and for change and change of incontinent products. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies			D.O.B.	07/06/1955	Physician	Albert Patrick Ng
Diagnosis	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Oglan, Lori (922131005665)			Admission Date	10/08/2025	Location	5 512 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation</li> </ul>		<ul style="list-style-type: none"> <li>TRANSFERRING: Lori requires Two staff side by side for her transferring. Monitor for changes in status. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>ORAL CARE: Lori is EDENTULOUS. She needs set up assistance with oral care. May require 1 team member to complete. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> <li>FOOT CARE: REGISTERED STAFF to complete toenail care every on bath day and as needed. Report long toe nails or other abnormalities as noted. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>	PCA	
<ul style="list-style-type: none"> <li>Expressed Wishes and Beliefs related to Lori Medical Treatment and End of Life Care Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>	<ul style="list-style-type: none"> <li>To support and honor Lori expressed wishes and beliefs through to the End of Life. Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 01/06/2026</li> </ul>	<ul style="list-style-type: none"> <li>CPR: Lori wishes to have Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details Revision on: 10/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</li> </ul>		

<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Oglan, Lori (922131005665)	<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A

## Care Plan Report

### Diagnosis

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


### Allergies

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

<b>Allergies</b>	Clavulanic Acid, Clindamycin, Avelox, Flagyl, Macrolide...See last page for a complete listing of the Resident's allergies	<b>D.O.B.</b>	07/06/1955	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Other specified diabetes mellitus without (mention of) complication(E13.9), Bipolar affective disorder, unspecified(F31.9), Depressive episode, unspecified(F32.9), Gastro-oesophageal reflux disea...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Oglan, Lori (922131005665)	<b>Admission Date</b>	10/08/2025	<b>Location</b>	5 512 A

## Care Plan Report

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

Allergies	No Known Allergies	D.O.B.	08/15/1945	Physician	Albert Patrick Ng	
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described (E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Patel, Balubhai (922131005664)	Admission Date	10/02/2025	Location	5 501 B	



## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved				
• Nutrition Risk Level		• Balubhai will be adequately nourished aeb consuming >75% at meals and snacks through to next review date Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/31/2025  • Will weigh within GWR 64-70 kg through to next review date Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/31/2025  • Balubhai will be adequately hydrated aeb drinking at least 80% of total fluid requirement 1600 ml/day (25 ml/kg using 64 kg weight) through to next review date. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/31/2025	• Labelled Item Breakfast: banana daily Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN	D				
			• Labelled Item Dinner: crustless turkey sandwich daily Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN	E				
			• Labelled Item Lunch: crustless cheese sandwich daily Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA Registered Practical Nurse RN	D				
			• NUTRITION RISK: Balubhai is moderate risk level. Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))			Dietitian (RD)					
			• DIET ORDER: Balubhai will receive regular diet, regular texture - see dining instructions Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA					
			• THICKENED FLUIDS: Balubhai drinks thickened fluids at mildly thick level 2 (nectar-like) consistency. Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA					
			• FLUID TARGET: Encourage Balu to drink a minimum of 1280 ml/day Revision on: 10/16/2025 Revision by: Holly Laasanen (Dietitian (RD))			PCA					
			• DINING INSTRUCTIONS: - No beef or pork - Cut food into small pieces - Add sauce/gravy when available to moisten food - Encourage slow place of eating/drinking Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD))			Registered Practical Nurse					
			Allergies		No Known Allergies			D.O.B.	08/15/1945	Physician	Albert Patrick Ng
			Diagnosis		Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses						
Facility		Berkshire Care Centre				Print Date	10/30/2025				
Resident		Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B				

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level			• FOOD PREFERENCES: No beef or pork Revision on: 10/03/2025 Revision by: Holly Laasanen (Dietitian (RD))			
			• HIGH CALORIE/PROTEIN IN MEALS: Offer special-labelled items AND standard menu items at meals. Encourage him to try both. Revision on: 10/23/2025 Revision by: Holly Laasanen (Dietitian (RD))			
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, Alzheimer Disease Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To promote adequate rest/sleep for Balubhai based on identified sleep patterns/preferences each night through to the next review date. Revision on: 10/06/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/31/2025	• PREFERENCE: Snack prior to bed Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
			• REST PATTERN: Preferred bedtime: around 9:00pm, usual wake time: no specific time and takes a short nap. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
• Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To treat and minimize signs/symptoms or complications associated with DIABETES each day through to the next review date. Target Date: 12/31/2025	• COMMUNICATION: Involve/ collaborate with (Balubhai)/SDM in decision making of diabetes care management. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
			• MONITORING: Utilize holistic perspective of continuous monitoring of resident for management of HYPOGLYCEMIA/ HYPERGLYCEMIA for changes to health status.			
			• MEDICATION: Administer medication for DIABETES as per MD order. Monitor effectiveness and for side effects. Revision on: 10/02/2025			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Potential for hypo/hyperglycemia and other complications related to diagnosis of DIABETES.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> <li>Potential to experience alteration in ENDOCRINE FUNCTION related to HYPOTHYROIDISM</li> </ul>		<ul style="list-style-type: none"> <li>To treat and/or minimize signs/symptoms of HYPOTHYROIDISM through to the next review date.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	<ul style="list-style-type: none"> <li>COMMUNICATION: Involve/ collaborate with (Balubhai)/SDM in decision making of thyroid care management.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with PCA HYPOTHYROIDISM for changes to health status and alteration or complications affecting endocrine function.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MEDICATION: Administer medication for HYPOTHYROIDISM as per MD order.</li> </ul> Monitor effectiveness and for side effects. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
<ul style="list-style-type: none"> <li>Potential to experience alteration in CARDIAC FUNCTION related to: Arteriosclerotic Heart Disease</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		<ul style="list-style-type: none"> <li>To treat and minimize signs/symptoms or complications associated with Arteriosclerotic Heart Disease through to the next review date.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	<ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with Arteriosclerotic Heart Disease for changes to health status and alteration or complications affecting cardiac function.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"> <li>MEDICATION: Administer medication for Arteriosclerotic Heart Disease as per MD Order and monitor for side effects.</li> </ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		Registered Practical Nurse RN	
<ul style="list-style-type: none"> <li>Potential to experience complications and side effects impacting quality of life related</li> </ul>		<ul style="list-style-type: none"> <li>To monitor effectiveness and for side effects of medication</li> </ul>	<ul style="list-style-type: none"> <li>MONITORING: Utilize holistic perspective of continuous monitoring of resident using (poly-pharmacy, etc.) for changes to health status and alteration or</li> </ul>			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
to use of (multi-pharmacy, etc.) Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		used each day through to the next review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	complications affecting functioning or quality of life. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)				
• BOWEL Continence - Balubhai is continent and has self recognition of urge to defecate. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• Balubhai to remain continent of bowels through next review date Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted. PCA  • TOILETING: Balubhai requires one staff member to assist in transferring him to the PCA toilet for bowel movement. Each shift, staff to document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)				
• URINARY (Mixed) INCONTINENCE related to Alzheimer's disease Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• Balubhai will receive support to (use toilet, commode) and promote urinary continence each shift through to the next review. Revision on: 10/06/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/31/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)  • URINARY Continence level is (USUALLY continent). Report change to level as noted. PCA Revision on: 10/02/2025 Revision by: Maryola Perion (RN)				
• Risk for Impaired SKIN INTEGRITY related to Diabetes Mellitus Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To protect and maintain skin integrity each day through to the next review. Target Date: 12/31/2025	• SKIN OBSERVATION: Observe skin condition with AM and PM care. Report any new or different observance than the residents' usual skin condition to Registered Staff as noted. PCA				
• Balubhai is at high risk for ELOPEMENT related Hx of packing his bag and try to leave home, elopement x3 and found down the street		• To promote Balubhai safety and minimize risk for episode of elopement each day through next review date.	• ALERT: Balubhai has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 10/02/2025				
Allergies	No Known Allergies		D.O.B.	08/15/1945		Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025		Location	5 501 B

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	Revision by: Maryola Perion (RN) • DIVERSION ACTIVITY: Resident responds well to (playing music, doing puzzles, reading, conversing, singing, watching TV, etc.) to divert attention when exit seeking. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Balubhai away from elevator or exit doors as needed. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		PCA	
<p>• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need), history of hallucination (talking to himself &amp; having a conversation, answering his own questions) &amp; delusions (he has a flight to India and needs to go home, will often say he has a home in Toronto and needs to visit his friend there) related to Symptom Progression of Dementia/Alzheimer</p> <p>Revision on: 10/02/2025 Revision by: Maryola Perion (RN)</p>		<p>• To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 2. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025</p> <p>• Balubhai will be supported to adjust to his/her new environment to lower risk of triggering former (WANDERING, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025</p>	<p>• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Balubhai for indications to change in or for escalating expressive behaviour risk. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to VERBAL (swear, calling names, etc.) as expression of behaviour include (loss of control, frustration, limitation in self expression, pain, misunderstanding care intention, etc.) Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • VERBAL Behaviour: If Balubhai is heard swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expressions of behaviour include (S confusion, misunderstanding care needs, poor judgement, fearfulness, paranoid thought process, etc.)</p> <p>Balubhai likes to listen classic Indian Hindi music especially singer Lata Mangeshkar Revision on: 10/03/2025 Revision by: Gurjit Kaur (RN) • RESISTANCE to Care Need: If Balubhai is declining to (bathe, change clothes, take medications, eat, etc.) re-approach in 10-15 minutes. Report episode to Registered</p>			
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, SOCIALLY Inappropriate, RESISTANCE to care need), history of hallucination (talking to himself &amp; having a conversation, answering his own questions) &amp; delusions (he has a flight to India and needs to go home, will often say he has a home in Toronto and needs to visit his friend there) related to Symptom Progression of Dementia/Alzheimer</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>		<div>Staff.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• WANDERING: Permit Balubhai to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>• MEDICATION: Administer medication for therapeutic treatment of Expressed Behaviour as per MD Order. Monitor effectiveness and for side effects.</div> <div>Revision on: 10/15/2025</div> <div>Revision by: Maryola Perion (RN)</div>	Registered Practical Nurse RN			
<div>• Altered VISION related to use of eyeglasses.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>	<div>• Balubhai supported to use eyeglasses for vision correction daily through to the next review date.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div> <div>Target Date: 12/31/2025</div>	<div>• EYEGLASSES: Balubhai wears eyeglasses. Assist to clean eyeglasses as needed and store on night table when sleeping.</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>	PCA			
<div>• Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension, etc.) related to Alzheimer's disease, minimal difficulty hearing.</div> <div>Revision on: 10/02/2025</div>	<div>• Balubhai will be supported to maintain current communication abilities to ( express self, comprehend information, etc.) each day through to the review</div>	<div>• PRIMARY LANGUAGE: Balubhai primary language is English. He is able to speak/understand English.</div> <div>2nd Language: Gujarati</div> <div>Revision on: 10/02/2025</div> <div>Revision by: Maryola Perion (RN)</div>				
Allergies	No Known Allergies		D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Patel, Balubhai (922131005664)		Admission Date	10/02/2025	Location	5 501 B

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
Revision by: Maryola Perion (RN)		date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025  • Balubhai will be supported to make basic needs known each day through to the review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.. Revision on: 10/14/2025 Revision by: Maryola Perion (RN)				
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Alzheimer's Disease. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• Balubhai will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Balubhai is feeling lost or in confused state. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • MEDICATION: Administer medication (Cholinesterase Inhibitor) as per MD order. Monitor effectiveness and for side effects.		Registered Staff		
• Increased risk for FALLS related to History of falls, unsteady gait. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 12/31/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: walker Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • ENVIRONMENT: Secure environment (reduce clutter, etc.) to reduce fall risk for Balubhai. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • FOOTWEAR: Ensure resident wears appropriate footwear for transfers, ambulation.		PCA  PCA  PCA  PCA	D/E/N	
Allergies	No Known Allergies			D.O.B.	08/15/1945	Physician	Albert Patrick Ng
Diagnosis	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Patel, Balubhai (922131005664)			Admission Date	10/02/2025	Location	5 501 B

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Increased risk for FALLS related to History of falls, unsteady gait. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			Revision on: 10/02/2025 Revision by: Maryola Perion (RN)			
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Alzheimer's disease. Revision on: 10/02/2025 Revision by: Maryola Perion (RN)		• Balubhai 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: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025  • Balubhai will be supported to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) Target Date: 12/31/2025	• BATHING: Balubhai prefers showers on Sundays and Wednesdays on Day shifts. He is Independent with set up from staff for bathing. He may require one staff extensive assistance at times. Nail care to be provided on shower/bath day.  Balubhai may request to have a shower daily. If unable to do it on Day shift, may be given in the afternoons shift. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • BED MOBILITY: Balubhai is Independent and able to turn and reposition while in bed. Revision on: 10/15/2025 Revision by: Maryola Perion (RN) • DRESSING: Balubhai is able to assist by lifting his arms and legs. One staff to provide EXTENSIVE assistance for dressing UPPER & LOWER body. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • EATING: Balubhai is able to eat Independently with 1 Staff to SUPERVISE during meals. Eats in the unit dining room - Wildflower lane. Revision on: 10/02/2025 Revision by: Maryola Perion (RN) • LOCOMOTION: Balubhai is able to walk with 1 staff to provide EXTENSIVE assistance for locomotion on and off unit using his walker.		PCA   <	



## Care Plan Report

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	08/15/1945	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Patel, Balubhai (922131005664)	<b>Admission Date</b>	10/02/2025	<b>Location</b>	5 501 B

## Care Plan Report

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**Diagnosis**

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	08/15/1945	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Alzheimer's disease, unspecified(G30.9), Atherosclerotic heart disease of native coronary artery(I25.10), Unspecified diabetes mellitus with poor control, so described(E14.64), Hypothyroidism, un...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Patel, Balubhai (922131005664)	<b>Admission Date</b>	10/02/2025	<b>Location</b>	5 501 B

## Care Plan Report

Focus	Goal	Interventions				Position	Freq/Resolved
<ul style="list-style-type: none"><li>• Potential for PAIN and alteration in comfort level related to history of MVA resulting in chronic complaints of hip pain (right hip), back pain. LTCF pain score of 0.</li></ul> Revision on: 10/02/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• Promote RAI Pain Score of 0 through to the next review.</li></ul> Target Date: 11/26/2025	<ul style="list-style-type: none"><li>• 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.</li><li>• NON VERBAL CUES of PAIN for Charmaine include - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)				RN Registered Practical Nurse  PCA  Registered Practical Nurse RN	
<ul style="list-style-type: none"><li>• Charmaine DECLINES PARTICIPATION in structured programs related to personal choice.</li></ul> ISE score = 6/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	<ul style="list-style-type: none"><li>• Charmaine participates in Independent/Self-Directed activities monthly through to the next review date.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 11/26/2025	<ul style="list-style-type: none"><li>• SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, knitting, drawing, poetry, writing, crossword puzzles, word search, ipad usage, smoking on the patio, patio visits etc.).</li><li>• FRIENDLY VISIT: Provide her one to one visits as tolerated. Touch base to maintain contact and to converse about topics of interest, identify up-coming special events, enjoying outdoors, etc.</li><li>• INVITATION: Offer friendly invite to structured programs scheduled in the home. Often enjoys movies, music, funny videos, travel videos in the afternoons.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
<ul style="list-style-type: none"><li>• Potential for altered hematologic symptoms or complications related to diagnosis of Iron deficiency ANEMIA</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• To treat and/or minimize complications associated with ANEMIA each day through to the next review date.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with (Charmaine)/SDM in decision making of hematologic care management for Anemia.</li><li>• MONITORING: Utilize holistic perspective of continuous monitoring of resident with</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)				Registered Staff	
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 11/26/2025	ANEMIA for complications or changes to health status.			
			• LAB WORK: Monitor blood lab work and report results to MD as needed. Follow up as indicated.		Registered Staff	
			• MEDICATION: Administer medication for ANEMIA as per MD Order. Monitor effectiveness and for side effects.		Registered Staff	
• Potential to experience alteration in MOOD as exhibited by making negative statements, repetitive anxious complaints, Past history of self harm, anxiety related to Anxiety disorder- possible sexual abuse history but never confirmed, loss of spouse. Revision on: 09/13/2025 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: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 11/26/2025	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Charmaine for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Charmaine effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • SUICIDAL IDEATIONS: Report to Registered Staff IMMEDIATELY if Charmaine expresses thoughts to harm to self. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Dementia. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)		• Charmaine 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: 08/28/2025 Revision by: Danielle Loreto (RAI	• BATHING: Charmaine prefers shower) on Tuesdays and Fridays evening shift. She can complete the shower on her own with supervision. She often refuses. Will wash herself up.  Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN) • BED MOBILITY: Charmaine is independent with her bed mobility. Team to monitor			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
	Coordinator) Target Date: 11/26/2025	for changes. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• DRESSING: Charmaine is able to dress herself. Team to monitor for changes.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• EATING: Charmaine is independent with eating. Team to monitor for changes.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• LOCOMOTION: Charmaine is independent with no gait aid. Has a walker but does not use it	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• PERSONAL HYGIENE: Charmaine completes her own personal hygiene care. Team to monitor for changes.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• HAND HYGIENE: Charmaine is able to independently complete task of Hand Hygiene each day.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• TOILET USE: Charmaine toilets herself. Team to monitor for changes.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• TRANSFERRING: Charmaine is independent with her transferring.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
		• ORAL CARE: Charmaine has no bottom teeth and has upper dentures full set. She can complete her own oral hygiene. Team to support with denture cleaning. Resident may refuse assistance.	PCA	
		Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility).	• Charmaine will be effectively supported with use of two 1/4 bed rails to optimize Activity of	• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of two 1/4 bed rails. Revision on: 09/03/2025		
Allergies	No Known Allergies	D.O.B.	12/28/1951	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses			
Facility	Berkshire Care Centre	Print Date	10/30/2025	
Resident	Poisson-Kani, Charmaine (922131005659)	Admission Date	08/28/2025	Location 5 518 C

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision on: 09/03/2025 Revision by: Suzanne Azar (RN)		Daily Living (bed mobility) each day through to the next review date. Revision on: 09/03/2025 Revision by: Suzanne Azar (RN) Target Date: 11/26/2025	Revision by: Suzanne Azar (RN) • MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use two 1/4 bed rails as to support appropriate bed mobility. Revision on: 09/03/2025 Revision by: Suzanne Azar (RN) • BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with bed mobility. Monitor every shift. Revision on: 09/03/2025 Revision by: Suzanne Azar (RN)			PCA	D/E/N
• Charmaine has potential to experience a safety hazard/burn injury related to personal SMOKING habits smoking in her room in retirement, burn marks in her mattresses before admission. Family is providing smoking materials Revision on: 08/31/2025 Revision by: Maryola Perion (RN)		• Charmaine will be safe when choosing to smoke through to the next review Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• COMMUNICATION: Involve Charmaine in review of smoking legislation (No smoking inside the home or within 9 meters from any doorway) and identify the designated area/s where smoking is permitted.  The family is providing her with smoking materials. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • CHECK: Room and personal belongings to be checked for smoking materials every shift.  • STORAGE: Smoking materials to be appropriately stored by Registered staff in the med room and staff (that brings her down to the courtyard) to return cigarettes/lighter/matches after each smoke break. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • SMOKING SUPERVISION: Charmaine will be smoking ONLY in the presence of a staff member in the courtyard. Revision on: 08/31/2025 Revision by: Maryola Perion (RN) • SMOKING CONTRACT: Charmaine has agreed to follow safe smoking rules and accepts the consequences of breaking those agreed upon rules by signing the smoking contract. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)			Social Worker          PCA   Clerk       Social Worker      Social Worker	D/E/N
• Nutrition Risk Level		• Charmaine will be adequately	• LABELLED SNACK PM: assorted deli sandwich daily per resident's preference			PCA	D
Allergies	No Known Allergies			D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Poisson-Kani, Charmaine (922131005659)			Admission Date	08/28/2025	Location	5 518 C

## Care Plan Report

Focus		Goal	Interventions				Position	Freq/Resolved
		nourished aeb consuming >75% at meals and snacks through to next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	Revision on: 10/07/2025 Revision by: Holly Laasanen (Dietitian (RD))				Registered Practical Nurse RN Dietitian (RD)	
		• Will weigh within realistic GWR 70-80 kg through to next review date. Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/26/2025	• NUTRITION RISK: Charmaine is low risk level. Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD))					
			• DIET ORDER: Charmaine will receive regular diet, regular texture Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• FLUID CONSISTENCY: Charmaine drinks REGULAR/THIN Level 0 Fluids. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)					
		• Charmaine will be adequately hydrated aeb drinking at least 80% of TFR: 1888 ml/day (25 ml/kg) through to next review date. Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/26/2025	• FLUID TARGET: Encourage Charmaine to drink a minimum of 1510 ml/day Revision on: 09/09/2025 Revision by: Holly Laasanen (Dietitian (RD))				PCA	
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Anxiety, Dementia Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Charmaine based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• PREFERENCE: Charmaine likes to have warm drink, watch TV, have a snack) to fall asleep. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				PCA	Q1H
• REST PATTERN: Preferred bedtime 11pm, usual wake time 8am and daytime naps frequently at her own discretion. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			• MONITOR: Monitor Charmaine sleeping patterns. Document when awake or				PCA	
Allergies	No Known Allergies		D.O.B.	12/28/1951		Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025		Location	5 518 C	

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to Anxiety, Dementia Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)			asleep. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential to experience alteration in CARDIAC FUNCTION related to; Hypertension		• To treat and minimize signs/symptoms or complications associated with hypertension through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for hypertension as per MD Order and monitor for side effects. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)			Registered Practical Nurse RN	
• Potential for CONSTIPATION related to history of constipation. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Charmaine will have regular soft formed bowel movements every 1-2 days through to the next review. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• 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	
• BOWEL Continence - Charmaine is continent and has self recognition of urge to defecate. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Charmaine to remain continent of bowels through next review date Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• BOWEL Continence level is CONTINENT. Report change to level as noted.  • SELF TOILETING: Charmaine toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 08/28/2025			PCA  PCA	
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C	



## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Target Date: 11/26/2025	Revision by: Danielle Loreto (RAI Coordinator)			
• URINARY Continence - Charmaine is continent and has self recognition of urge to void. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Charmaine will maintain continence level through next review date Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• URINARY Continence Level is: CONTINENT  • SELF TOILETING: Charmaine toilets self. Each shift ask if he/she has voided and document accordingly. Report changes to urination or continence level to Registered Staff as noted. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	PCA
• Risk for Impaired SKIN INTEGRITY related to Frailty		• To protect and maintain skin integrity each day through to the next review. Target Date: 11/26/2025	• 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	
• Charmaine is at high risk for ELOPEMENT related to new environment Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote Charmaine safety and minimize risk for episode of elopement each day through next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• ALERT: Charmaine has potential to attempt elopement. If heard making requests to leave the building or seen attempting to use exit doors report to Supervisor immediately. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • ELOPEMENT ALERT: Redirect Charmaine away from elevator or exit doors as needed. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		PCA	
• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE) nature related to Dementia Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety for Charmaine and/or others during each episode of (wandering, disrobing, verbal, physical or resistive to care expressed behaviours) through to the next review date. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Charmaine for indications to change in or for escalating expressive behaviour risk. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to PHYSICAL (history of grabbing her daughter by the throat, making fists at the team with care) as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight. Revision on: 08/28/2025			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Coordinator) Target Date: 11/26/2025  • To decrease episodic frequency of (wandering, disrobing, verbal, physical or resistive to care expressed behaviours by next review date. ABS score will be maintained to 0. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 11/26/2025  • Charmaine will be supported to adjust to her new environment to lower risk of triggering former wandering, disrobing, verbal, physical or resistive to care expressed behaviours behaviour episodes through to the next review. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	Revision by: Danielle Loreto (RAI Coordinator)  • PHYSICAL Behaviour: If Charmaine is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TRIGGERS leading to VERBAL yelling, calling names as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)  • VERBAL Behaviour: If Charmaine is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication) as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)  • RESISTANCE to Care Need: If Charmaine is declining to (bathe, change clothes, take medications, eat) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TRIGGERS leading to SOCIALLY Inappropriate (disrobing and laying in her doorway or on the ground, walking around naked) as expression of behaviour include anger, frustration, confusion, invasion of personal space, misinterpreting care, poor judgement, lack of insight. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)  • SOCIALLY Inappropriate Behaviour: If Charmaine is noted to walking around			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
<ul style="list-style-type: none"><li>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE) nature related to Dementia</li></ul> Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)		naked, laying naked on her floor, disrobing gently redirect her (to focus on task at hand, to move to quieter area, etc., or specify distraction activity). Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• WANDERING: Permit Charmaine to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</li></ul> Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
<ul style="list-style-type: none"><li>• Altered COMMUNICATION as exhibited by limitations to comprehension, related to Hard of hearing</li></ul> Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"><li>• Charmaine will continue to freely express self and adequately comprehend information each day through to the next review period.</li></ul> Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	<ul style="list-style-type: none"><li>• PRIMARY LANGUAGE: Charmaine's primary language is English. She is able to speak/understand English.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN) <ul style="list-style-type: none"><li>• HARD of HEARING and does not use hearing aids: Strategies to support hearing are (speak clearly, ensure her attention and speak slowly when needed)</li></ul> Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) <ul style="list-style-type: none"><li>• INSTRUCTION GUIDANCE: Charmaine needs intermittent cueing or demonstrative instruction in tasks and activities.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	PCA			
<ul style="list-style-type: none"><li>• Altered VISION related to Presbyopia, History of Cataracts in both eyes with surgery.</li></ul> Revision on: 08/28/2025	<ul style="list-style-type: none"><li>• Charmaine supported to use eyeglasses for vision correction daily through to the next review date.</li></ul>	<ul style="list-style-type: none"><li>• EYEGLASSES: Charmaine wears reading eyeglasses at her discretion. Assist to clean eyeglasses as needed and store in night table drawer when sleeping.</li></ul> Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
Revision by: Danielle Loreto (RAI Coordinator)	Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025	• READING: Charmaine uses large print material to aid with reading. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Dementia Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Charmaine will be supported to maintain cognitive function through the review date. Current CPS is 2. Revision on: 09/13/2025 Revision by: Maryola Perion (RN) Target Date: 11/26/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Charmaine is feeling lost or in confused state. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Charmaine can comprehend and follow. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to Dementia. Limitation of cognitive function/altered judgement, unsteady gait, non-compliance with gait aid. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 11/26/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Secure environment educe clutter to reduce fall risk for Charmaine Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • FOOTWEAR: Ensure Charmaine wears appropriate footwear when ambulating and transferring. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) • SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 09/13/2025 Revision by: Maryola Perion (RN)	PCA          PCA   PCA	D/E/N		
• Expressed Wishes and Beliefs related to Charmaine Medical Treatment and End of Life Care	• To support and honor Charmaine expressed wishes and beliefs through to the End of	• CPR: Charmaine wishes Attempt CPR: transfer to hospital decisions to be made as needed - see PoET Individualized Summary for details. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	No Known Allergies		D.O.B.	12/28/1951	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Poisson-Kani, Charmaine (922131005659)		Admission Date	08/28/2025	Location	5 518 C

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator)	Life. Revision on: 08/28/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/26/2025			


### Diagnosis

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

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	12/28/1951	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Anxiety disorder, unspecified(F41.9), Benign hypertension(I10.0), Carcinoma in situ of right breast, unspecified(D05.90), Iron deficiency anaemia, unspecified(D50.9), A...See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Poisson-Kani, Charmaine (922131005659)	<b>Admission Date</b>	08/28/2025	<b>Location</b>	5 518 C

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<ul style="list-style-type: none"><li>At Risk for SOCIAL ISOLATION and/or alteration to PSYCHO-SOCIAL well-being related to Disinterest, Conflict with Others (Anna Maria does not like other residents in her personal space or sharing supplies/ recreation items with others.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)		<ul style="list-style-type: none"><li>Team members will support Anna Maria in decreasing social isolation by participating in activities of personal choice for 20-25 times per month by the next review date.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 11/13/2025	<ul style="list-style-type: none"><li>STRUCTURED ACTIVITIES: Invite her to programs of personal interest; baking, music programs, reminiscing, walking groups, movies, parties, tea social, etc.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"><li>SELF-DIRECTED ACTIVITIES: Encourage her to engage in self-directed activities such as reading, telephone conversations, watching TV in own room, walking, conversing with peers, etc.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) <ul style="list-style-type: none"><li>ONE to ONE: Provide her with individual visits for conversation, bedside activity, reading, reminiscing, etc.</li></ul> Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)				
<ul style="list-style-type: none"><li>Potential for PAIN and alteration in comfort level . Most Current LTCF Pain Score is 0</li></ul> Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"><li>Promote RAI Pain Score of 0 through to the next review.</li></ul> Target Date: 11/13/2025	<ul style="list-style-type: none"><li>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.</li></ul>			RN Registered Practical Nurse	
<ul style="list-style-type: none"><li>Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension,) related to Dementia, hearing loss</li></ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"><li>Anna Maria will be supported to maintain current communication abilities to (express self, comprehend information) each day through to the review date.</li></ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	<ul style="list-style-type: none"><li>HEARING AID; Apply/Remove to/from right or left ear/s. Anna does not like using both her hearing aids in, only one is to be applied.</li></ul> Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"><li>HEARING AID CARE: Check function, volume control before insertion. Hearing Aid to be stored at nursing station. Anna may refuse to have nurse store hearing aids.</li></ul> Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"><li>SUPPORTIVE TECHNIQUES: Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, speak loudly, Anna will lip read,</li></ul> Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"><li>INSTRUCTION GUIDANCE: Anna Maria needs (intermittent) cueing or demonstrative instruction in tasks and activities.</li></ul> Revision on: 08/15/2025			PCA  PCA	D/E
Allergies	No Known Allergies		D.O.B.	06/20/1933	Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Vitalli, Anna Maria (922131005655)		Admission Date	08/15/2025	Location	5 509 A	



## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Altered COMMUNICATION as exhibited by limitations to (self expression, comprehension,) related to Dementia, hearing loss</li> </ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)			Revision by: Danielle Loreto (RAI Coordinator)			
<ul style="list-style-type: none"> <li>Nutrition Risk Level</li> </ul>		<ul style="list-style-type: none"> <li>Anna Maria will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date.</li> </ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	<ul style="list-style-type: none"> <li>Labelled Item Lunch: crustless cheese sandwich daily - encourage Anna Maria to eat this PLUS other options available at the meal</li> </ul> Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	<ul style="list-style-type: none"> <li>NUTRITION RISK: Anna Maria is moderate risk level.</li> </ul> Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA Registered Practical Nurse RN Dietitian (RD)	D
		<ul style="list-style-type: none"> <li>Will weigh within realistic GWR 47-57 kg through to next review date.</li> </ul> Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/13/2025	<ul style="list-style-type: none"> <li>DIET ORDER: Anna Maria will receive Regular diet, Regular texture - encourage softer options and provide crustless bread/toast</li> </ul> Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	<ul style="list-style-type: none"> <li>FLUID CONSISTENCY: Anna Maria drinks REGULAR/THIN Level 0 Fluids.</li> </ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	
		<ul style="list-style-type: none"> <li>Anna Maria will be adequately hydrated aeb drinking 100% of TFR: 1188 ml/day (25 ml/kg using 47.5 kg weight) through to next review date.</li> </ul> Revision on: 08/26/2025	<ul style="list-style-type: none"> <li>FLUID TARGET: Encourage Anna Maria to drink a minimum of 1188 ml/day</li> </ul> Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	<ul style="list-style-type: none"> <li>EXTRA FLUIDS: Offer a minimum of 125ml high moisture food or fluid outside of meals and snacks daily. She likes to drink water, apple juice, and coffee with sugar.</li> </ul> Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	PCA	
			<ul style="list-style-type: none"> <li>DINING INSTRUCTIONS:</li> </ul>		Registered	
Allergies	No Known Allergies		D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Vitalli, Anna Maria (922131005655)		Admission Date	08/15/2025	Location	5 509 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
• Nutrition Risk Level	Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 11/13/2025	- Encourage softer options and provide crustless bread/toast - Do not serve milk, yogurt, cottage cheese, or ice cream (she strongly dislikes) Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD)) • FOOD PREFERENCES: Anna Maria enjoys eating pasta dishes, white bread, toast with jam, cheese, and fruit. Revision on: 08/26/2025 Revision by: Holly Laasanen (Dietitian (RD))	Practical Nurse     PCA	
• Altered VISION related to Presbyopia	• Anna Maria supported to use eyeglasses for vision correction daily through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	• EYEGLASSES: Anna Maria wears eyeglasses. Assist to clean eyeglasses as needed Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • READING: May require large printed materials when presented with something to be read. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA     PCA	
• BOWEL Continence - Anna Maria is continent and has self recognition of urge to defecate. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	• Anna Maria to remain continent of bowels through next review date Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	• BOWEL Continence level is CONTINENT. Report change to level as noted.  • SELF TOILETING: Anna Maria toilets self for bowel movements. Each shift ask if she had BOWEL MOVEMENT and document accordingly. Report changes to bowel movements or continence level to Registered Staff as noted. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA   PCA	
• URINARY Continence - Anna Maria is continent and has self recognition of urge to void. Revision on: 08/15/2025	• Anna Maria will maintain continence level through next review date Revision on: 08/15/2025	• URINARY Continence Level is: CONTINENT  • SELF TOILETING: Anna Maria toilets self. Each shift ask if he/she has voided and document accordingly. Report changes to urination or continence level to Registered	PCA  PCA	
<b>Allergies</b>	No Known Allergies		<b>D.O.B.</b>	06/20/1933
<b>Diagnosis</b>	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)			
<b>Facility</b>	Berkshire Care Centre		<b>Print Date</b>	10/30/2025
<b>Resident</b>	Vitali, Anna Maria (922131005655)	<b>Admission Date</b>	08/15/2025	<b>Location</b> 5 509 A



## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
Revision by: Danielle Loreto (RAI Coordinator)		Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	Staff as noted. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, cognitive loss Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote adequate rest/sleep for Anna Maria based on identified sleep patterns/preferences each night through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	• PREFERENCE: Anna Maria may wish to have a warm beverage before bed and to watch T.V. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • REST PATTERN: Preferred bedtime 2000, usual wake time 0700 and daytime naps PCA when she wants to. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITOR: Monitor Anna Marua sleeping patterns. Document when awake or asleep. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential to experience alteration in CARDIAC FUNCTION related to; Coronary Artery Disease, Hypertension		• To treat and minimize signs/symptoms or complications associated with Coronary Artery Disease, Hypertension through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Artery Disease, Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Anna Maria is at high risk for ELOPEMENT related to new environment Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote Anna Maria safety and minimize risk for episode of elopement each day through next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	• ELOPEMENT ALERT: Redirect Anna Maria away from elevator or exit doors as needed. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)				
Allergies	No Known Allergies			D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Vitalli, Anna Maria (922131005655)			Admission Date	08/15/2025	Location	5 509 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Anna Maria is at high risk for ELOPEMENT related to new environment Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		Target Date: 11/13/2025				
• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Dementia Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety for Anna Maria and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025  • To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than (state current ABS score). Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	• TRIGGERS leading to PHYSICAL (Hitting, swatting, slapping, pushing) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space) Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • PHYSICAL Behaviour: If Anna Maria is attempting to strikeout; move back from her reach. Calmly indicate that care will continue when he/she is calm/ready. Seek Registered Staff assistance. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intentions) Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • VERBAL Behaviour: If Anna Maria is heard yelling, swearing or calling others names; calmly remind to lower her voice and that chosen words are not appropriate. Attempt to resolve her concern. Report episode to Registered Staff. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication) as expression of behaviour include (confusion, misunderstanding care needs, poor judgement, fearfulness.) Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESISTANCE to Care Need: If Anna Maria is declining to (bathe, change clothes, take medications, eat.) re-approach in 10-15 minutes. Report episode to Registered			
Allergies	No Known Allergies		D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Vitalli, Anna Maria (922131005655)		Admission Date	08/15/2025	Location	5 509 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
<div>• Potential for Expressive Behaviour of (WANDERING, VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need) nature related to Dementia</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div>			<div>Staff.</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• TRIGGERS leading to SOCIALLY Inappropriate (yelling, reportedly calling on the all bell/alert system in the past) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.)</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• SOCIALLY Inappropriate Behaviour: If Anna Maria is noted to (to be calling on the call bell, yelling) gently redirect her (to focus on task at hand, to move to quieter area, try to engage her in an activity on the home area, assess for unmet needs etc).</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• WANDERING: Permit Anna Maria to safely roam in common area. Redirect away from exit doors, elevator or other resident rooms as needed.</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• DE-ESCALATION: Anna calms with going for walk, distraction, re-direction, watching tv like I love lucy, italian music, playing cards, playing bingo, provide apple sauce when looking for medications</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Chelsea Campbell-Wright (ADOC)</div> <div>• DELUSION: Believes that her husband owns this place she leaves. This can cause her to become agitated and expressive.</div> <div>Team to listen to her. Do no argue with her. Offer support and reassurance. Inform MD if expressions interfere with daily functioning.</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Danielle Loreto (RAI Coordinator)</div> <div>• SPECIAL CONSIDERATIONS: Anna is used to having an alert button. Provided Anna with a wanderguard to support her.</div> <div>Revision on: 08/15/2025</div> <div>Revision by: Chelsea Campbell-Wright (ADOC)</div>				
			PCA				
			Registered Practical Nurse RN				
• Potential to experience alteration in		• Anna Maria will be supported	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of Anna				
Allergies	No Known Allergies			D.O.B.	06/20/1933	Physician	Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Vitalli, Anna Maria (922131005655)			Admission Date	08/15/2025	Location	5 509 A

## Care Plan Report

Focus		Goal	Interventions	Position	Freq/Resolved
MOOD related to cognitive loss Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	Maria for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on Anna Maria effort to maintain control. Encourage her to express self, state preferences and make safe choices for care and activities. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement) related to progression of Dementia Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		• Anna Maria will be supported to maintain cognitive function through the review date. Current CPS is 3. Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	• ORIENTATION: Gently reorient to (person, place, time) as needed when Anna Maria is feeling lost or in confused state. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, Anna Maria can comprehend and follow. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		
• Increased risk for FALLS as evidence by: Limitation of cognitive function/altered judgement related to Dementia Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 11/13/2025	• COMMUNICATION: Involve/collaborate with Anna/Susan SDM in decision making in fall prevention Plan of Care. Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) • CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) • ACTIVITY: Engage Anna in meaningful activity to decrease boredom and or restlessness. Resident likes to engage in activities like bingo and play cards Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) • FOOTWEAR: Ensure resident wears appropriate footwear transfers, ambulation. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA	D/E/N
• Altered ability to complete Activities of		• Anna Maria will be supported	• BATHING: Anna Maria prefers Shower on Wednesday and Saturday Afternoon.	PCA	
Allergies	No Known Allergies		D.O.B.	06/20/1933	Physician Albert Patrick Ng
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
Facility	Berkshire Care Centre			Print Date	10/30/2025
Resident	Vitalli, Anna Maria (922131005655)		Admission Date	08/15/2025	Location 5 509 A

## Care Plan Report


Focus		Goal	Interventions				Position	Freq/Resolved
Daily Living (ADLs) related to Cognitive Limitation		to maintain current self participation in ADL care and assisted to ensure all ADL care needs are met each day through to the next review date. Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	Anna participates in her shower and requires 1 team member to provide limited assistance if using the shower. Often refuses and she will independently give herself a cleansing in her washroom. Anna does not like a tub bath.					
			Nail care to be provided on shower/bath day. Revision on: 10/26/2025 Revision by: Lara Ismail (RN)					
			• BED MOBILITY: Anna Maria is independent with her movement in bed. PCA Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• DRESSING: Anna Maria is able to dress herself. She can dress both her upper and lower body. Team to monitor for changes. PCA Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• EATING: Anna Maria independently with set up on the wildflower lane dining area. PCA Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• LOCOMOTION: Anna Maria is independent with her locomotion. Supervision when not on the home area is required. PCA Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• PERSONAL HYGIENE: Anna Maria is able to complete her hygiene care. May need set up, reminders, cues and oversight. Monitor for changes. PCA Revision on: 08/25/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• HAND HYGIENE: 1 staff to provide reminders assistance to apply hand sanitizer for hand hygiene. PCA Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC)					
			• TOILET USE: Anna Maria is independent with her toileting and continence care needs. PCA Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)					
			• TRANSFERRING: Anna Maria is an independent transfer no staff assistance PCA Revision on: 08/15/2025					
Allergies	No Known Allergies		D.O.B.	06/20/1933		Physician	Albert Patrick Ng	
Diagnosis	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)							
Facility	Berkshire Care Centre					Print Date	10/30/2025	
Resident	Vitalli, Anna Maria (922131005655)			Admission Date	08/15/2025		Location	5 509 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
<ul style="list-style-type: none"> <li>Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation</li> </ul>		Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"> <li>ORAL CARE: Anna Maria has her own teeth. Anna has a partial bridge, however often does wear it. Anna Maria is independent with cues and reminders for her oral care</li> </ul> Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC)	PCA	
<ul style="list-style-type: none"> <li>Expressed Wishes and Beliefs related to Anna Maria Medical Treatment and End of Life Care</li> </ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator)	<ul style="list-style-type: none"> <li>To support and honor Anna Maria expressed wishes and beliefs through to the End of Life.</li> </ul> Revision on: 08/15/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 11/13/2025	<ul style="list-style-type: none"> <li>CPR: Anna wishes express NO CPR, however TRANSFER to hospital decision will be made at the time.</li> </ul> Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC) <ul style="list-style-type: none"> <li>SPIRITUAL/RELIGIOUS needs: Anna wishes to follow Roman Catholic Tradition in recognition of faith.</li> </ul> Revision on: 08/15/2025 Revision by: Chelsea Campbell-Wright (ADOC)		

<b>Allergies</b>	No Known Allergies	<b>D.O.B.</b>	06/20/1933	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Unspecified dementia(F03), Benign hypertension(I10.0), Atherosclerotic heart disease of native coronary artery(I25.10), Gastro-oesophageal reflux disease without oesophagitis(K21.9)				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Vitalli, Anna Maria (922131005655)	<b>Admission Date</b>	08/15/2025	<b>Location</b>	5 509 A

## Care Plan Report

Focus	Goal	Interventions			Position	Freq/Resolved	
• Use of PASD (two 1/4 bed rails) to assist resident with Activity of Daily Living (bed mobility). Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)	• James will be effectively supported with use of two 1/4 bed rails to optimize Activity of Daily Living (bed mobility) each day through to the next review date. Revision on: 10/02/2025 Revision by: Suzanne Azar (RN) Target Date: 12/07/2025	• HEALTH EDUCATION: Engage with Resident/SDM to enhance their knowledge of possible benefits and challenges associated with Use of (Specify PASD).			Registered Staff		
		• MONITORING: Utilize holistic perspective of monitoring resident for continued benefit to use (specify assigned PASD) as to support appropriate (assigned ADL).			Registered Staff		
		• BED RAIL (TWO PARTIAL): 1/4 Rails in USE as a PASD to assist resident with (specify; bed mobility, transfer in/out of bed). Monitor every shift. Revision on: 10/02/2025 Revision by: Suzanne Azar (RN)			PCA	D/E/N	
• Transfers- Sit to Stand Revision on: 09/23/2025 Revision by: Shina Wadhwa (Physical Therapist)	• Reduce assistance needed for transfers from Sara lift to 2 person assist in next 6 months; Revision on: 09/23/2025 Revision by: Shina Wadhwa (Physical Therapist) Target Date: 12/07/2025	• Sit to stand : 2 person assist at the bar/walker; Slowly increase standing endurance to 45 sec x 2-5 reps; 2-3 x a week; Revision on: 09/23/2025 Revision by: Shina Wadhwa (Physical Therapist)			PT - Physiotherapist PTA		
• Temporary-Activities related to Move In  ISE score = 4/6 Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)	• James will be engaged and invited to participate in all spheres of activities offered during the first days/weeks upon move in. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) Target Date: 12/07/2025	• INVITATION: Invite and Encourage resident to attend scheduled programs. Also extend invite to Spiritual focused programs. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • CALENDAR: Provide program calendar(verbally review if needed). Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide) • SOCIAL Introduction: Introduce him to other residents of similar age, interest, language, etc. as he can tolerate. Revision on: 09/21/2025 Revision by: Kameron Stewart (Recreation Aide)					
• Sleep Patterns; Potential for alteration in quality of sleep or sleep pattern related to new environment, Anxiety and Dementia Revision on: 09/19/2025 Revision by: Maryola Perion (RN)	• To promote adequate rest/sleep for James based on identified sleep patterns/preferences each night through to the next review date.	• REST PATTERN: Preferred bedtime 2000, usual wake time 0700 and daytime naps. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MONITOR: Monitor James sleeping patterns. Document when awake or asleep.			PCA  PCA	 Q1H	
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder(F43....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A	

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
	Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Potential for PAIN and alteration in comfort level related to headache, Impaired Mobility. Most Current LTCF Pain Score is 1. Revision on: 09/19/2025 Revision by: Maryola Perion (RN)	• Promote RAI Pain Score of 0 through to the next review. Target Date: 12/07/2025	• MONITORING: Utilize holistic perspective to continually assess appropriateness of pain management regime and collaborate with Interdisciplinary Team to attain optimal resident satisfaction for pain control.  • NON VERBAL CUES of PAIN for James includes - (facial grimacing, tight fists, crying, sweating, wringing of hands, refusing to eat, wanting to go to bed, etc.) Report these to Registered staff when observed. Revision on: 09/14/2025 Revision by: Maryola Perion (RN)  • MEDICATION: Administer analgesic medication as per MD order for pain relief/management. Request MD assistance to review pain management as clinically needed. Revision on: 09/14/2025 Revision by: Maryola Perion (RN)	RN Registered Practical Nurse  PCA   Registered Practical Nurse RN			
• Potential to experience alteration in CARDIAC FUNCTION related to: Coronary Artery Disease, Hypertension, dyslipidemia. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)	• To treat and minimize signs/symptoms or complications associated with (coronary artery disease and hypertension) through to the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with Coronary Artery Disease, Hypertension for changes to health status and alteration or complications affecting cardiac function. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • MEDICATION: Administer medication for Coronary Artery Disease, Hypertension, dyslipidemia as per MD Order and monitor for side effects. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)	Registered Practical Nurse RN			
• Potential for BOWEL INCONTINENCE related to limited mobility and cognitive impairment. James will request staff to be toileted. Revision on: 09/17/2025	• James will have bowel incontinence managed every shift through to the next review period. Revision on: 09/08/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for changes to health status, alteration of continence level or bowel function.  • BOWEL Continence level is Continent. Report change to level as noted. Revision on: 09/17/2025	Registered Staff  PCA			
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A



## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved
Revision by: Maryola Perion (RN)	Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	Revision by: Maryola Perion (RN) • BOWEL MOVEMENT: Monitor resident for bowel movement each shift and document number of occurrences, size and consistency.  • INCONTINENCE PRODUCT: Resident uses Blue brief throughout all shifts. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA  PCA	
• Potential to experience alteration in MOOD as exhibited by frustration, anxiety, restlessness, nervousness, persistent anger to self or others related to Loss of Independence, Dementia, anxiety Revision on: 09/17/2025 Revision by: Maryola Perion (RN)	• James will be supported to maintain mood stability as evidenced by DRS score at a range of 0-2 by the review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025  • To decrease the episodic frequency of (negative Mood symptoms) by the next review date. DRS score will be less than 1. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/07/2025	• Maintain personal space which is James preferred while offer care.  • ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of James for indications to change in MOOD including labile mood or increase of symptoms that negatively impact residents quality of life. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • RESIDENT STRENGTHS: Build on James effort to maintain control. Encourage him to express self, state preferences and make safe choices for care and activities. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • ENVIRONMENT: Modify environment to support MOOD STABILITY (Reduce noise, open curtains, ambient lighting, preferred music (Motown) etc.) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • MEDICATION: Administer medication for MOOD stability as per MD Order. Monitor its effectiveness and for side effects. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)		
• Potential for Expressive Behaviour of (VERBAL, PHYSICAL, SOCIALLY Inappropriate, RESISTANCE to care need, history inappropriate sexual comments to the team prior to his admission), hit/punched registered staff arm/hand, yelling related to history of multiple strokes and mixed dementia.	• To promote safety for James and/or others during each episode of Expressive Behaviour through to the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• ASSESS/MONITOR: Utilize holistic perspective of continuous monitoring of James for indications to change in or for escalating expressive behaviour risk. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) • TRIGGERS leading to PHYSICAL (Hitting, Punching, Slapping,) as expression of behaviour include (anger, frustration, fearfulness, confusion, invasion of personal space) Revision on: 09/08/2025		
<b>Allergies</b>	Shell Fish	<b>D.O.B.</b>	07/27/1957	<b>Physician</b> Albert Patrick Ng
<b>Diagnosis</b>	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses			
<b>Facility</b>	Berkshire Care Centre	<b>Print Date</b>	10/30/2025	
<b>Resident</b>	Webber, James (922131005660)	<b>Admission Date</b>	09/08/2025	<b>Location</b> 5 515 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
Revision on: 09/14/2025 Revision by: Maryola Perion (RN)		Target Date: 12/07/2025  • To decrease episodic frequency of Expressive Behaviour by next review date. ABS score will be less than 7. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/07/2025  • James will be supported to adjust to his new environment to lower risk of triggering former (PHYSICAL inappropriate, VERBALLY inappropriate, etc.) behaviour episodes through to the next review. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/07/2025	Revision by: Danielle Loreto (RAI Coordinator)  • PHYSICAL Behaviour: If James is attempting to strikeout; move back from his reach. Calmly indicate that care will continue when he is calm/ready. Seek Registered Staff assistance. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TRIGGERS leading to VERBAL (yelling, screaming, calling names) as expression of behaviour include (loss of control, frustration, limitation in self expression, misunderstanding care intention, etc.) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • VERBAL Behaviour: If James is heard yelling, swearing or calling others names; calmly remind to lower his voice and that chosen words are not appropriate. Attempt to resolve his concern. Report episode to Registered Staff. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TRIGGERS leading to RESISTANCE to Care Needs of (refusing to change clothing, refusal to bathe, refusal to eat, refusing medication, etc.) as expressions of behaviour include confusion, misunderstanding care needs, poor judgement, etc.) Revision on: 09/17/2025 Revision by: Maryola Perion (RN)  • RESISTANCE to Care Need: If James is declining to (bathe, change clothes, take medications, eat.) re-approach in 10-15 minutes. Report episode to Registered Staff. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • TRIGGERS leading to SOCIALLY Inappropriate (disruptive vocalizations) as expression of behaviour include (confusion, decreased insight, poor judgement, limitation in communication, over stimulation, etc.) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)  • SOCIALLY Inappropriate Behaviour: If James is noted to (make loud disruptive noises in dining room/program, etc.) gently redirect him (to focus on task at hand, to move to quieter area, etc., or specify distraction activity). Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

## Care Plan Report

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## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
		Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	<p>assistance to dress both his upper and lower body.</p> <p>May require 1 team member to try to engage him while other renders care.</p> <p>May require stop and go approach or reapproach to care.</p> <p>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• EATING: James is independent with set up support. Team to monitor at meals for changes. He may require one staff extensive assistance to feed him.</p> <p>James has his meals in the Wild Flower Lane dining room.</p> <p>Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</p> <p>• LOCOMOTION: James requires the use of a wheelchair and is dependent on the team for portering</p> <p>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• PERSONAL HYGIENE: James is able to participate in his care when expressed behaviours are not present. He requires 2 team member maximal assistance to complete his hygiene care needs.</p> <p>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• HAND HYGIENE: 1 staff to provide (REMINDER to total depending on his ability to follow directions) assistance to (use soap/water, apply sanitizer, rub hands together, dry hands, etc.) for hand hygiene.</p> <p>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TOILET USE: James requires 2 team member maximal assistance for his toileting and continence care needs.</p> <p>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</p> <p>• TRANSFERRING: James requires the use of a sit to stand lift with two assistance for transfer.</p> <p>Revision on: 09/17/2025</p>		PCA	
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved	
<ul style="list-style-type: none"><li>Altered ability to complete Activities of Daily Living (ADLs) related to Cognitive Limitation, Mixed Dementia, Hx of stroke.</li></ul> Revision on: 09/13/2025 Revision by: Maryola Perion (RN)			<div>Revision by: Maryola Perion (RN)</div> <ul style="list-style-type: none"><li>TRANSFER LIFT/SLING: Sit to stand lift and Yellow SIZE of sling needed for transfer.</li></ul> <div>Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</div> <ul style="list-style-type: none"><li>ORAL CARE: James has some missing teeth and natural teeth present. He has some implants too. He does not use dentures.</li></ul> <div>1 team member to complete his oral care. 12 team members to be present due to expressed behaviours.</div> <div>Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)</div> <ul style="list-style-type: none"><li>SHAVING - James requires the team to shave him on his bathing days. He may wish not to be. 2 team member approach to care.</li></ul> <div>Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</div>		PCA		D
<ul style="list-style-type: none"><li>Nutrition: Swallowing difficulty related to risk for aspiration</li></ul> Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		<ul style="list-style-type: none"><li>To maintain safe swallowing through to next review date Target Date: 12/07/2025</li><li>To obtain or maintain adequate intake to meet estimated nutritional requirements through to next review date Target Date: 12/07/2025</li></ul>	<ul style="list-style-type: none"><li>Provide diet/texture interventions as per Nutrition Risk Level</li></ul>				
<ul style="list-style-type: none"><li>Alteration in skin integrity related to MASD to Groin Left and Right sides.</li></ul> Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)		<ul style="list-style-type: none"><li>To promote intact skin integrity through healing of MASD by December 7th 2025</li></ul> Revision on: 09/08/2025 Revision by: Chelsea Campbell-	<ul style="list-style-type: none"><li>MONITORING: Utilize holistic perspective of continuous monitoring of resident with MASD for changes to health status and alteration or complications affecting skin integrity.</li></ul> Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)		Registered Practical Nurse RN		
Allergies	Shell Fish			D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Webber, James (922131005660)			Admission Date	09/08/2025	Location	5 515 A

## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Wright (ADOC) Target Date: 12/07/2025	<ul style="list-style-type: none"><li>• COMMUNICATION: Involve/collaborate with James/SDM in decision making for treatment of skin issues. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)</li><li>• TOPICAL TX: Apply topical treatment to Left and Right Groin as MD Order. Revision on: 09/08/2025 Revision by: Chelsea Campbell-Wright (ADOC)</li><li>• WEEKLY ASSESSMENT: Assess and evaluate skin condition weekly and PRN using PCC Skin/Wound Record App. Report signs of impaired healing to Wound Care Lead and MD as needed. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)</li></ul>			Registered Practical Nurse Registered Practical Nurse	
• Nutrition Risk Level		<ul style="list-style-type: none"><li>• James will be adequately nourished aeb consuming &gt;75% at meals and snacks through to next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025</li><li>• Will weigh within realistic GWR 75-85 kg through to next review date. Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/07/2025</li><li>• (resident name) will be adequately hydrated aeb drinking at least 77% of total</li></ul>	<ul style="list-style-type: none"><li>• NUTRITION RISK: Jim is HIGH risk level. Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD))</li><li>• DIET ORDER: James will receive regular diet, minced texture Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</li><li>• THICKENED FLUIDS: James drinks thickened fluids at moderately thick level 3 (honey-like) consistency. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</li><li>• FLUID TARGET: Encourage Jim to drink at least 1500 ml/day Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD))</li><li>• DINING INSTRUCTIONS: Encourage texture-modified diet - however allow regular diet at risk if he requests per POA. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</li><li>• ADAPTIVE AIDS: Rimmed/lip plate and non-slip mat for meals. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))</li></ul>			Dietitian (RD)	
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng	
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre				Print Date	10/30/2025	
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A	

## Care Plan Report

Focus		Goal	Interventions		Position	Freq/Resolved
• Nutrition Risk Level		fluid requirement: 1942 ml/day (25 ml/kg) through to next review date. Revision on: 09/18/2025 Revision by: Holly Laasanen (Dietitian (RD)) Target Date: 12/07/2025	• FOOD ALLERGY: Do not serve items containing shellfish. Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD)) • HIGH CALORIE/PROTEIN IN MEALS: provide Magic Cup at lunch and dinner daily Revision on: 09/11/2025 Revision by: Holly Laasanen (Dietitian (RD))		PCA Restorative Care Aide PCA	BLD
• Potential to experience alteration in NEUROLOGICAL FUNCTION related to: CEREBROVASCULAR ACCIDENT (CVA) (2004/2015) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To treat and minimize signs/ symptoms or complications associated with CEREBROVASCULAR ACCIDENT through to the next review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident with ( CEREBROVASCULAR ACCIDENT ) for changes to health status and alteration or complications affecting neurological function. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			
• URINARY (functional) INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• James will have urinary incontinence managed every shift through to the next review period. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	• MONITORING: Utilize holistic perspective of continuous monitoring of resident for toileting needs, changes to health status and alteration of continence level. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) • URINARY Continence level is (Incontinent). Report change to level as noted. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INCONTINENCE PRODUCT: Resident uses Blue brief throughout all shifts. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • TOTAL INCONTINENCE MANAGEMENT: Resident has TOTAL Urinary		PCA   PCA  PCA	
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre				Print Date	10/30/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved		
• URINARY (functional) INCONTINENCE related to altered mobility, Dementia Diagnosis Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		Incontinence; Requires check and change every 2 hours and as needed.				
• Risk for Impaired SKIN INTEGRITY related to Frailty, Incontinence	• To protect and maintain skin integrity each day through to the next review. Target Date: 12/07/2025	• 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			
• Altered COMMUNICATION as exhibited by limitations to (self expressions, limited decision making and understanding) related to aphasia and cognitive loss Hard of hearing Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• James will be supported to make basic needs known each day through to the review date. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) Target Date: 12/07/2025	• HARD of HEARING and does not use hearing aids: Strategies to support hearing are (speak clearly, ensure visual contact, speak slowly) Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • SUPPORTIVE TECHNIQUES: (Allow time to respond, repeat as needed, ask yes/no questions, uses simple words/phrases, etc.). Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • INSTRUCTION GUIDANCE: James needs (intermittent) cueing or demonstrative instruction in tasks and activities. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	PCA			
• COGNITIVE LOSS; alteration in thought processes (memory loss, difficulty concentrating, altered judgement, etc.) related to progression of Mixed Dementia Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)	• James will cope with progressive cognitive decline and be supported to maintain safety each day through the review date. Current CPS score is 3.	• ORIENTATION: Gently reorient to (person, place, time) as needed when James is feeling lost or in confused state. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • PERSONAL ITEMS: Keep in a consistent place in his room.	PCA			
Allergies	Shell Fish		D.O.B.	07/27/1957	Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses					
Facility	Berkshire Care Centre			Print Date	10/30/2025	
Resident	Webber, James (922131005660)		Admission Date	09/08/2025	Location	5 515 A



## Care Plan Report

Focus		Goal	Interventions			Position	Freq/Resolved
		Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/07/2025	Environmental CUES- Name plate, Colour of the hallway. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator) • CUE TASKS: Break tasks into manageable subtasks, James can comprehend and follow. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)				
• Increased risk for FALLS related to (cognitive loss- Mixed dementia). Limitation of cognitive function/altered judgement Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To promote safety, minimize risk for falls and/or fall related injury each day through to the next review period. Target Date: 12/07/2025	• CALL BELL: Place call bell within resident's reach, check that it is in working order and remind/encourage to use it. Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)			PCA	D/E/N
			• ADAPTIVE EQUIPMENT: Resident needs adaptive equipment: wheelchair Revision on: 09/17/2025 Revision by: Maryola Perion (RN)			PCA	
			• FOOTWEAR: Ensure resident wears appropriate footwear for transfers. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)			PCA	
			• FLOOR MAT: Position on floor next to left side of bed to lower risk of injury. Revision on: 10/13/2025 Revision by: Lucy(Xifeng)Lu (RPN)			PCA	
			• ALARM: Small clip Alarm ON every shift: when in bed and wheelchair for safety. Check placement and working order. Staff respond when alarm is heard. Revision on: 09/11/2025 Revision by: Lara Ismail (RN)			PCA Registered Practical Nurse RN	D/E/N
• SUPPLEMENT: Administer supplement as per MD order to maintain bone density to prevent injuries. Revision on: 09/17/2025 Revision by: Maryola Perion (RN)							
• Expressed Wishes and Beliefs related to (James) Medical Treatment and End of Life Care Revision on: 09/08/2025 Revision by: Danielle Loreto (RAI Coordinator)		• To support and honor James expressed wishes and beliefs through to the End of Life. Revision on: 09/17/2025 Revision by: Maryola Perion (RN) Target Date: 12/07/2025	• CPR: James wishes express NO CPR and NO TRANSFER to hospital. Revision on: 09/26/2025 Revision by: Maryola Perion (RN)				
Allergies	Shell Fish		D.O.B.	07/27/1957		Physician	Albert Patrick Ng
Diagnosis	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43....See last page for a complete listing of the Resident's diagnoses						
Facility	Berkshire Care Centre					Print Date	10/30/2025
Resident	Webber, James (922131005660)		Admission Date	09/08/2025		Location	5 515 A

## Care Plan Report

Focus	Goal	Interventions	Position	Freq/Resolved

### Diagnosis

Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder(F43.1), Dysphasia and aphasia(R47.0), Unspecified dementia(F03), Benign hypertension(I10.0), Lipid storage disorder, unspecified(E75.6), Other congenital malformations of cardiac septa(Q21.8), Paraesthesia of skin(R20.2)

<b>Allergies</b>	Shell Fish	<b>D.O.B.</b>	07/27/1957	<b>Physician</b>	Albert Patrick Ng
<b>Diagnosis</b>	Stroke, not specified as haemorrhage or infarction(I64), Atherosclerotic heart disease of native coronary artery(I25.10), Anxiety disorder, unspecified(F41.9), Post-traumatic stress disorder (F43.....See last page for a complete listing of the Resident's diagnoses				
<b>Facility</b>	Berkshire Care Centre			<b>Print Date</b>	10/30/2025
<b>Resident</b>	Webber, James (922131005660)	<b>Admission Date</b>	09/08/2025	<b>Location</b>	5 515 A