Personal Organizational Plan

Deepkumar Patel

Centennial College

St. Joseph's Hospital

Fatima Dixon

05/25/2025

**PERSONAL ORGANIZATIONAL PLAN (POP)**

Students complete a POP for each new Pt. and update existing POP’s weekly

STUDENT: Deepkumar Patel WK# 02 DATE: 05/25/2025

CARE PARTNER: HOM NURSING SUPERVISOR: Nagoose

**LEVEL OF CARE**

|  |  |
| --- | --- |
| Code | Patient’s/resident’s/Pt.’s self-evaluation |
| 0 | Independent-Able to accomplish all ADLs without intervention from staff or family: bathe, dress, groom, transfer and ambulate, toilet, communicate |
| 1 | Minimal Assist- Walks/transfers independently; infrequent falls –verbal reminders. |
| 2 | Stand-By Assist-Transfer/stand-by assist may be needed. ADLs – reminders, verbal cues. Occasional incontinence assistance. Bathing set-up helpful. |
| 3 | Hands-On-Transfer-one person assist usually needed. ADLs – verbal cues to hands-on assist. Incontinence mgmt. Bathing assistance needed. |
| 4 | Total Assist-Transfer-mechanical lift/two-person transfer/bedfast. ADLs-hands-on assistance. Incontinence mgmt. Bathing assistance. |

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| --- | --- | --- |
| **Pt. No. (Initial & Room No.** | **Health Problem / Diagnosis** | **Level of Care** |
| 1. J.M. – Room 13, Bed 2, Unit 2E | Pneumonia | 4 |
| 2. C.B – Room 23 Bed 2 | DKA (Diabetic Ketoacidosis) | 4 |
| 3. |  |  |
| 4. |  |  |
| 5. |  |  |

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| --- | --- | --- | --- | --- | --- | --- |
| TIME | |  | | --- | | **PLANS/ACTIVITIES TO MEET THE PT. NEEDS** |  |  | | --- | |  | | | **OBSERVATIONS TO REPORT AND CHART** | | --- |  |  | | --- | |  | |
| |  | | --- | | 08:00 AM |  |  | | --- | |  | | Prepared supplies; checked room safety for both patients | |  | | --- | | J.M. sleeping; C.B. in bed, alert but confused |  |  | | --- | |  | |
| |  | | --- | | 08:30 AM |  |  | | --- | |  | | Fed C.B. breakfast | Slurred speech, ate slowly, cooperative |
| |  | | --- | | 08:50 AM |  |  | | --- | |  | | Fed J.M. breakfast | Drowsy but responsive; required full assistance |
| |  | | --- | | 09:30 AM |  |  | | --- | |  | | Took C.B. out in recliner-chair as per RN’s order | Calmer while watching shows on iPad |
| |  | | --- | | 10:15 AM |  |  | | --- | |  | | Gave full bed bath to C.B. | Skin intact; tolerated well |
| |  | | --- | | 11:00 AM |  |  | | --- | |  | | Repositioned J.M. and checked brief | |  | | --- | |  |  |  | | --- | | Brief dry; catheter draining clear | |
| |  | | --- | | 12:00 PM |  |  | | --- | |  | | |  | | --- | |  |  |  | | --- | | Fed C.B. lunch | | Mild confusion; accepted food calmly |
| |  | | --- | | 12:30 PM |  |  | | --- | |  | | |  | | --- | | Fed J.M. lunch |  |  | | --- | |  | | |  | | --- | |  |  |  | | --- | | Ate slightly more than breakfast; verbal encouragement needed | |
| |  | | --- | | 01:30 PM |  |  | | --- | |  | | Emotional support for C.B.; safety check for both | C.B. reassured; J.M. resting comfortably |
| |  | | --- | | 03:30 PM |  |  | | --- | |  | | |  | | --- | |  |  |  | | --- | | Post-conference with instructor | | Instructor appreciated teamwork and care quality for both clients |

**Data Sheet for Each Pt.**

**GUIDE – RESIDENT/PT. INFORMATION AND NEEDS**

The Information can be gathered from the patient/resident/Pt., family, Care Partner, Faculty Instructor

**Pt 1)**

AGE: 81 STAGES OF GROWTH & DEVELOPMENT: Older Adult

BIRTH PLACE: Canada

ETHNIC/CULTURAL BACKGROUND: Canadian

CULTURAL/RELIGIOUS: PRACTICES/OBSERVANCES: Unknown

PREVIOUS LIVING ARRANGEMENTS: Lived at home with daughter and son

PREVIOUS OCCUPATIONS/ROLES: Unknown

FAMILY MEMBERS/FRIENDS/VISITORS: Daughter and son (initials J.M. and A.M.)

REASON/S FOR BEING IN FACILITY: Pneumonia

LENGTH OF TIME IN FACILITY: 17 days

ABILITY TO SEE/HEAR/SENSE OF TOUCH/TASTE/SMELL: Adequate

ABILITY TO COMMUNICATE/DEVICES/APPROACH: Situational; not consistently effective

AWARENESS OF SURROUNDINGS/PLACE/OTHER PERSONS/SAFETY: Poor judgement

PRESENT FEELINGS & CONCERNS: Appears agitated

RE: SELF/CONDITION/PLACEMENT/FAMILY/ACTIVITIES/LIFE/COMMUNITY/ etc.

OVERALL APPEARANCE & ABILITIES/LIMITATIONS TO FUNCTION: Incontinent, unable to walk, dependent on assistance

**Pt 2)**

AGE: 68 STAGE OF GROWTH & DEVELOPMENT: Late Adulthood

BIRTH PLACE: Toronto, Canada

ETHNIC/CULTURAL BACKGROUND: Canadian

CULTURAL/RELIGIOUS: PRACTICES/OBSERVANCES: Unknown

PREVIOUS LIVING ARRANGEMENTS: Lakeside LTC

PREVIOUS OCCUPATIONS/ROLES: Team Leader (office)

FAMILY MEMBERS/FRIENDS/VISITORS: Friend G.P. daily

REASON/S FOR BEING IN FACILITY: DKA

LENGTH OF TIME IN FACILITY: 10 Days

ABILITY TO SEE/HEAR/SENSE OF TOUCH/TASTE/SMELL: Good

ABILITY TO COMMUNICATE/DEVICES/APPROACH: Slurred speech

AWARENESS OF SURROUNDINGS/PLACE/OTHER PERSONS/SAFETY: Confused

PRESENT FEELINGS & CONCERNS: Disoriented, wants to leave room

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RE: SELF/CONDITION/PLACEMENT/FAMILY/ACTIVITIES/LIFE/COMMUNITY/ etc.

OVERALL APPEARANCE & ABILITIES/LIMITATIONS TO FUNCTION: Chairfast, dizzy

SPECIFIC NEEDS OF THE **PT 1**

HOW MET/ SPECIFIC ASSISTANCE REQUIRED/PREFERENCES

*WHAT - WHEN - WHERE - HOW'*

*\*Students to complete the needs that relate to their Pt. weekly*

1. SAFETY NEEDS (PRECAUTIONS/ASSISTIVE DEVICES) (Specific/when, where, how): Precautions include fall risk due to inability to ambulate and poor awareness. No assistive devices observed.

PSW Role for Safety Needs Identify: Ensure bed rails are up, call bell is accessible, monitor catheter and repositioning to avoid bed sores.

2, MOBILITY/POSITIONING /EXERCISE/ AND REST (Including assistive devices/wheelchair/lifting/transfer/ambulation/repositioning/active ROM): Pt. is bedfast; requires total assistance with repositioning and mobility.

PSW Role for Safety Needs Identify: Assisted with repositioning every 2 hours; used bed bath.

3. HYGIENE: SKIN CARE - REPOSITIONING/CARE TO PRESSURE AREAS: (Observations-abnormalities/ frequency, type, positioning aids, appearance of all pressure areas, care to pressure areas/skin protective care): Pt. received bed bath under supervision; skin intact.

PSW Role for Safety Needs Identify: Performed full bed bath; checked for redness or pressure sores; applied lotion as needed.

4. FOODS/FLUIDS/DIET/SPECIAL DIET/SNACKS/USUAL INTAKE PATTERN/APPETITE (Ability to swallow-solids/liquids/ methods of assistance/positioning/cultural needs

preferences/frequency/amount/type of fluids/preferences; intake & output measurement) Pt. on regular diet. (Thicken fluid)

PSW Role for Safety Needs Identify: Assisted with breakfast and lunch. Provided moral support while feeding. Ensured Pt. was upright and seated for digestion.

5. NEED FOR COMFORT (Relief of pain/discomfort/distress/comfort measures): Pt. occasionally agitated.

PSW Role for Safety Needs Identify: Provided emotional reassurance. Maintained clean linens and comfortable position. Spoke supportively to Pt. and family.

6. NEED FOR AIR/BREATHING/OXYGEN: TPR (Previous range/present/ shortness of breath/cough - observations; colour face lips/nails/feet: - colour & temperature/edema /positioning e.g. extremities; positions for breathing;/ oxygen safety precautions/sputum specimen): Pt. breathing room air. No oxygen therapy needed.

PSW Role for Safety Needs Identify: Monitored breathing. Observed for signs of respiratory distress. Positioned for ease of breathing.

7. ELIMINATION NEEDS-URINARY ELIMINATION PATTERN: frequency, observations-amount; colour; odour; clarity; incontinence; assistance/what used to encourage/place/devices - catheter, etc. Urine specimen/Diabetic Urine testing): Pt. uses indwelling catheter.

PSW Role for Safety Needs Identify: Monitored catheter output. Ensured bag is below bladder level. Reported color and clarity to nurse.

8. ELIMINATION NEEDS-BOWEL ELIMINATION PATTERN: frequency, observations - amount; colour; consistency; other/incontinence/assistance/ place/ devices - ostomy; specimens): Pt. wears diaper due to incontinence.

PSW Role for Safety Needs Identify: Checked and changed diaper regularly. Cleaned perineal area carefully. Noted any abnormalities in color or consistency.

9. REHABILITATION/SOCIAL INTERACTION/LEISURE & STIMULATION

NEEDS/INTERESTS/PRACTICES-NEEDS FOR EMOTIONAL SUPPORT

(Identify feelings/ moods/motivation/coping methods/goals/self-concept/adjustment to changes/and specific type of supportive/communication /assistance required): Limited interaction; emotional needs present.

PSW Role for Safety Needs Identify: Provided emotional support to both patient and family. Encouraged cooperation with care. Offered comforting conversation.

10. ADDITIONAL TREATMENTS/SUPPORT ACTIVITIES (WITHIN PSW ROLE) FOR PT.: Bed bath; emotional support.

PSW Role for Safety Needs Identify: Assisted with hygiene care. Followed nurse and instructor guidance. Maintained patient dignity and safety.

SPECIFIC NEEDS OF THE **Pt 2**

HOW MET/ SPECIFIC ASSISTANCE REQUIRED/PREFERENCES

*WHAT - WHEN - WHERE - HOW'*

*\*Students to complete the needs that relate to their client weekly*

1. SAFETY NEEDS (PRECAUTIONS/ASSISTIVE DEVICES) (Specific/when, where, how): High fall risk, needs 1:1 supervision

* PSW Role for Safety Needs Identify: Took out on recliner chair per RN order, constant observation

2, MOBILITY/POSITIONING /EXERCISE/ AND REST (Including assistive devices/wheelchair/lifting/transfer/ambulation/repositioning/active ROM): Two-person transfer, chairfast

* PSW Role for Safety Needs Identify: Transferred with RN, positioned in recliner-chair safely

3. HYGIENE: SKIN CARE - REPOSITIONING/CARE TO PRESSURE AREAS: (Observations-abnormalities/ frequency, type, positioning aids, appearance of all pressure areas, care to pressure areas/skin protective care): Received bed bath this week

PSW Role for Safety Needs Identify: Gave full bed bath with nurse; checked skin – intact

4. FOODS/FLUIDS/DIET/SPECIAL DIET/SNACKS/USUAL INTAKE PATTERN/APPETITE (Ability to swallow-solids/liquids/ methods of assistance/positioning/cultural needs

preferences/frequency/amount/type of fluids/preferences; intake & output measurement): Needs full feeding assistance (Thicken fluid)

PSW Role for Safety Needs Identify: Fed breakfast and lunch, encouraged intake

5. NEED FOR COMFORT (Relief of pain/discomfort/distress/comfort measures): Confused, restless

PSW Role for Safety Needs Identify: Offered calm communication; used iPad with favorite shows for comfort

6. NEED FOR AIR/BREATHING/OXYGEN: TPR (Previous range/present/ shortness of breath/cough - observations; colour face lips/nails/feet: - colour & temperature/edema /positioning e.g. extremities; positions for breathing;/ oxygen safety precautions/sputum specimen): No oxygen, no distress observed

PSW Role for Safety Needs Identify: Monitored breathing and skin color

7. ELIMINATION NEEDS-URINARY ELIMINATION PATTERN: frequency, observations-amount; colour; odour; clarity; incontinence; assistance/what used to encourage/place/devices - catheter, etc. Urine specimen/Diabetic Urine testing): Indwelling catheter

PSW Role for Safety Needs Identify: Provided peri-care; ensured catheter safety

8. ELIMINATION NEEDS-BOWEL ELIMINATION PATTERN: frequency, observations - amount; colour; consistency; other/incontinence/assistance/ place/ devices - ostomy; specimens): Uses brief as needed

PSW Role for Safety Needs Identify: Monitored bowel status; no abnormalities

9. REHABILITATION/SOCIAL INTERACTION/LEISURE & STIMULATION

NEEDS/INTERESTS/PRACTICES-NEEDS FOR EMOTIONAL SUPPORT

(Identify feelings/ moods/motivation/coping methods/goals/self-concept/adjustment to changes/and specific type of supportive/communication /assistance required): Frequent confusion and distress

PSW Role for Safety Needs Identify: Regularly reassured, engaged with shows, gave supervised hallway time

10. ADDITIONAL TREATMENTS/SUPPORT ACTIVITIES (WITHIN PSW ROLE) FOR CLIENT: Hallway time in recliner-chair, iPad viewing

PSW Role for Safety Needs Identify: Coordinated with nurse, used safe equipment, maintained calm environment

Reference

Sorrentino, S.A., Remmert,L., Wilk, M.J., Newmaster, R. (2013). *Mosby Canadian textbook for*

*the support worker* (3rd Canadian ed.). Toronto: Elsevier