

Service Users Name: Keith Murphy

DOB: 1/9/1967

Care Plan For: Eating and Drinking Care Plan No:1
The problem or need I have is: Keith is Nil by Mouth and on PEG feeds with regime and under the care and supervision of Dietician.
How you can help me this: <ul style="list-style-type: none">• No known allergies• Bed bound due to frailty, requires assistance with lots of encouragement from care staff• Has PEG in-situ and has prescribed regime• If any further changes to general condition, the nurse is to refer Keith to his GP• Staff to ensure they document the diet and fluid intake on Keith's food and fluid chart• To be referred to Dietician and also inform GP if he is constantly losing weight• The nurse to evaluate and review the care plan monthly and when required.
Prepared by: Elton Jones Date 23/06/19

Title: Mr Murphy Care Plan	Author: Clinical Training Team	
Sign Off: Shah Faisal	Approved on: 19.08.19	Version: 1.0

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Care Plan For: Mobility/Falls Care Plan No:2
The problem or need I have is: Keith is bedbound and at risk of falling out of bed
How you can help me this: <ul style="list-style-type: none">• Requires assistance from 2x care staff using a birdle hoist and medium sling for all transfers• Keith is nursed on a low profiling bed for his safety as he is at risk of falling out of bed• He should have a crash mat in place at all times• Requires 1 hourly checks as he always rolls out of bed and on to the crash mat• Bedrails and bumpers are not to be used as he will try and get out of bed by climbing over the rails.• The nurse to evaluate and review the care plan monthly and when required.
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Care Plan For: Personal Hygiene Care Plan No:3
The problem or need I have is: I cannot maintain my personal hygiene and cleanliness on my own
How you can help me this: <ul style="list-style-type: none">• He requires two members of staff to assist with ADL's such as washing, dressing, bathing, showering on a daily basis• He likes to get up at any time once he is awake• Staff are to help him choose what to wear as he is unable to do this himself• He wears pads as he is doubly incontinent• He will need cleaning after opening his bowels or wetting regularly to reduce the risk of developing pressure sores• He requires medium sized pads• Appropriate referral to the incontinence nurse can be made by staff if required• The nurse to evaluate and review the care plan monthly and when required.
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Care Plan For: Medication Care Plan No:4
The problem or need I have is: I am unable to take my own medication. I need someone to help me. I am nil by mouth and take medication via PEG
How you can help me this: <ul style="list-style-type: none"> • The nurse on duty is to administer medication according to NMS guidelines • To give medication via PEG • All medication to be crushed if in tablet form • Nurses to observe for any side effects and liaise with GP if any concerns • The nurse to evaluate and review the care plan monthly and when required.
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Care Plan For: Communication/Cognition

Care Plan No:5

The problem or need I have is: Keith is not able to communicate verbally due to brain injury

How you can help me this:

- Keith has a cognitive impairment, he will need support for decision making and his next of kin should be involved to act in his best interests for complex decisions.
- His first language is English. He does understand what staff say to him although he cannot respond.
- Staff to re-orientate him by reminding him of day, date, time and place as he can become easily confused.
- Ensure he is treated as an individual with respect and dignity and ensure environment is safe.
- Staff to introduce themselves and remind him who is who.
- Staff to observe Keith for any facial signs and gestures when verbally communicating with him and report any changes to nurse in charge.
- He is sometime able to communicate his needs using facial expression
- He can become agitated and restless. Trained staff should administer his medication regularly as per prescription.
- The nurse to evaluate and review the care plan monthly and when required.

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Care Plan For: Challenging Behaviour

Care Plan No:6

The problem or need I have is: Keith can display challenging behaviour at times, especially during care.

How you can help me this:

- Staff to explain calmly during care intervention what they are going to do. If he is still agitated to leave him for 15 – 20 minutes to calm down and then return.
- He can be too hot, hungry or in pain so carers should notify the nurse if he becomes aggressive.
- Keep the window in his room open for fresh air to keep him cool.
- Staff to reassure him when distressed and sit with him for a while.
- Encourage relatives to visit as this can help calm him.
- Staff to complete ABC documentation and hand incidents over to next shift.
- He tends to roll out of bed. If agitated he is to stay on the crash mat with two member of staff supervising him. He will be moving, kicking, fighting and trying to grab items. It is difficult to care for him at these times. Trained staff can administer medication prescribed to calm him if required.
- The nurse to evaluate and review the care plan monthly and when required.

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Care Plan For: PEG site care

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Care Plan No:7
The problem or need I have is: Keith is at risk of infection due to his PEG site or pulling it out.
How you can help me this: <ul style="list-style-type: none">• Staff are to wash hands thoroughly and wear an apron and gloves when handling PEG tube and surrounding areas.• Staff are to check site every day during personal care. Any redness or sign of infection to be reported to nurse in charge.• Once daily staff who are trained to do so are to clean PEG site as per guidelines.• Staff are to contact GP if any concerns.• Staff are to hide the PEG tube under his clothes or blanket to avoid him finding it easily and pulling at the tube.• If the tube comes out staff are to remain calm and contact the nurse in charge immediately.• The nurse to evaluate and review the care plan monthly and when required.
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Version	Date	Sign off	Summary of changes
V1.0	19.08.19	Shah Faisal	New Document

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