

**FACILITY NAME:** Oneida Center  
**ADULT DAY HEALTH CARE PROGRAM**

**SUBJECT: Person-Centered Care Plan**

**POLICY:**

**A written Person-Centered Care Plan will be developed, jointly with the registrant and/or authorized representative, and will be updated semi-annually, as needed and/or as requested by the registrant**

**PURPOSE:**

1. To meet the registrant's clinical and support needs and strengths as identified through an assessment of functional needs
2. To meet the registrant's personal and cultural preferences
3. To meet the required State and Federal Regulations

**GENERAL INFORMATION:**

1. The Care Plan will be written in plain language that is accessible to registrants with disabilities and who are not proficient in English

**PROCEDURE:**

**RESPONSIBILITY**

**ACTION**

RN/Pertinent Staff

1. Complete comprehensive functional assessment

IDT/Registrant and/or  
Requested Representatives

2. Develop Person-Centered Care Plan
  - a. Identify registrant goals and desired outcome:
  - b. Incorporate staff interventions to facilitate goal outcome
3. If registrant's request/goal cannot be met, establish, with registrant/family member, a mutually agreed upon time schedule for status reports/resolution
4. Discuss with appropriate disciplines to evaluate issue(s) and develop appropriate plan of action
5. Discuss plan of action with registrant or family member within agreed time frame
  - a. If accepted, implement plan of action
  - b. If not accepted, continue to explore alternative approaches and implement

**DATE:**

**SUPERSEDES:**

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**FACILITY NAME: Oneida Center**

**SUBJECT: Person-Centered  
Care Plan**

**ADULT DAY HEALTH CARE PROGRAM**

**PROCEDURE: (cont'd)**

RESPONSIBILITY

ACTION

RN/Pertinent staff

6. If issue cannot be resolved, apprise Director of all details related to meeting person-centered goals and registrant's/family member's response to proposed plan of action

DIRECTOR

7. Meet with pertinent staff, registrant and/or family member to develop acceptable plan of action

PERTINENT STAFF

8. Implement plan of action
9. Document all details in Medical Record including:
- a. Registrant's request
  - b. Concerns related to meeting request
  - c. Action(s) taken including discussions with registrant/family member
  - d. Outcome

10. Submit report to Director

PERTINENT STAFF/DIRECTOR

11. Provide a written reply to the registrant/representative who initiated the concern
12. Track concerns, patterns or trends related to meeting person-centered goals
13. Incorporate concerns, recurrences, patterns and/or trends in Annual Report

QUALITY ASSURANCE COMMITTEE

14. Recommend further investigation, corrective action and/or procedural changes, if appropriate

**DATE:**

**SUPERSEDES:**

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## **THERAPEUTIC PROGRAM PROTOCOL**

**Name of Program:** Trips

**Program Focus: (Domain)** Physical, Emotional, Behavioral , Educational

### **A. Goals of Program**

1. Stress Relief
2. Increase critical thinking
3. Promote individual decision making

### **B. Criteria for Registrant Selection**

1. Expresses interest in attending
2. Registrants must be medically cleared by nurse

### **C. Media (Items Needed)**

1. Nursing Medical Kit for any emergencies
2. Appropriate attire for weather
3. Winter: Coats, scarves, gloves, hats
4. Summer: Caps, Sombreros, Fedora's
5. Sun Screen during the summer

### **D. Format or Method of Operation**

1. Location varies
2. Please locate facility trip form, which will allow staff to write down list of registrants attending the trip. Please evenly assign registrants to a staff member
3. Trip details should be clear prior to leaving facility. A 1 to 7 ratio is standard for any outing. A list of registrants going on the trip should be created. If a registrant is at high risk for elopement it should be noted on the list and staff should be made aware.
4. The time of departure from facility should be noted. The time of arrival to location should be noted.
5. A head count prior to departure from point A to point B should be conducted
6. Team should discuss the weather a week prior to trip to see if it will be appropriate. It will not be canceled, but it will be rescheduled if needed. Registrants should be told about the rescheduling of any trip as soon as possible.
7. All staff should be made aware of any rescheduled trips as well.

### **E. Role of the Leader**

1. Provide visual/verbal cues as needed
2. Provide assistance if needed

### **F. Procedure for Admitting and Discharging**

1. admitting: Registrants express interest in activity.
2. discharging: When registrant is no longer able to participate, expresses a desire/need to discontinue and/or acts out behaviorally and is a disruption to activity and to peers/ or not medically cleared.

### **G. Documentation Requirements:**

1. Care Plan reflects individualized goals related to activity participation;
2. Progress notes/assessments reflect level of participation, approaches/interventions applied to meet individualized needs, registrant response and beneficial outcomes.

Revised 5/19

## PERSON CENTERED CARE PLAN

The programs implemented at our center are for the benefits of our registrants and their individual needs. Activities should provide adaptations or modifications for each individual as needed.

**PURPOSE:** The facility must provide, based on the comprehensive assessment and care plan and the preferences of each registrant, an ongoing program to support registrants in their choice of activities, both facility-sponsored group and individual activities and independent activities designed to meet the interests of and support the physical, mental and psychosocial wellbeing of each registrant.

### A. GOALS & PROCEDURE

1. Reduce Stress & Anxiety
  - A. Registrants can become stressed or anxiety may arise when they feel they can not complete a task and may self isolate. Provide reassurance and provide assistance. Explain in detail; verbalize or provide visual cueing depending on registrants needs. **ie: During mobility exercises, if someone is in a wheelchair, provide a modification. If someone has difficulty hearing during groups, stand closer to them so that they can hear you. If someone has a visual impairment, they should be closer to group leader. During arts and crafts, provide tape to hold down paper if needed. Hand over hand technique. The registrant is touching the materials, the helper is using their hands as a guide to complete activity.**
2. Communicate
  - A. Registrants may have trouble participating in certain activities. Discuss with team, registrant, and/or caregiver, options for how they can participate. When a person finds another way to overcome a challenge its very uplifting.
3. Community outings
  - A. When going on a community outing, speak with manager in charge of facility to make sure it meets the needs of all of your registrants. Ie; is the place handicap accessible? Are bathrooms near by? Are there chairs or benches for registrants to sit if they get tired? Is there a place for them to eat or drink water if needed?
  - B. Transportation that meets registrants needs

### B. Role of the Leader

1. Provide visual/verbal cues as needed
2. Provide assistance if needed

### C. Procedure for Admitting and Discharging

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1. Care Plan reflects individualized needs & goals related to activity participation;
2. Progress notes/assessments reflect level of participation, approaches/interventions applied to meet individualized needs, registrant response and beneficial outcomes.

<b>POLICY:</b>			<b>POLICY NO:</b>	
<b>Dept:</b> NSG	RECREATION SERVICES	<input type="checkbox"/> New <input checked="" type="checkbox"/> Revised	<b>Last Date Revised:</b> 5/19 <b>Prev. Date Revised:</b> <b>Creation Date:</b> 11/17	
<b>RELATED FORMS:</b>				

**POLICY:** The facility must provide, based on the comprehensive assessment and care plan and the preferences of each registrant, an ongoing program to support registrants in their choice of activities, both facility-sponsored group and individual activities and independent activities designed to meet the interests of and support the physical, mental and psychosocial wellbeing of each registrant.

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#### PROCEDURE:

1. The activity program consists of individual, small and large group activities that are designed to meet the needs and interests of each registrant and include:

- a. Activities that stimulate the cardiovascular system and assist with range of motion, such as exercise, movement to music, and physical games.
- b. Intellectual and educational activities that are mentally stimulating, such as current events, trivia, word games, book reviews.
- c. Creative and expressive activities, such as arts and crafts, ceramics, painting, drama, creative writing, poetry and music.
- d. Social activities are scheduled to increase self-esteem, to stimulate interest and friendships, and to provide fun and enjoyment. Activities include, but are not limited to coffee socials, birthday and holiday parties, live entertainment, cultural / themed meals and events.
- e. Spiritual programming scheduled to meet the religious needs of the registrants.
- f. Community outings, weather permitting
- g. Outdoor activities, weather permitting

2. Activities are not necessarily limited to formal activities being provided only by activities staff. Other facility staff, volunteers, visitors, registrants, and family members may also provide the activities; in addition to engagement in the community

3. Information regarding scheduled activities are posted on a bulletin board in a common area and provided to each registrant. Calendars are handed out in preferred language

4. Individualized, independent and group activities are provided that:

- a. Reflect the schedules, choices and rights of the registrants;
- b. Are offered at hours convenient to the registrants while at the program.
- c. Reflect the cultural and religious interests, hobbies, life experiences, and personal preferences of the registrants; and
- d. Appeals to all genders and non-binary, as well as those of various age groups attending the program.

5. Registrants are encouraged, but not required, to participate in scheduled activities. If they decide to want to do something else they can.

6. When a facility has locked/secure doors, registrants can approach employees for outdoor interests and activities.

7. Registrants interested in community activities outside of facility setting can speak with recreation director or social worker to provide assistance if needed.

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