

Resident Care Plan

Family and Friends Council
February 16th, 2023

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Fixing Long-Term Care Act, 2021

Difference between
‘Care Plan’
&
‘Plan of Care’

Care Plan: *Section 27 Reg.*

- Begins prior to admission (admissions coordinator/nurse)
- Completed **within 24 hours of admission.**
- Must include:
 - **Risks** to themselves/others (i.e falls, behavioural triggers) and mitigating **interventions**
 - Type and **level of assistance** required relating to activities of daily living.
 - Customary **routines and comfort** requirements.
 - **Drugs** and **treatments** required.
 - Known **health conditions**, including allergies, and interventions.
 - **Skin** condition and interventions.
 - **Diet** orders, including food texture, fluid consistencies and food restrictions.

Additional requirements

- Must be **documented**
- Must be **clear** for direct care staff-**too much content causes confusion**
- Resident or their substitute decision-maker (SDM), if any, and any other persons designated by the resident or SDM may **provide input** in reviews/revisions and are provided Direct care staff are kept up to date of the contents and have convenient and immediate access
- Upon resident **reassessment**, the care plan is reviewed and revised when;
 - Care needs change
 - Care in plan no longer necessary
 - Care in plan has not been effective

Plan of Care: Section 28 & 29^P Reg.

- Resident demographic information
- Interdisciplinary assessments (to be completed by 14 days after admission)
- Initial plan of care to be completed by 21 days
- Goals care is intended to achieve
- Clear direction for staff
- Who was involved in the development (source of information)

Additional requirements (based on assessments)

- All information included in initial 'care plan' AND;
- Customary routines.
- Cognition and communication abilities, including hearing , language and vision.
- Mood and behaviour patterns, including wandering and triggers, psychological well-being
- Continence, including bladder and bowel elimination.
- Seasonal risk relating to heat related illness, including protective measures required to prevent or mitigate heat related illness.
- Dental and oral status, including oral hygiene.
- Nutritional & hydration status, including height, weight and any risks relating to nutritional care /hydration/nausea/vomiting
- Skin and foot condition
- Activity & sleep patterns and preferences
- Cultural, spiritual and religious preferences and age-related needs and preferences.
- Potential for discharge.

Thank you

Questions?