Comprehensive Care Plan

Date	Physical & Psychosocial Needs	Goals/Objectives	Approaches/Interventions	Responsible Discipline
	The resident demonstrates movement behavior that may be interpreted as WANDERING, PACING OR ROAMING **related to** the diagnosis(es) of: _____ _____ and problems understanding the immediate environment. Symptoms are **manifested by**: CHECK ALL THAT APPLY ❒ Attempting to leave the facility without a responsible escort (elopement). ❒ Pacing, roaming or wandering in and out of peers' rooms. ❒ Engaging in "theme behavior," that is believes he/she is in another time and place with specific responsibilities (i.e., must get in the car to go to work or church services). ❒ Becoming agitated, oppositional and combative when re-directed. ❒ The resident is a new admission and not familiar with his/her environment. ❒ Demonstrating signs and symptoms of mood distress, i.e., poor appetite, insomnia (often up at night, wandering and pacing, anxious). ❒ The resident also requires psycho-active medication to help manage mood and behavior symptoms. ❒ The resident is presently free of physical restraints and/or involved in the restraint reduction program. ❒ Other: _____ _____ _____ _____ _____ _____ Strengths and Abilities: _____ _____ _____	❒ The resident will respond to staff direction to re-direct attention from a potentially problematic situation (such as elopement or entering a peers' room) when any difficult behavior occurs (by the next 90 day review... ❒ The resident will remain safely engaged in activity-focused care, a meaningful intervention, or social interaction without making an attempt to elope from the facility (by the next 90 day review)... ❒ The resident will _____ _____ _____ _____ _____ _____ _____ by...	**Implement "preventive" intervention strategies**: ❒ Assess for potential elopement/unauthorized departure risk. ❒ Post a picture of the resident at/near the front desk and/or nursing station in a discrete place identifying possible elopement risk. Notify staff of risk potential. ❒ Make rounds/room checks per facility protocol to minimize chance of unauthorized leave. ❒ Use/apply ELECTRONIC MONITORING DEVICE. Notify responsible party, as appropriate. ❒ Engage the resident in discussion about work. Ask questions about job/work role/career responsibilities. Engage the resident in small groups by explaining that it is time for a business meeting or club session. Avoid questions such as, "Do you want to come to group?" ❒ Provide simple, clear directions to help the resident know what is expected. Phrase statements using "positive," not negative language. EXAMPLE: "I need your opinion about this. What do you think about...?" or "Please come over here and take a look at this." ❒ Engage the resident in walking/movement/keeping busy/exercise programs. Go for a walk around the neighborhood or in a mall, as appropriate. **If the resident leaves the building or goes in a peer's room or becomes aggressive, redirect by:** ❒ Limiting the number of staff who redirect the resident. If another person is needed for safety, the second person should remain out of sight, in the background or behind the primary caregiver. Do not overwhelm the person. ❒ Using distraction or "theCAAeutic fib" techniques, "Oh, I'm glad I found you! The boss has assigned a work project and I need your expertise..." or "I believe I lost my clipboard. I need your help to find it" or "Thank goodness you are here. You have a phone call [visitor] at the front desk. Come on I'll help you get there..." Avoid saying, "No" or "You don't belong here" or using negatives in general. Tell the resident what can be done. Think and speak in positives. ❒ Walk in the same direction as the resident. Do not initially try to "force" the person to change direction. Chat with the resident about his/her "theme." Eventually, use a strategy such as a theCAAeutic fib to bring the person to the area where you would like him or her to be. ❒ _____ _____ _____ _____ _____ _____ _____	IDT ▼ ▼ ▼ ▼ soc work act IDT act IDT IDT ▼ ▼ ▼
SwCG, Inc. ©	**Resident**	Wandering Risk of Elopement	**Behavioral Symptoms** CAA 9	Care Plan **No. 39** Feb 9, 2011

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