POLICY

It is the policy of this Community to develop and maintain for each resident a specific Service Plan, based on both a pre-move-in assessment and subsequent assessments, to be conducted no less than every 90 days, or sooner upon a change of condition. The resident Service Plan will reflect the preferences, functional ability/level of participation, and services provided in activities of daily living, health/personal services, and social services. Each Service Plan will also indicate resident specific interventions used by Community staff in order to simultaneously promote independence, individuality, privacy and dignity in a home-like atmosphere.

It is the expectation that the Executive Director, Community Licensed Nurse and/or other qualified assessor will direct, oversee and actively participate in the initial evaluation process. The community Executive Director and Licensed Nurse will participate fully in the Assessment and Service Planning process in its entirety. Limited exceptions will be when the Executive Director is unavailable. For those circumstances, the Executive Director will be responsible for appointing an appropriate designee.

PROCEDURES

Evaluations:

- **Initial** - The Executive Director, designee, or other qualified assessor will conduct an initial evaluation for each potential resident, prior to move-in. The purpose of the evaluation is to assist the Community in identifying resident preferences and abilities, and determining the Community’s ability to provide/coordinate needed care and services. The evaluation will include input from the Resident Care Coordinator/Licensed Nurse, the potential Resident and/or others requested by the Resident, and/or others required by law. If a period of 14 (fourteen) days or more has lapsed between the initial assessment and the actual move-in date, or if the Resident has experienced a change in his/her condition, the Evaluation must be reviewed to ensure its accuracy. The Licensed Nurse is required to participate if there are required nursing services. A Service Plan will be created upon move-in.

- **Ongoing** - Resident records and status will routinely be reviewed to determine any need for an additional assessment update, Service Plan update, and/or coordination of care.
  - Service Plans will be reviewed within 30 days of move in.
  - Service Plans will be reviewed upon significant change of condition.
  - Service Plans will be reviewed 90 days from move in and every 90 days thereafter.

Service Plan Updates

- Community staff providing care for the Resident will read all service plans to:
  - Identify reportable or potential problems and related service needs;
  - Identify important resident preferences and choices;
  - Identify individual resident capabilities, strengths, and important characteristics that might contribute to independence and well-being;
Organize work and coordinate services;
Receive clear and consistent direction; and
Create documentation for accountability.

- Community staff will update the service plan to reflect newly discovered/hidden resident capabilities, strengths, change in condition, and changes in any service needs and important characteristics that might contribute to the Resident’s independence and well-being as they occur and/or are identified.
- Any Service Plan changes will be placed in the 24 Hour Communication Book for 1 week. All community staff will read and implement changes, and initial on the Service Plan page, they have read the changes. The new Service Plan will be printed and filed in the Service Plan binder.
- Community LN will conduct routine reviews of Service Plans in accordance with the QA process and state regulations to ensure that they reflect Resident needs.

Service Plan Reviews and Care Conferences
- The Service Plans will be reviewed and updated 30 days after move-in, and 90 days after move-in, and at least 90 days thereafter, or sooner when a significant change in condition occurs. Service Plan review (assessment), will be conducted with resident, family members, POA’s, caseworkers, etc. Invitee will be notified in writing at least 2 weeks (14 days) before each 90 day review meeting, and invited and encouraged to participate. Service Plan reviews and meetings will be conducted more frequently is there is a significant change in condition.
  - If there is a change in Level of Care (LOC) charges, resident and/or family/responsible party will be informed of the increase or decrease in care level at the time of the care plan meeting.
    ▪ They will be informed of the new rate, and the effective date of the change.

RELATED POLICIES/REFERENCES
Change In Condition and Monitoring
Health Services Review Schedule Policy
Incident Report