

**SADS Stay-At-Home Service Plan**

Participant  
Schedule

Age

Current Date  
Date of Enrollment

**A person-centered service plan requires the input of the participant and/or caregiver. Has the participant/caregiver provided their consent to receive social adult day services via telephone and/or virtually during the stay-at-home orders related to the public health emergency of COVID-19?**

**COGNITIVE/PSYCHOSOCIAL/SPIRITUAL/COMMUNICATION STATUS**

<b>LONELINESS SCALE</b>			
<b>Score</b>	<b>Services</b>		

<b>SOCIALIZATION</b>	
<b>Activity</b>	<b>Frequency</b>

**Critical and urgent in-home needs:**

<b>REPORTED FUNCTIONALITY</b>	
<b>ADLs</b>	<b>IADLS</b>
<ul style="list-style-type: none"> <li>• Mobility</li> <li>• Transfers</li> <li>• Toileting</li> <li>• Continence</li> <li>• Eating</li> <li>• Self-administration of medication</li> </ul>	<ul style="list-style-type: none"> <li>• Getting food and supplies</li> <li>• Using telephone</li> <li>• Smart phone or ipad/lap-top/computer</li> <li>• Internet</li> <li>• Banking/paying bills</li> <li>• Household chores</li> </ul>

**Case assistance, coordinating with case managers and caregiver services needs:**

**Program staff signature, title and date:**



## SADS Service Plan

Participant **Mary Jones** Current Date **6/2/11**  
 Schedule **M,W,F w/transportation** Age **80** Date of Enrollment **5/10/11**

### **MEDICAL/NUTRITION/SENSORY/MEDICATION/PAIN STATUS**

Mary has arthritis, high blood pressure and a history of falls. She has a regular diet, is allergic to strawberries and wears dentures. She wears glasses; hearing appears within normal limits and complains of being cold. Medication is taken at home for high blood pressure and Mary carries Tylenol with her for pain.

### **COGNITIVE/PSYCHOSOCIAL/SPIRITUAL/COMMUNICATION STATUS**

Mary is generally alert and pleasant with occasional forgetfulness. She lives alone, her daughter is her primary caregiver, and many family members are involved. She raised 5 children and volunteered at her Catholic church. Mary can identify her needs and verbalize them to staff.

### **GOALS**

Expected Outcome	Outcome Criteria	TD	DA
Using her walker safely	Mary will be active in the Walkers Group	9/11	
Pain free	Mary will take her Tylenol as needed	9/11	

*TD: Target Date      DA: Date Achieved*

### **SOCIALIZATION**

Activity	Level of Engagement
Walkers group	Active
Devotions	Active
Bakers club	Active

**Capacity for Self-esteem** (*Interacts with others and seeks to establish, maintain, or improve the participant's sense of usefulness to self and others, the desire to use his or her physical and mental capabilities to the fullest extent, and his or her sense of self-respect*):

Mary used to organize monthly church suppers. She will be asked to contribute a favorite recipe for the Bakers club and lead the group in preparing it.

### **FUNCTIONAL ASSESSMENT/STAFF INTERVENTION**

ADLs	Level of Care
<ul style="list-style-type: none"> <li>• Mobility: uses (new) walker</li> <li>• Transfers: uses walker for standing/sitting</li> <li>• Toileting: requires help with clothing</li> <li>• Contenance: wears pads</li> <li>• Eating:</li> <li>• Self administration of medication</li> <li>• Supervision and Monitoring</li> </ul>	<ul style="list-style-type: none"> <li>• Physical cues</li> <li>• Physical cues</li> <li>• Minimal Assist</li> <li>• Monitoring/toileting schedule</li> <li>• Independent, <b>NO STRAWBERRIES</b></li> <li>• Prompt if she appears to be in pain</li> <li>• Verbal cues/encouragement</li> </ul>

**Capacity for independence and self care** (*Use of existing capacities, develops new capacities and interests and compensate for existing or developing impairments in capacity*):

Mary has just been told she needs to use her walker at all times due to recent falls at home. She can be unsteady, is uncomfortable using the walker, and is afraid of falling. Mary will be able to practice using the walker and feel safe in the program area.

**Participant/Caregiver signature:**

**Date:**

**Program staff signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_