**POLICY: RESIDENT BEHAVIOR: PHYSICAL ALTERCATIONS**

Policy:

It is the policy of Winning Wheels, Inc. to assess each resident for actual or potential behavior issues which may endanger themselves, other residents, visitors or staff members. This assessment will be conducted as part of the Resident Assessment Instrument. No resident will be maintained in the facility if the behavior issue cannot be controlled and the resident becomes a serious threat or endangerment to himself or others.

Overview:

It is acknowledged that one of the facility’s primary duties is to protect its residents, visitors and staff from harm, to the extent possible. This duty begins at the time of the pre-admission screening. An on-site screening provides the opportunity to see the resident first hand and interview prior caregivers. Available records are reviewed for indications of behavior issues. This information will be included in the narrative portion of the pre-screening. Discussions may be held with the resident, family, physician or social worker to determine if the resident’s needs can be met in the facility. A resident should be admitted based on a determination that his/her needs reasonably can be met by this facility. The need to make a determination on whether the facility can continue to care for a resident can be a complex situation. If, due to inappropriate behaviors such as wandering, physical abuse, verbal abuse, or some other maladaptive behavior, the facility finds it may not be able to meet the needs of the resident or cannot meet their needs, the following steps should be taken:

Procedure:

1. Contact the physician and family and openly discuss any concerns regarding the ability to continue the care for the resident. Honest, open communication is necessary to keep all parties involved in meeting the resident’s needs.

2. Conduct an assessment of the resident’s current behaviors and what interventions have been used. Revise the resident care plan to reflect the specific plans developed.

3. Document all attempts at redirection, and the plan of care responses. Include documentation on the interventions the facility staff has tried and specifically how the resident responded to these interventions.

4. Speak to the physician and family about having a psychiatric evaluation done, if necessary, to provide some insight and direction in the care of the resident.

5. Advise the family of the limitations of a long term care facility i.e.: we cannot assign someone to sit with a resident 24/7, as it simply is not feasible.

6. Advise the family that while involuntary discharge is not the first resort, it may be the last resort. Share with the family everything being done in an attempt to meet the needs of this resident while ensuring the safety of all residents.

7. It may be appropriate to contact the State Ombudsman assigned to the facility to provide an update of the measures taken, if it appears involuntary discharge may be necessary.