

RAPs Requiring Social Services Intervention

Delirium	<p>Assess and intervene if caused by:</p> <ul style="list-style-type: none"> • isolation, • recent loss of family/friend, • depression/sad anxious mood, • recent relocation and/or • sensory losses.
Cognitive Loss or Dementia	<ul style="list-style-type: none"> • Develop strategies to assist staff. • Teach staff and resident how to deal with behavioral manifestations of cognitive loss. • Develop a behavior control program. • Assess if problem could be remedied through improved staff education, referral to OT/RT for training or an innovative counseling program. • Assess if emotional, social, excess disability and/or environmental factors play a role in cognitive decline.
Visual Function	<ul style="list-style-type: none"> • Referral to optometrist/ophthalmologist if necessary. • Evaluate for appropriate use of visual appliances: glasses clean, labeled, reading glasses not used for walking. • Evaluate for effect of sad or anxious mood on visual dysfunction. • Provide appropriate devices for level of vision: large print calendar, clock, high wattage light, large print signs. • Refer to activities if necessary.
ADL	<ul style="list-style-type: none"> • Evaluate the effect of mood or behavior problems on ADL performance and motivation. • Develop a behavior control program to improve functioning.
Incontinence	<ul style="list-style-type: none"> • Evaluate the effect of incontinence on psychosocial well-being and social interactions and assist resident with coping with the dysfunction.
Psychosocial Well-Being	<ul style="list-style-type: none"> • Evaluate the effect of mood and behavior problems on feelings about self and social relationships. • Develop treatment program to focus on mood and behavior problems. • Develop corrective strategies to address distressing relationships and concern about loss of status.
Mood State	<ul style="list-style-type: none"> • Evaluate the need for new or altered care strategy when manifestations of mood state problem are present: sad mood; feelings of emptiness, anxiety or unease; loss of weight; tearfulness; agitation; aches and pains; bodily complaints and dysfunction.
Behavior Problem	<ul style="list-style-type: none"> • Develop alternate interventions and treatments to address behavior problems. • Identify the various factors involved in the manifestation of problem to identify behaviors that could be resolved and eliminate the problem.
Psychoactive Drug Use	<ul style="list-style-type: none"> • Develop monitors and care plan to address possible decline or impairment of cognitive and behavior status.
Physical Restraints	<ul style="list-style-type: none"> • Evaluate conditions associated with problem behaviors and physical restraint use: delirium impairment, cognition impairment, unmet communication needs, psychosocial needs, sad or anxious mood, resistance to treatment, medication, nourishment, motor agitation, confusion, gait disturbance. • Evaluate resident's response to restraint use. • Evaluate the philosophy, values, attitudes and wishes of the resident regarding restraint use. • Develop monitors and care plan to address possible negative outcomes from restraint use.