

CENTRAL CARE
POLICIES AND PROCEDURES

NUMBER: 2.14A

DATE Revised: August 2010

Change of Status Procedure

- **Call 911 at anytime staff believes an emergent condition exists.**
Call 911 if any of the following conditions are present:
 1. Consumer seems to be having trouble breathing- Respiratory distress
 2. Chest pain is reported
 3. Severe abdominal pain suggestive of an emergency
 4. Loss of consciousness or significant decrease in level of consciousness.
 5. Abrupt change in mental status with increase in psychiatric symptoms which may include suicidal ideation, aggressive/assaultive behavior, and/or psychotic behavior which indicates consumer is a danger to self or others
 6. Frequent/prolonged seizure activity- more than 1 seizure back to back- OR – new onset of seizure activity in a consumer who does not have a history of seizure activity
 7. Very high or low glucometer reading- 350 and higher or 60 or below
 8. Any acute change/injury suggesting an emergency

- Monitor each consumer throughout residential and community access services for indications of changing or worsening conditions throughout each shift.
- Document each consumer's physical and mental condition on each shift in the shift report log and the individual's chart.
- If staff suspects a change in condition, staff will immediately check consumer's vital signs and record findings in their chart.
- If consumer is a diabetic, obtain glucometer reading and record findings in their chart.
- If the consumer is verbal, ask what is wrong, ask about pain, and document response in their chart, including pain screening.
- If not deemed a (911) emergency and the consumer's condition appears to change or worsen, during normal business hours, the Team Leader, or Designee will contact the Consumer's Primary Care Physician, and notify him/her of the consumer's symptoms, vital signs and glucometer reading if applicable. If after business hours, and not deemed a (911) emergency, staff will immediately call the designated on call staff/Team Leader and follow instructions.
- Staff documents changes, actions, and responses of the consumer in the progress notes in their chart.
- Staff notifies the Team Leader/ Designated on call staff of directives from the Primary Care Physician or ER, follows instructions, and documents actions in consumer's chart. Team Leader/Designee will incorporate this information into

the consumer's plan of care. Team Leader will disseminate information to all care providers, family members, and representatives as appropriate.

APPROVED BY:

ADMINISTRATOR

Date

George Harris, LCSW
Director of Central Care