Attachment 2 CONSUMER DIRECTED PERSONAL ASSISTANCE PROGRAM (CDPAP) PLAN OF CARE

Consumer's Name: Date:	
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TASKS AUTHORIZED	YES	NO	COMMENTS
PERSONAL			
Bathing			
Tub			
Shower			
Sponge			
Shampoo			
Grooming			
Shaving			
Skin Care:			
Lotion			
Medication			
Foot care/nail cutting			
Monitor			
Oral Care			
Dressing			
Diessing			
MOBILITY			
Assistance with Ambulation			
Assist with Mobility			
Assist with Transfer			
One Person			
Mechanical			
Slide Board			
Assist with Range of Motion			
Active			
Passive			
Fassive			
NUTRITIONAL/METABOLIC NEEDS			
Meal Preparation			
Set Up			
Feed			
Tube Feeding			
G Tube Site Care			
Aspiration Precaution			
Monitor Blood Glucose			
Prepare Insulin	1		
Insulin Administration	1		
Medication Administration	1		
Monitor Vital Signs			

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EXCRETORY FUNCTIONS Assist with Toileting Hygiene after Toileting Incontinent Diapering Bowel Regime Colostomy Care Indwelling Catheter Care Suprapubic Catheter Care Straight Catherization RESPIRATORY FUNCTIONS Tracheotomy Care	
Assist with Toileting	
Hygiene after ToiletingIncontinentIncontinentIncontinentDiaperingIncontinentBowel RegimeIncontinentColostomy CareIncontinentIndwelling Catheter CareIncontinentSuprapubic Catheter CareIncontinentCondom Catheter CareIncontinentStraight CatherizationIncontinentRESPIRATORY FUNCTIONSIncontinent	
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Bowel Regime	
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Indwelling Catheter Care	
Suprapubic Catheter Care	
Condom Catheter Care	
Straight Catherization	
RESPIRATORY FUNCTIONS	
Trachaotomy Cara	
Assist with Oxygen	
Assist with Nebulizer	
Assist with Inhalers	
Assist with Nasal Spray	
Assist with Postural Drainage	
and Cupping	
Assist with Suctioning	
Assist with Ventilator Care	
WOUND CARE	
Assist with Dressing Changes	
Care of Drains	
PICC Line Care	
Assist with Orthotics and	
Prosthesis	
IADLS	
Housekeeping	
Dusting	
U	
Floors	
Vacuum	
Mop	
Sweep	
Washing Dishes	
Laundry	
Trash Removal	
Making Beds	
Linen Change	
Clean Bathroom	
Clean Kitchen	
Shopping	
Essential Errands	

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Other (Medically Necessary)		
SKILLED TASKS:		
COMMENTS:		