## State Operated Community Program

Employee name:	House:	Date:	
	110030.	Date.	

	Competency	De	monstration		Date	Staff Initials	Eval. Initial	
	Follow the	• Carry out the progra	m plan as written		3M	3M	3M	
DYDI	objectives and	• Document participation in ISP related activities						
	strategies set forth in	demonstrate appropr						
NURSE	the ISP. formal and informal settings.							
	Financial plan (2) ISP (1) Nursing care plan (N) Dehydration protocol (2)							
	$\Box$ Voc/Day plan (1)		Aspiration protocol (2)			otocol		
		54614  H & W (1)	Constipation protocol (2)	Action	n plan	(1)		
	DHS4588 FA/BSP	ction Guidelines (2)						
	Other:							
Client initials:_	Other:							
CI: Inii	Other:							
	Financial plan (2)	<b>ISP</b> (1)	Nursing care plan (N)	Dehvo	Iration	protoco	ol(2)	
1	Voc/Day plan (1)		Aspiration protocol (2)	= .		otocol		
		S 4614 H & W (1)	Constipation protocol (2)	=	n plan			
	DHS4588 FA/BSP1		Good Day Plan (2)	=	-	uideline	es (2)	
ls: 	Other:							
Client initials:	Other:							
ii. C	Other:							
	Financial plan (2)	<b>ISP</b> (1)	Nursing care plan (N)	Dehyo	dration	protoco	ol (2)	
	$\bigcup$ Voc/Day plan (1)		Aspiration protocol (2)		-	otocol	(2)	
		S 4614 H & W (1)	Constipation protocol (2)		n plan			
	DHS4588 FA/BSP	Blended Plan (2)	Good Day Plan (2)	Interac	ction G	ion Guidelines (2)		
nt als:	Other:							
Client initials:_	Other:							
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	Financial plan (2)	$\square ISP(1)$	Nursing care plan (N)	= .		protoco		
	Voc/Day plan (1)		Aspiration protocol (2) Seizure protocol (2) Constipation protocol (2) Action plan (1)			(2)		
	DHS4588 FA/BSP	S 4614 H & W (1)	Constipation protocol (2) Good Day Plan (2)		•	(1) Juideline	ac (2)	
	$\Box \text{ Other:}$					uluenna	<del>cs</del> (2)	
ent ials	Other:							
Client initials:	Other:							
	Financial plan (2)	<b>ISP</b> (1)	Nursing care plan (N)	Dehu	Iration	protoco	$d \alpha$	
	$\Box$ Voc/Day plan (1)		Aspiration protocol (2)			tocol		
		S 4614 H & W (1)	Constipation protocol (2)	=	n plan		(-)	
	DHS4588 FA/BSP		Good Day Plan (2)		-	uideline	es (2)	
S. L.	Other:	. ,	<b>v</b>					
Client initials:	Other:							
E. C	Other:							

Return to Central Office in a CONFIDENTIAL envelope for filing in the Employee's Working File.