

**Cataract Risk Plan**

**Individual’s Name:**

**Date plan begins:**

**Date Plan expires:**

**Dates of Revisions:**

**Written by:**

**Risk:**       is at risk of impaired vision.

**Desired Outcome:**       will wear glasses. Staff will respond as trained if symptoms of eye or vision issues are exhibited.

**Why at risk/History:**

A **cataract** is a clouding of the eye’s lens, the clear, oval-shaped structure that rests behind the pupil inside every eye. The lens focuses light that passes into the eye, producing clear, sharp images on the retina, the light-sensitive membrane in the eye that functions like the film in a camera. With age, the lenses become less flexible, less transparent and thicker and break downs and clumps together, clouding small areas within the lens. As the cataract continues to develop, the clouding becomes denser and involves a bigger part of the lens. The cataract scatters and blocks the light as it passes through the lens, preventing a sharply defined image from reaching the retina. As a result, vision becomes blurred. Cataracts generally develop in both eyes, but not always and not evenly. The cataract in one eye may be more advanced than the other, causing a difference in vision between eyes.

**Supports and interventions:**

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* Staff will encourage       to wear glasses and will assist with cleaning and caring for them as needed.
* Staff will provide       assistance and physical support, as needed, when walking up/down steps, walking on uneven terrain, or while getting on and off the transportation vehicles.
* Staff will monitor for and address environmental hazards that may present a risk of falling such as poor lighting, clutter, uneven surfaces, slippery surfaces, stairs, or throw rugs.
* If fall occurs,       assess for injury and administer medical attention as necessary.

**Monitor:**

* Any change in vision
* Clouded, blurred or dim vision
* Increasing difficulty with vision at night
* Sensitivity to light and glare
* Need for brighter light for reading and other activities
* Seeing "halos" around lights
* Frequent changes in eyeglass or contact lens prescription
* Fading or yellowing of colors
* Double vision in a single eye

**Notify:**

* **Call 911 if emergency intervention was necessary, such as, back blows, abdominal thrusts, CPR, etc., exhibiting multiple or severe symptoms, if more than first aid is needed for injuries, if they hit their head, any type of reaction that interferes with the ability to breathe or swallow, rapidly worsening symptoms, or loss of consciousness.**
* Notify Program Manager and Health and Safety Tech and/or Nurse of any symptoms of cataracts, falls, changes in condition or stability, or concerns.
* Program Manager will notify family, guardian, other Program Managers, and/or Providers of any symptoms of cataracts, falls, changes in condition or stability, or concerns.
* Staff will document on incident report by end of shift.

**If 911 is called:**

* Remain with       until EMTs arrive. If emergency intervention was necessary, continue as trained until relieved by EMTs.
* Ensure that emergency personnel are aware of all medical conditions, allergies, and medications.
* Follow       to the hospital and remain with participant until relieved by staff or family.
* Complete an incident report by end of shift and BDDS report within 24 hours.

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| **Provider** |  | **Risk Plan** |  |  | **Date Effective** |
| **Paladin** | **Cataract** |  |
| **Print Name** | **Signature** | **Company/Title** | **Date** |
|  |  | **Paladin/Program Manager** |  |
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