Glenview Supplementary Care Services

Glenview staff will assess and monitor tenants for needs that are not provided as part of the base rent. You will be notified of the need for your Service Agreement to be amended to include any of the Supplementary Cares.

Each Supplementary Care Service is billed monthly at \$200.

1)	Amk	Ambulation				
	a. A	larms or Monitors				
	b. V	/heelchair Propelling				
	c. G	ait Belt or Assist of One to Transfer or Wal	k			
2)	2) Eating Assistance					
	a. H	ands-on Feeding Assistance				
3)	Behavior Management and Reorientation					
	a. R	edirection throughout the day				
	b. R	eassurance throughout the day				
4)	Incontinence Assistance					
	a.	Scheduled Toileting Program				
	b.	Bowel incontinence with clean up assist				
	c.	Scheduled incontinence pad change assis	stance			
		(staff schedules, reminds, provides hand	ls-on assistance)			
	d.	Foley Catheter care/Ostomy Care				
5)	Оху	Oxygen, C-Pap and/or Nebulizer Management				
	a.	Staff monitors and orders supplies and n	nebulizer medications			
	b.	Staff checks oxygen placement				
	c.	Staff monitors for use of prn oxygen and	nebulizers			
	d.	Staff monitors placement and provides n	ight checks for c-Pap			
		and provides assist with tubing changes a	and equipment cleaning			
6)	Insulin Administration					
	a.	a. Staff administers insulin via a pen.				
		NOTE: (Due to skilled nature of sliding sc	ale insulin administration	, Glenvi	ew	
		Personal Assistants cannot administer)				
		Tenant/Rep Signature Staf	ff Signature	Date		