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*of the Florida/Caribbean
AIDS Education and Training Center*

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Orlando, FL

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Care Plans: Patient History, Documentation, AND Involving the Patients ?!?!

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Care Plans... What comes to mind?

- 12 page report
- A lot of information that no one reads
- Do we really need this information?
- The idea is good, but really who has the time?



Being a former Quality Manager

THE LOGIC

- Everything impacts the Quality Plan
- Nursing Assessments and Care plans Impact Client Care
- An improved Nursing Assessment/ Care plan improves nurses ability to care
- The quality of care delivered improves



You have heard of...

- PDSA (Plan do Study Act)
- Well I would like to introduce



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DIEDA



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Goals

- **D**etermine the current method of creating a treatment plan
- **I**dentify what can be removed
- **E**mbrace what needs to stay or be added
- **D**iscuss how to involve the clients
- **A**pply what we learn at this conference to our programs



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Has this happened to YOU?

- A well organized and contentious nurse who works in a predominately HIV positive clinic is informed by the Clinic Manager that there are going to be changes in the clinic.



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- The great news is that an additional Medical Assistant is being hired to cover clinic.
- The bad news is that one of the nurse case managers is going to be taking an extended leave.
- As a result the case load will have to be transferred to the remaining 2 nurses.



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- After this the ever perky and motivated Quality Manager pipes in announcing that “HRSA and the HIV AIDS Bureau has a quality measure that for the infected clients a *case management care plan* (Nursing Assessment) needs to be created and updated two or more times- least 3 months apart. This is to begin in the next 2 weeks”

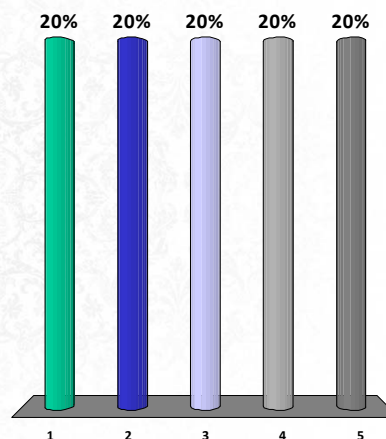


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How does the Staff Respond?

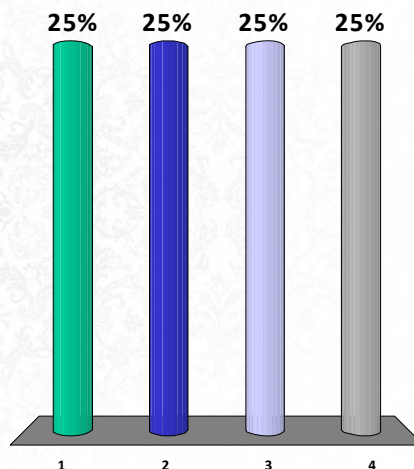
1. Spend the next 2 weeks complaining about how unfair this all is?
2. Ignore the instructions and continue with business as usual?
3. Sound interested, make management think they are on board, but really do nothing?
4. Use this opportunity as a time to have a real discussion about systems that need to change for this directive to be incorporated.
5. All of the above



- **How do we comply with HAB HIV Performance Measure and meet the demands of the clients, physicians, and the program that we work for?**

Incorporating HAB HIV Performance Measure

1. Know the HAB HIV performance measure that your organization is focusing on
2. Arrive at a clients' focused care plan
3. Involve the other members of the program team to review changes in the volume of information collected by the nurse
4. All of the above



Determine the Current Method of Creating a Treatment Plan

- Historically when all else fails the nurse can capture this information
- “It is just one more form that can be completed at the initial encounter”
- “Well, I remember what they need”
- “Treatment plan – for them to come to clinic!”
- “This is what we say we do, but really we only do what the clinician orders.”

Identify What can be Removed

- Anything that is being captured elsewhere.
- Give things back to the responsible party.
- Share information
 - CareWare and use it
 - Electronic Medical Records
 - Pharmacy Lists
 - Hospital Discharges

Embrace What Needs to Stay or be Added

- Secondary and primary diagnosis
- Disease progression
- Medications
- Resistance
- Adherence to appointments, medications...
- Sex - transmission, family planning
- Self image, stereotyping

DISCUSS How to Involve the Clients

1. Listen to them
2. Ask them why they came to clinic
3. What is important to them
4. Have them rank their needs
5. Collaborate with the client on a common goal or goals
6. Agree on something that will be followed up at the next visit

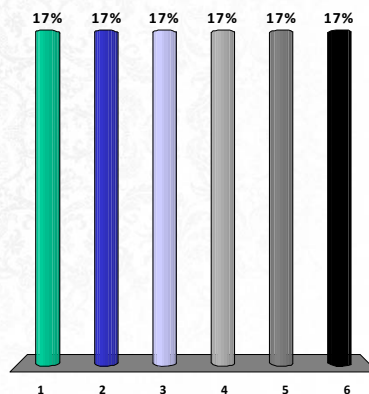


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What are the Elements to a Traditional Nursing Care Plan? (From Nursing School)

1. **Identification** of the issue-medical or non-medical
2. **As evidence by** (lab result, expressed concerns, observations, other circumstances)
3. **Date** identified, target date, date achieved
4. **Plan and Outcome**
5. **Nursing interventions** (what is the nurse going to do to achieve the plan and outcome)
6. **All of the above**



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Demonstration

- I need a volunteer client who can speak VERY loudly
- I need a person to time me.
- The rest

- Take notes there will be more questions.



Client Directed Visit Worksheet

Client Name: _____ Date: _____

X CENTER understands that each person visiting our clinic has individual needs. In an interest to better meet your needs, please complete the questions below. Once in the exam room one of our providers will go over this with you. Thank you in advance for your input. The X Staff.

What brings you to clinic today? _____

What do you hope to have done during this appointment? : _____

Prescriptions Information about _____ Other _____

What is most important to you and your health care? _____

What gets in the way of taking care of the above things? _____

- _____
- _____
- _____

Other needs that you have: (please circle) Please note we may not be able to address all of these today. (Please rank these in level of importance - indicate if referral made/ completed)

- | | | |
|--------------------------------------|---------------|----------------------|
| Food/ Nutrition | Substance Use | Counseling |
| Clothing | | Income |
| Household items | | Financial Assistance |
| Medical care | | Employment |
| Dental | | Education |
| Optical | | Volunteering |
| Insurance | | Support Systems |
| Adherence (taking medications right) | | Transportation |
| Fitness | | Legal services |
| Housing | | Other: _____ |
| Education about HIV | | |

What is one thing you can commit to reaching your goals in your healthcare? _____

Reviewed by: _____ Date: _____



How does this Match with School?

- Identification of the issue medical or non-medical
- As evidence by (lab result, expressed concerns, observations, other circumstances)
- Date identified, Target date, Date Achieved
- Plan and Outcome
- Nursing Interventions (what is the nurse going to do to achieve the plan and outcome)



Nursing Care Plans

Nursing Diagnosis and Intervention

Gulanick • Myers • Klopp • Galanes • Gradishar • Puzas

Nursing Diagnosis: Disturbed Body Image

Related Factors:

Situational changes

Permanent alterations in structure /function

Malodorous lesions

NOC Outcomes (Nursing Outcomes Classification)

Self-Esteem

NIC Interventions (Nursing Interventions Classification)

Grief Work Facilitation

Coping Enhancement

<http://www1.us.elsevierhealth.com/MERLIN/Gulanick/Constructor/>



Nursing Care Plans

Nursing Diagnosis and Intervention

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- **Ongoing Assessment**
 - Assess perception of change in ...
 - Assess perceived impact on ...
 - Note patient's behavior regarding change ...
 - Note frequency of self-critical remarks.
- **Therapeutic Interventions**
 - Acknowledge normalcy of emotions
 - Help patient identify actual changes
 - Encourage healthy verbalization
 - Assist patient in incorporating actual changes
 - Demonstrate positive caring

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- **Education/Continuity of Care**
 - Teach patient adaptive behavior
 - Help patient identify ways of coping that have been useful in the past
 - Refer patient and caregivers to support groups composed of individuals with similar alterations

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Apply what we learn at this conference to our programs



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Making Things Work

- Discuss plans with Electronic Medical Record
- Utilize data folks
- Use existing templates
- Organize a starting plan
- Use the internet
- Develop a client focused worksheet



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Summary

- Nursing care plans are an important nursing tool
- Client outcomes are improved by correct care plans
- Care plans are a case management requirement for the HIV /AIDS Bureau
- Using a systematic approach like DIEDA will help focus efforts by creating excitement in “the possibilities” and prevent fatigue of “more to do”



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References

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