



**Right Care.  
Right Time.  
Every Time.**

## **Exploring Patient Engagement in Plan of Care and Policy and Procedures**

Session 3- Patient Engagement Webinar Series

Thursday, April 19, 2018 at 12:00 PM CDT



# Objectives

- Review ideas for incorporating patient engagement into facility policy and procedures.
  - Discuss the related ESRD Conditions for Coverage
  - Define policy and procedures
  - Identify opportunities for improvements
- Review tools for engaging patients and families in their Plan of Care meetings
  - All About You Plan of Care Toolkit
  - My Questions & Goals checklists
- Share facility perspective on engaging patients in POC process



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# Polling Questions

Does your facility have any policies and procedures that include patient engagement?

- Yes
- No
- I don't know
- I don't understand why we're discussing it- we are corporately owned

Chat:

What are the P&P's regarding?



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# § 494.150 Condition: Responsibilities of the medical director.

## V714 (c) Policies and procedures.

- The medical director must—
  - (1) Participate in the development, periodic review and approval of a “patient care policies and procedures manual” for the facility; and

## Interpretive Guidance

- Written patient care policies and procedures are an essential reference for clinical staff and **should reflect current practice at the facility**. The patient care policies and procedures should address all areas of patient assessment and care delivery for the dialysis modalities provided...
- There must be evidence that the medical director reviewed and approved the patient care policies and procedures and any revisions as they are made.
- Corporate-owned or corporate-managed facilities may use standard policies and procedures developed by the corporation. **There should be a mechanism for the facility medical director to have input into the policies and procedures, and to have some authority to individualize corporate policies to address unique facility situations.**



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# Definitions



## Policy

- A formal, brief, and high-level statement or plan that embraces an organization's general beliefs, goals, objectives, and acceptable procedures for a specified subject area.
- Focus on desired results, not on means of implementation.



## Procedures

- Describes the process: who does what, when they do it, and under what criteria.
- A series of steps taken to accomplish an end goal.
- Defines "how" to protect resources and are the mechanisms to enforce policy.
- Provides a quick reference in times of crisis.

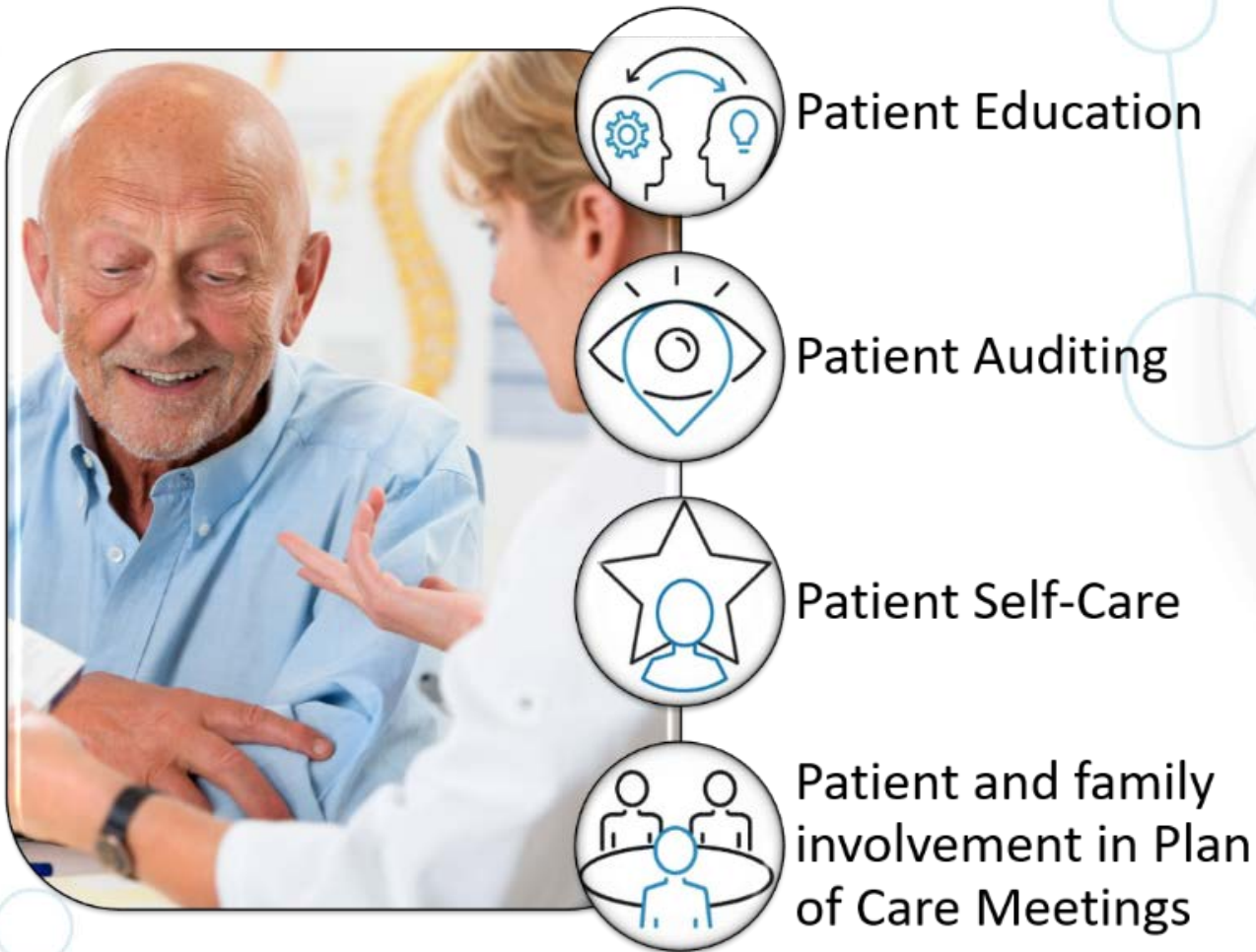


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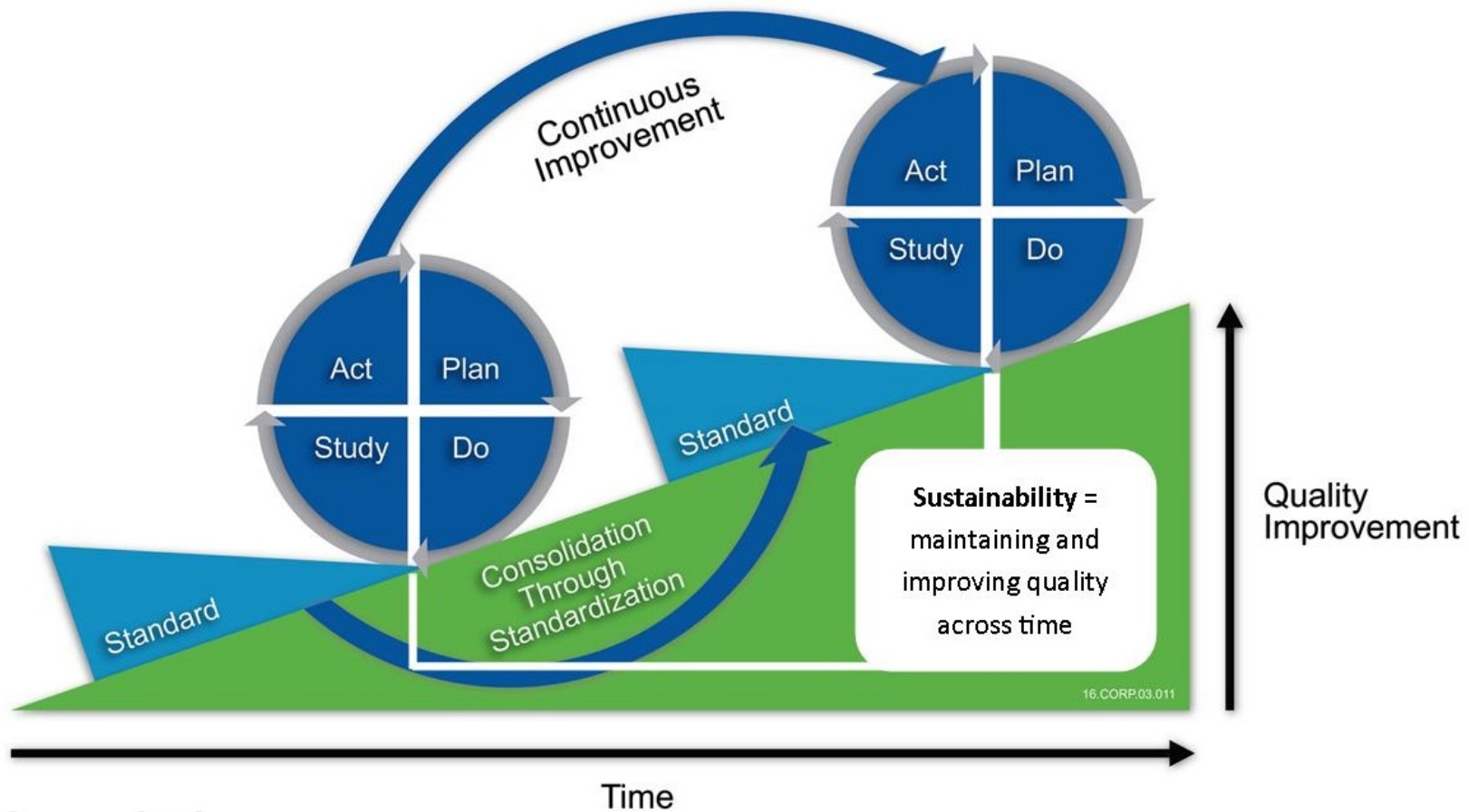




# Examples of Patient Engagement in Facility Policies & Procedures



# Why incorporate into your facility standard operating procedures?



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# § 494.90 Condition: Patient Plan of Care

**V541:** The IDT team must develop and implement a written, individualized comprehensive plan of care...

## Interpretive Guidance

- The interdisciplinary team (IDT) consists of, at a minimum, **the patient or the patient's designee** (if the patient chooses), a registered nurse, a physician who is treating the patient for ESRD, a social worker, and a dietitian.
- The facility **must recognize** the patient or his/her designee as a member of the IDT **and encourage the patient's participation in developing and updating the plan of care**. The patient's needs, wishes, and goals must be considered in making decisions about the plan of care.



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# Patient. Centered.

## **“All About YOU” Plan of Care Toolkit**

Re-branding POC to make it meaningful to patients.

# Toolkit resources

- Patient
  - “All About YOU Review” patient overview
  - Plan of Care meeting invitation
  - “Let Us Know How We Did” post-POC meeting questionnaire
- Staff
  - Plan of Care prep checklist
  - “Getting Off to the Right Start with Plan of Care” staff guide
  - Additional resources for reference relating to POC (ERA, MAT, KDQOL-36, Conditions for Coverage for ESRD Renal Disease Facilities: Interpretive Guidance–V540 § 494.90 Condition: Patient plan of care)

*Prior to each resource in the toolkit there is a description provided and instructions for utilization.*



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# Patient Invitation

On behalf of your entire care team, we would like to invite you to join us for your...

All About  
YOU Review

NAME: \_\_\_\_\_

Also called your plan of care meeting, this is the time set aside just for **YOU** to meet with the entire care team all at once. As your care team, we want to help you meet your goals and get to know what is most important to **YOU**. This is your chance to have your care team's attention to ask questions, tell us your concerns, and share your personal goals. During time we will work together with **YOU** to make a plan that helps you be successful and the quality of life that you want. Plan to join us on:

WHEN: \_\_\_\_\_

WHERE: \_\_\_\_\_

.....  
CUT HERE AND RETURN THE BOTTOM HALF TO A MEMBER OF YOUR CARE TEAM TO HELP US PREPARE FOR OUR

1. Name: \_\_\_\_\_

2. I would like to participate in my **All About YOU Review** meeting:

☐ In person    ☐ By phone    ☐ Other: \_\_\_\_\_

3. I am inviting others to join the meeting:

☐ Yes    ☐ No

If yes, name(s): \_\_\_\_\_

Relationship to me: \_\_\_\_\_

4. I want to talk about (check as many as apply):

☐ My life goals \_\_\_\_\_

☐ Home treatment choices \_\_\_\_\_

☐ Transplant \_\_\_\_\_

☐ My dialysis successes including \_\_\_\_\_

☐ My struggles with dialysis including \_\_\_\_\_

☐ I could use some help with \_\_\_\_\_

☐ My questions: (you may write on the back if you need more room)

• \_\_\_\_\_

• \_\_\_\_\_

• \_\_\_\_\_

Contact us if you have any questions and we look forward to meeting with you!

1. Name: \_\_\_\_\_

2. I would like to participate in my **All About YOU Review** meeting:

☐ In person    ☐ By phone    ☐ Other: \_\_\_\_\_

3. I am inviting others to join the meeting:

☐ Yes    ☐ No

If yes, name(s): \_\_\_\_\_

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☐ Transplant \_\_\_\_\_

☐ My dialysis successes including \_\_\_\_\_

☐ My struggles with dialysis including \_\_\_\_\_

☐ I could use some help with \_\_\_\_\_

☐ My questions: (you may write on the back if you need more room)

• \_\_\_\_\_



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# Post POC Questionnaire

**Let us know how we did!**

**All About  
YOU Review**

1. Was this your first time to participate in your All About YOU Review? ☐ Yes ☐ No

If yes, what has kept you from participating before? (check all that apply)

- ☐ I didn't know about it      ☐ transportation issues      ☐ repeat of info I already know  
☐ time involved      ☐ inconvenient time      ☐ personal conflicts  
☐ other: \_\_\_\_\_

Please answer questions #2 through #7 with a 1 to 5 ranking.

*(1 = Strongly disagree, 2 = Disagree, 3 = I don't know, 4 = Agree, and 5 = Strongly agree)*

2. This meeting was helpful. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
3. The time worked for me. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
4. I had enough privacy to talk with the care team. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
5. My comments/concerns were respected. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
6. We talked about topics that were important to me. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
7. I plan to attend my next All About YOU Review. ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
8. What can we (your care team) do to make these meetings better?  
\_\_\_\_\_

# Staff POC Prep Checklist

## Plan of Care Prep Checklist

All About  
YOU Review

MONTH: \_\_\_\_\_

Name	Provide invitation	Collect pt input	Review KDQoL	Type: 30 day/90 day/annual/status change	Deliver/collect follow-up questionnaire



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# Staff guide

## Getting Off to the Right Start with Plan of Care

### All About YOU Review

#### INTRODUCTION

The plan of care (POC) meeting is an integral part of patient-centered care. Too often, patients and families feel that this meeting is a formality that only summarizes the regular ongoing meetings with individual members of the interdisciplinary team (IDT), when actually it is a chance for an interactive All About YOU Review. To make the POC as effective as possible, it is important to get the meeting off to the right start. This guide provides tips for setting the tone, agenda, and after the POC session. By taking the time to prepare, the patient to be the "driver" of their care, and

#### RIGHT preparation

Set the expectation of participation importance of participating in the agenda addressing to keep the meeting focused. Write down their questions or concerns ahead of time.

#### RIGHT preparation

#### RIGHT way

"This truly is an All About YOU Review and we are all here to help you make a plan to reach the goals you have for your life." Such an opening statement sets the tone for the meeting. Use the patient's/care partner's questions or concerns as the starting point for discussion. The efficacy of the POC meeting is significantly dependent on how information is presented and the manner in which the patient feels that he/she is an equal part of their healthcare team.

#### RIGHT place

Sharing personal information in a separate room. Patients should also have a private space to write down their questions or concerns ahead of time.

#### RIGHT way

#### RIGHT time

Best practices indicate that the POC is right before or after treatment and prefer to come back for a second session. The patient preference should be honored, if possible.

#### RIGHT people

In addition to the whole IDT, which includes the patient, others may be present. Care providers who contribute to the patient's well-being, such as nursing home staff, should be included to provide input. The patient can request to have family/care partner present also. Offer everyone the option to join by phone.

#### RIGHT topics

The POC is more than a monthly assessment, and should be comprehensive. A holistic approach can ensure that the patient's lifestyle goals are the focus of care to improve both engagement as well as clinical outcomes. Start where the patient is to get the best results.

#### RIGHT documentation

Assist the patient with setting SMART (Specific, Measureable, Achievable, Realistic, Timely) goals and document them in the POC. Patients' progress must be monitored, and if the expected outcomes are not met, there must be evidence that barriers were identified and that the plan was reviewed and revised.

Set the expectation for patients to attend and communicate the importance of participation. Give patients plenty of notice. Create an agenda addressing both patient and staff goals and set a time limit to keep the meeting focused. Provide an opportunity for patients to write down their questions or concerns ahead of time.

"This truly is an All About YOU Review and we are all here to help you make a plan to reach the goals you have for your life." Such an opening statement sets the tone for the meeting. Use the patient's/care partner's questions or concerns as the starting point for discussion. The efficacy of the POC meeting is significantly dependent on how information is presented and the manner in which the patient feels that he/she is an equal part of their healthcare team.

#### EXAMPLES

- Deliver printed invitation\*
- Give patient My Questions & Goals brochure\*
- Complete prep checklist\*
- Shared decision making
- Avoid Yes/No questions
- Unhurried
- Non-judgmental/non-blaming
- Empathetic
- Inviting

\* Offer option of joining by phone

- Patient
- Entire care team
- Care partner
- Family members
- Other care providers

- Physical
- Psychological
- Financial
- Spiritual
- Dietary
- Social
- Relationships
- Leisure

- Refer to the CMS CIC Interpretive Guidance\*
- Refer to the MAT\*
- Refer to the ERA\*

\* resource included in toolkit



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# My Questions & Goals

**MY LIFE**

What is most important to me in my life is: \_\_\_\_\_

My current goal is to: \_\_\_\_\_

☐ What can I do to make it easier to fit dialysis into my life?

☐ What lifestyle changes can I make to be as healthy as possible?

☐ If dialysis is impacting my mood or quality of life, who is the best member of my care team to talk to?

☐ What \_\_\_\_\_

**MY TREATMENT CHOICES**

☐ What are the advantages and disadvantages of:

- ◊ Hemodialysis (in-center, home, and nocturnal)
- ◊ Peritoneal dialysis (manual andycler)
- ◊ Kidney transplant

☐ Which treatment(s) may be best for me with my medical status and lifestyle?

☐ What do I need to do if I want to do dialysis at home?

☐ Can I try a different type of dialysis to see if that is a better choice for me?

☐ What \_\_\_\_\_

**MY CARE TEAM**

☐ What does each member of my care team do?

☐ What can my care partner or family do to help?

☐ How do I contact my care team when I need them?

☐ How can I best take part in my care?

☐ What is a plan of care meeting and what happens during it?

☐ Why would it be helpful for me to attend my plan of care meetings?

☐ What can I do if I think a member of my care team is not doing their job well or is not caring about my needs?

☐ What can I do if I don't feel safe or comfortable at my dialysis clinic?

**MY TREATMENT**

☐ How is my dialysis treatment plan decided?

☐ Am I getting enough dialysis? What signs should I look for?

☐ What type of medication will I have to take? What do the medications do to help me?

☐ If I'm afraid of needles, what can I do to help with the pain?

☐ How much does dialysis cost and who will pay for it?

**MY DIET**

☐ What is a renal diet? Why is it important for me to follow?

☐ How will dialysis change what I can eat and drink?

☐ Will what I am able to eat and drink depend on the kind of treatment I choose?

☐ What can I do to limit the amount of fluid I take into my body daily?

☐ Will I still be able to go out to restaurants?

☐ Where can I find kidney friendly recipes?

**MY QUESTIONS & GOALS**

My Questions & Goals was made for you to use when meeting with any member of your dialysis care team. Choose the questions that you would like to talk about. Asking questions and like to talk about. Asking questions and like to talk about. Asking questions and like to talk about.

1. I would say my current quality of life is a (circle one):  
☹️ 1 2 3 4 5 6 7 8 9 10 😊

2. I would like to be at a (circle one):  
☹️ 1 2 3 4 5 6 7 8 9 10 😊

3. Right now, I'm worried the most about:  
\_\_\_\_\_

For more information or to file a grievance please contact the Heartland Kidney Network at:  
920 Main, Suite 901  
Kansas City, MO 64105  
Toll-free Patient Line: (800) 444-9965  
net12@hwn12.esrd.net • www.heartlandkidney.org

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## Checklist Brochures-

- New patients (blue)
- Existing patients (green)

1. I would say my current quality of life is a (circle one):  
☹️ 1 2 3 4 5 6 7 8 9 10 😊

2. I would like to be at a (circle one):  
☹️ 1 2 3 4 5 6 7 8 9 10 😊

3. Right now, I'm worried the most about:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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# Facility Sharing

- Danita Minor- DCI Carondelet, Network BOD

## Steps for Successful Care Plans

- Appointments
- Invitation
- Care Plan Meeting
  - Encourage Facility Manager to attend.
  - Open meeting with explanation of what the care plan is.
  - Focus on improving their quality of life.
  - Focus on most pressing issues
  - Record items and goals
- Follow up with action items and goals.



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# Benefits of A Successful Care Plan

- + Patient directs the goals they would like to work on with the entire team—everyone is on the same page.
- + Trust level between patient and team can dramatically improve because the patient's choices and value system are respected.
- + Dialysis Team becomes more aware of patient's priorities and can focus energy on achieving their individual goals.
- + Patient is more engaged which can encourage better adherence that leads to improved outcomes.
- + Easier to track progress and find solutions when everyone is involved.



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# Polling Question

- Do you have at least one idea you can use from this webinar to incorporate patient engagement a facility policy and procedure?
  - Yes
  - No
  - Maybe, I need to talk to my team



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# Thank You

- Please complete the survey assessment for this webinar. Completion of the post-assessment will fulfill project related requirements. Please include the names and CCNs for each clinic you represent.
- If you would like additional technical assistance, please contact DeeDee Velasquez-Peralta, Patient Services Manager at 816-880-9990 or [dvelasquez-peralta@nw12.esrd.net](mailto:dvelasquez-peralta@nw12.esrd.net).



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