

Your Plan of Care and Setting Goals

Helpful tips

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Good friends helped connect me with the volunteer office at the MS Association because they knew I was going to need help with physical needs. They found a match for me.

I called Victoria and she was at my house in 20 minutes. Victoria was a dancer with the San Francisco Ballet, and now works in the costume shop of a local ballet company.

This connection changed my life. Victoria helps me with my finances, answers mail, waters plants, and holds power of attorney for me. But also, through my friendship with her, I am able to go to ballets, and meet dancers, directors, and designers – things that I never would have done without this connection.

I feel like a “Make-a-Wish” child because I love ballet and trust Victoria with my life needs. You have to risk reaching out – for me, it worked out beautifully.

~ Patient Advisor



Many rehab patients find that it is life-changing when they risk reaching out to others for help.

The members of your care team are described in detail in “Your Care Team,” pages 19 to 26. All team members will meet with you during the admission process to coordinate the care you will receive during your hospital stay.

Steps to Develop a Plan of Care

Your care team will work with you to create your plan of care. The main steps in this process are **assessment** and **setting goals**.

Assessment

This step involves a review of your:

- Health status
- Medical condition
- Emotional state

This information, along with results from any diagnostic tests, provides a baseline that you and the rehab team can use for setting your rehabilitation goals.

Setting Goals

- Your team will ask you questions about your **long-term goals** for rehabilitation. You and your team will use these goals to develop your plan of care.
- You and your therapists will also set **weekly goals**. These weekly goals come from the goals you set at admission. They also take into account any medical changes that occur during your rehab stay.
- Your **discharge goals** are set during your initial evaluation process.

Your Plan of Care

Your plan of care will be unique to your needs, goals, values, and situation. Sometimes your plan of care must also take be adjusted based on your funding options.

Your plan of care and your therapy schedule will include at least 3 hours a day of occupational therapy (OT), physical therapy (PT), and speech therapy.

During your stay, your health care team will talk about your plan of care and review your treatment during rounds and at panels (see next page).



During rounds, please share how you are feeling and talk about any concerns you have.

Rounds

Members of your care team will visit you each day. This is called “rounds.”

The purpose of rounds is to check on your progress toward your discharge goals. During rounds, please share how you are feeling and talk about any concerns you have about your medical or social condition and treatment.

Rounds are a good time for you, a family member, or a loved one to ask questions.

Panels (Interdisciplinary Team Conferences)

All the members of your care team meet at least weekly to talk with you and review your progress. These meetings are called “panels,” and they are a very important part of your rehab stay. You and your designated family member, loved one, or advocate are welcome to attend these panels.

Panels last about 15 minutes. There is more information about panels in your *Discharge Binder*.

An “Interdisciplinary Report” is completed at each panel session to track your progress. The goals you have been thinking about are included. Your case manager will give you a copy of the report at the end of your panel meeting.

Tips on Setting Goals

- Set goals that you know you can reach. Goals should be challenging but also realistic. Unrealistic goals can cause frustration.
- Ask yourself what each of your goals will require of you.
- Do not lose sight of your goals.
- Goals need to be specific.
- It may help to have action steps for each one of your goals. This will give you checkpoints for your progress.

- Some people feel that writing down their goals is much more powerful than just thinking about them. You can write out your goals, or have someone record them for you.
- Some people find it helps them to stay focused on their goals if they have a personal mission statement. Creating your own mission statement can help you know what is important to you and may help guide your decisions. Your Interdisciplinary Report will also list your goals.
- Do not worry about having perfect goals. Just get started. Then, be ready and willing to make changes as needed.

Being a Partner in Planning

Here are some tips from patients, family members, and UWMC staff about how to best partner in your care planning:

- *Attend panels so you are clear about your progress, goals, and needs. Panels are a great place to bring up issues that are important to you. You and your family or loved ones can work with your care team to develop your care and discharge plans.*
- *If you have a major issue or one that may take more time than a panel allows, ask to have a separate meeting.*
- *Ask questions. This is VERY important.*
- *Use the resources available and ask about more resources if you cannot find what you are looking for.*
- *Prepare ahead for panels. Write down your list of questions and issues, or ask someone to do this for you.*

Change as a Part of Life

Your rehab psychologist and social worker are here to help you accept change as a part of life.

Change can be slow or fast. We know that adaptation and survival work best when we help each other with adjustments. This is true when the change is major, such as severe injury, or more mild, such as when we start a new job.

Change as a Factor in Rehabilitation

Rehabilitation recognizes that change is a part of living. Supporting your ability to adapt to change can make things go better. Your care team plays a part in this process.

We want to work with you and your family and loved ones to find ways to cope with and manage the effects of change. This is why we ask you what you did to successfully adapt to past changes, and what your support network of family and friends is like.

Readiness for Change

How you deal with change depends on many things, including your personality, how easily you move from one idea to another, how you think of yourself, and your culture and upbringing.

Each person in rehab has different changes to deal with, and different ways to manage those changes. Your readiness to redefine yourself will be unique, and we will respect your process.

Your emotional reserves and physical energy play big parts in how ready you feel to face each day. Your feelings are your starting point, and they should be recognized and validated.

How supported you feel will also affect your readiness for change. Talk with your care team about your feelings. This will help us work together to reach your goals.

Change Over Time

We may not like the changes, but we can get better at adapting to them. Over time, you may grow more comfortable with the changes. Learning how and where to find support can help.

The change process involves loss and letting go of the old, while also embracing the new. Grief and loss involve feelings of disbelief, anger, sadness, bargaining, and acceptance – and not always in that order. Having some or all of these feelings is normal. They are a part of how people cope with change.

Support from others can help you handle the grief you feel. This support can come from those who have been through something similar, or from friends or counselors who are willing to help out and make your adjustment easier.

With time, you will learn what some of your options and opportunities are. Some of these may surprise you.

Planned Change

Your care team will work with you to help you plan changes, based upon what they know and what you prefer. Planned change is based on the timing of your specific goals. It is often a step-by-step process that involves schedules, appointments, and using special information.

Some people do best with planned change of this kind, especially if they prefer logic and practical solutions. If this is how you like to work, gathering information can start you in the direction of positive planned change. Consider finding information from your care team, the Rehab Library, the Internet, UWMC's Health Information Resource Center, members of a support group of patients and families, and other sources.

Unexpected Change

If you are less comfortable with planned change, you may be open to opportunities that seem to drop into your lap. This can occur when others bring information to you unexpectedly, or when outside forces show you something that you didn't know before.

Sometimes, meditation or prayer can open possibilities. At other times, one contact can lead to new resources and helpers. Insight from therapy or counseling can also reveal new ways to look at a problem.

Unexpected change can occur when time has passed and your reaction to the loss has shifted. Also, political changes in funding or in care coverage can open new doorways.

Whatever the source, unexpected change may take place for you. The choice of how to work it into your life will be yours.

Questions?

Your questions are important. Talk to your doctor, nurse, or other health care provider if you have questions or concerns.

While you are a patient on UWMC's inpatient rehab unit, call 8-4800 from your bedside phone. From outside the hospital, call 206-598-4800.

After discharge, call your primary care provider or UWMC's Rehabilitation Clinic: 206-598-4295

"I don't like my situation, but I can choose to do the best I can in my situation."

~ Patient Advisor
