

Your Plan of Care and Setting Goals

Helpful tips

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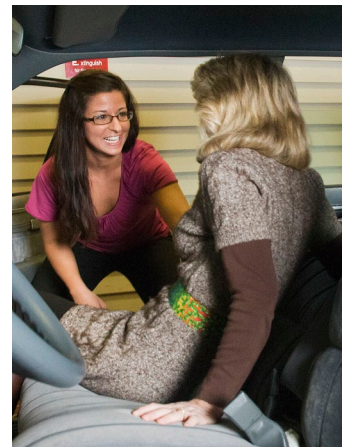
Good friends helped connect me with the volunteer office at the MS Association because they knew I was going to need help with physical needs. They found a match for me.

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 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 for help.

Members of your care team are described in detail in the section called “Your Care Team,” starting on page 15. 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. Main steps in this process are **assessment** and **setting goals**.

Assessment

This step involves a review of your:

- Health status
- Medical condition
- Mental health

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.

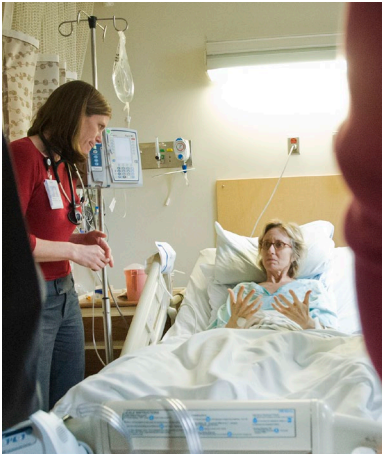
Your **discharge goals** are set during your first assessment process. Your care team will discuss these at your weekly plan of care conferences.

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 finances.

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 care team will talk about your plan of care and review your treatment during rounds and at your plan of care conferences (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.” Rounds may happen at any time of day.

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

Rounds are a good time for you, a family member, or a loved one to ask questions. It may help to write down your questions and post them in the room for the team to answer.

Plan of Care Conferences (Interdisciplinary Team Conferences)

All the members of your care team meet with you at least once a week to review your progress. These meetings are called “plan of care conferences.” They are a vital part of your rehab stay.

You and your designated family member, loved one, or advocate are welcome to attend these meetings. Plan of care conferences last about 10 minutes.

Tips on Setting Goals

- Goals should be challenging but also realistic. Set goals that you know you can reach. Unrealistic goals can be frustrating.
- Ask yourself what each of your goals will require of you.
- Do not lose sight of your goals.
- Goals need to be specific.
- Your goals may change during your stay and that is ok.
- 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.

- Communication with your team is important in meeting your goals.
- Here are a few examples of goals that you may set:
 - I will be able to get to the bathroom to use the toilet and shower with a little help.
 - I will be able to get dressed by myself.
 - I will be able to safely walk around my house with a walker.
 - I will be able to direct people in how to help me get to my wheelchair.
 - I will know all my medicines and when to take them.

Being a Partner in Planning Your Care

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

- **Attend plan of care conferences** so you are clear about your progress, goals, and needs. These meetings 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 plan of care conference 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. An example would be support groups in your area.
- **Prepare ahead** for plan of care conference. 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. 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, your family, and your 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 your personality, how easily you move from one idea to another, how you think of yourself, your culture and upbringing, and more.

Each person in rehab has their own 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, so be sure to recognize and validate them.

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.

Adapting to Change Over Time

We may not like change, but we can get better at adapting to it. Over time, you may grow more at ease 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. As we come to terms with loss, we go through the stages of grief. These stages include 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 we 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.

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. These changes will be based on what you prefer and what they know about your condition. Planned change is based on the timing of your specific goals. Some people do best with planned change, especially if they like to use logic and practical solutions.

Planned change is a step-by-step process. It usually involves schedules, appointments, and gathering information. If this is how you like to work, consider seeking information from your care team, the internet, UWMC's Patient and Family Resource Center, members of a support group of patients and families, and other sources.

Unexpected Change

If you allow yourself to be open to them, some opportunities may seem to drop into your lap. This can occur when others bring information to you didn't expect, 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 start you on the trail of new resources and helpers. Insight from therapy or counseling can reveal new ways to look at a problem.

