

# Care Planning Education Resource Awareness Presentation Practice Wise





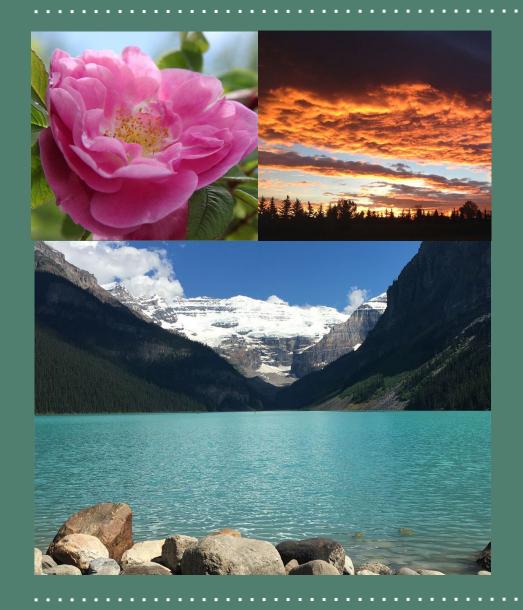
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## Land Acknowledgment

Provincial Seniors Health and Continuing Care would like to recognize that our work takes place on historical and contemporary Indigenous lands, including the territories of **Treaties 6, 7 & 8** and the homeland of the Métis.



## Objectives

- Identify who can utilize the Care Planning Education Resource
- 2. Describe the components of the Care Planning Education Resource
- 3. Demonstrate how to use the Care Planning Education Resource
- 4. Define the elements of AHS continuing care philosophy for care planning



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## Who can use the Care Planning **Education Resource?**

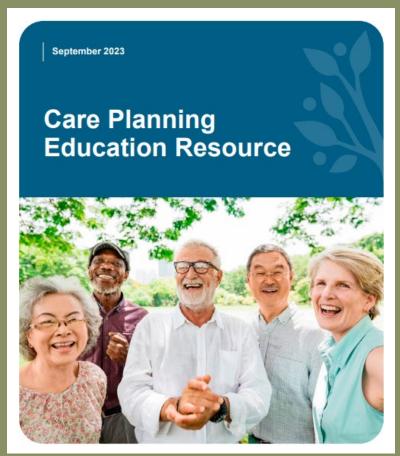


- Case Managers
- Clients
- Informal supports
- Health care aides
- Allied Health
- Program Leaders, Managers, interRAI Leads
- **Contract Service Providers**



# What is the Care Planning Education Resource?

- Care planning philosophy & process
- Identifies 22 care planning topics
- Provides information about strengthbased care planning
- Guides development of goals and interventions
- Incorporates CCHSS requirements and other care planning resources

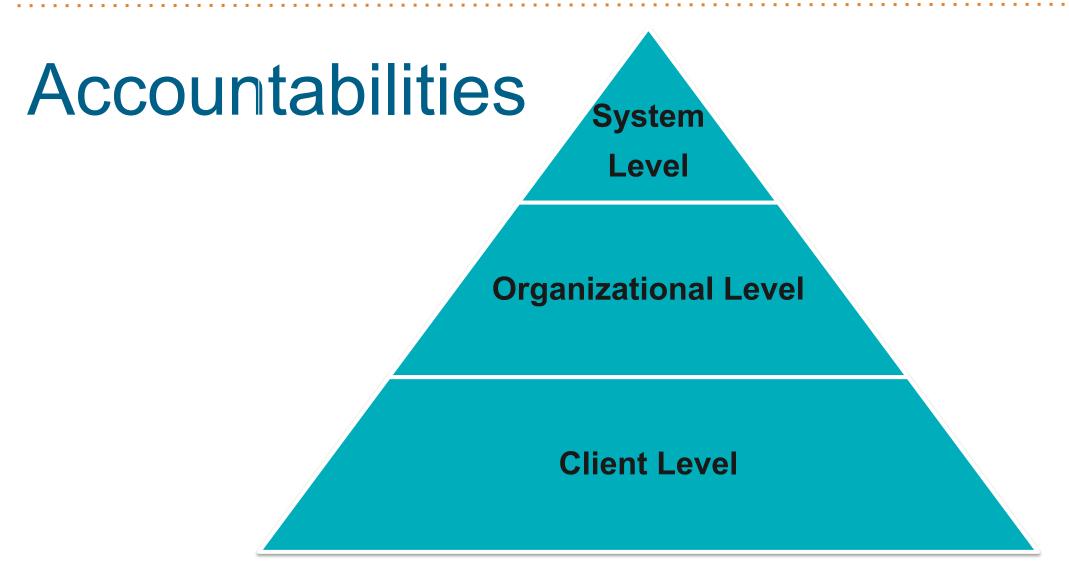


## Philosophy: Why We Care Plan



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## Strength-Based Care



- Existing competencies
- Resources
- Capacity to learn
- Involvement



## Who am I?

- Values
- Spirituality
- Habits
- Abilities
- Hopes
- Fears





## Person-Centred Care







**66** Case Management is a collaborative, person-centred strategy for the provision of quality health and supportive services through the effective and efficient use of available resources to support the patient's achievement of goals.

Continuing Care Case Management Framework & Guidelines, 2011

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## Collaborative Practice

Clear, effective communication & decision-making

Partnership between client and clinicians of different disciplines



Establishes clear priorities, roles & responsibilities for all involved

Enables delivery of high-quality, person-centred services

Towards achieving the best possible individual health outcomes

# Care Planning Process



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Why use the Care Planning Education Resource?



WIIFM?

## Where is the Care Planning Education Resource located?



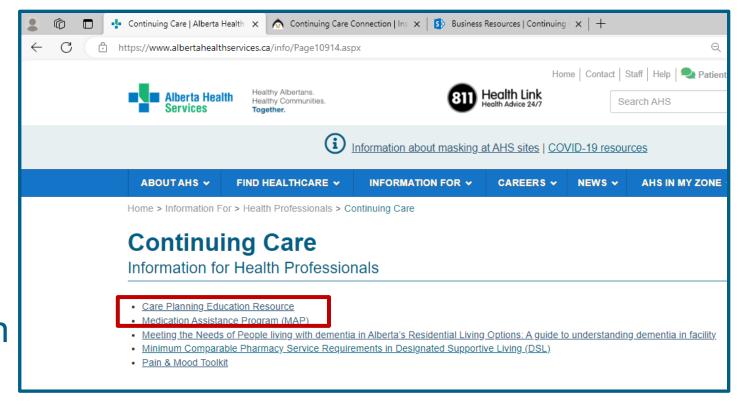




Resource

# Where is the Care Planning Education Resource located?

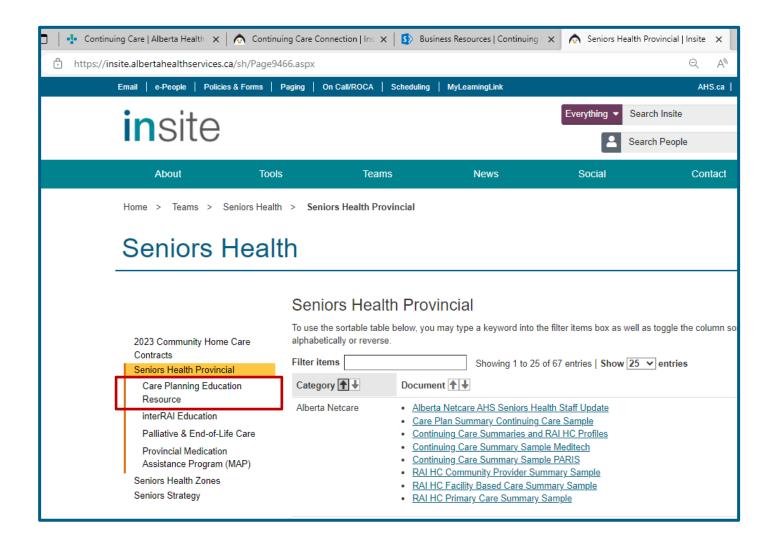
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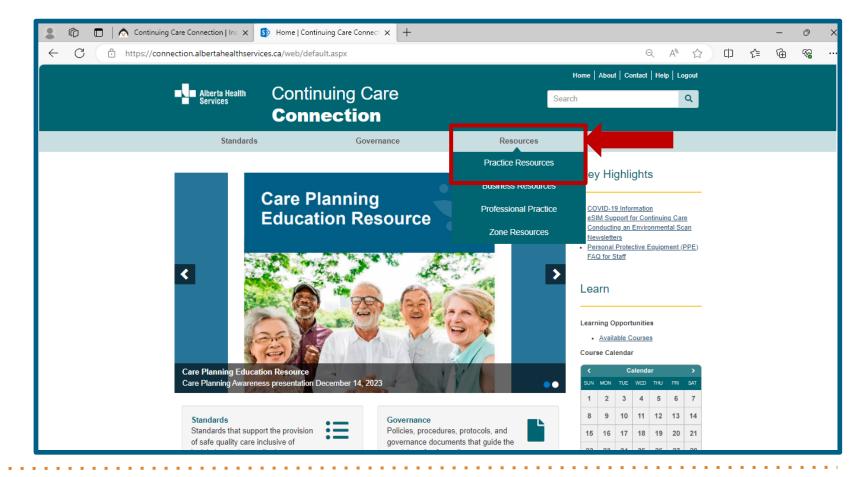
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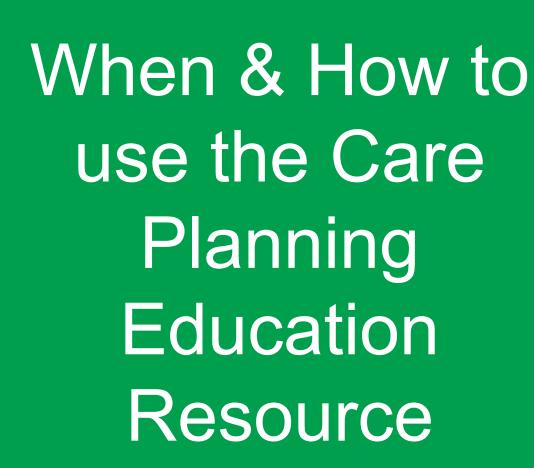
**Practice** 

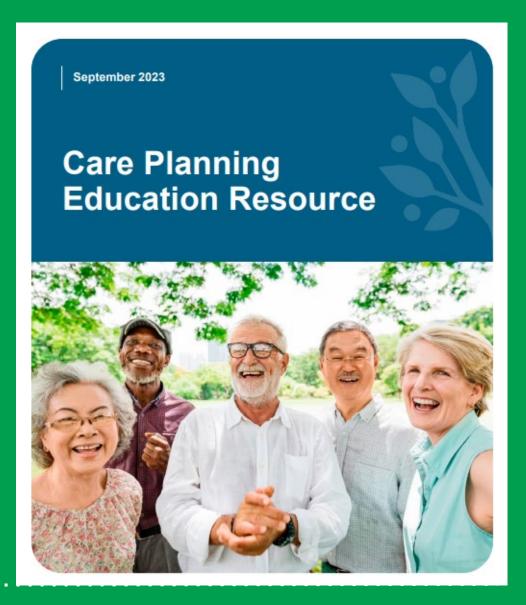
Resources >

Care Planning >

Care Planning Education Resource







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## Sally's Assessed Needs



Sally is an 86-year-old widow, born and raised on a rural Alberta farm.

#### **Strengths**

- Highly physically active
- Enjoys the garden
- Supportive family

#### **Family Priorities**

Address Fall Risk in care plan



## Navigate the Care Planning Education Resource

#### Fall Risk

- Definition of a fall
- Risk of falls
- Strength-based approach to falls e.g. fall prevention
- Establishing goal statements



#### Fall Risk

A fall is defined as unintentionally coming to rest on the ground, floor or other lower level with or without an injury (Canadian Falls Prevention Curriculum Education, 2007). Falls are the **leading** cause of injury among older Canadians, with 20-30% of seniors 65 years and older experiencing one or more falls each year (Government of Canada, 2021). This number increases to 50% for those 80 years of age and older (NICE, 2013). Falls can have various outcomes ranging from no injury or minor injury to serious injury or death.

Falls can significantly impact the individual, their family and friends, and the healthcare system. A comprehensive falls risk management strategy is important across the continuum of care to support client safety and quality improvement.

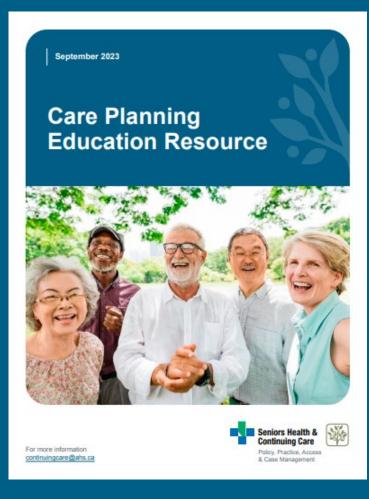
Falls are NOT a normal part of healthy aging. There are actions you can take to prevent falls.

Several age-related changes occur, which can increase someone's risk of falling. However, falls are not a normal part of healthy ageing. There are actions you can take to prevent falls. When care planning to reduce falls or reduce the risk of injury from falls, consider the impact of the following:

- · mental status (cognition, behaviour, substance abuse)
- · impact of medications (polypharmacy, side-effects such as dizziness)
- physical status (diagnosis, gait, frailty, mobility)
- risk factors (previous falls, decline in health, environment)



### Next Steps



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### **Questions?**

Email continuingcare@ahs.ca





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