

POA Form: Quick-TIPS



POA Item	<p style="text-align: center;"><i>“Your POA is a Work-in-Progress”</i></p> <p style="text-align: center;">Review it...and modify!</p>
Team members	Based on the target outcome, include staff clinicians, quality staff, external consultants (physician, pharmacist, nutritionist), HH medical advisor, and / or agency management staff.
Titles/Disciplines	Specify appropriate disciplines and titles.
Target Outcome	Use tool for Selecting Target Outcomes for in-depth understanding and selection. Access this tool - Toolkits and Resources on www.cfmc.org
Remediation or Reinforcement	<ul style="list-style-type: none"> • Remediation: Done to improve the selected Target Outcome by changing the care behaviors of the staff. • Reinforcement: Done to maintain a good outcome by reinforcing exemplary care behaviors currently being practiced by the clinical staff.
Problem or Strength Statement	<p>Upon completion of the Process of Care Investigation, highlight in 1-2 sentences, the problems that were identified. These should be areas that are under your control and you can directly impact:</p> <ul style="list-style-type: none"> • <i>Patient Care Processes</i>: related to Assessment, Clinical Interventions, Coordination of Care/Communication. Ex: Clinicians do not utilize clinical interventions to decrease pain when a low to moderate pain level is present (2-4 on a scale of 0-10) and interfering with activity. • <i>Problems related to documentation are not sufficient</i>
Best Practices	<p>Best Practices state the specific <i>clinical behaviors</i> to be done in very specific patient care situations:</p> <ul style="list-style-type: none"> • Describe <i>when, who, what, how</i> for each Best Practices. This ensures consistency of care delivery. • Identify care processes other than just assessment in order to move the outcome’s rate. <p>Ex: At SOC and every visit, the nurse or therapist utilize clinical interventions to address low to moderate pain levels that are interfering with activity. (pharmacologic/non-pharm methods)</p>
Intervention Actions	<p>Every Best Practice should have an Intervention Action to ensure that it is implemented & achievable.</p> <p>Identifying only one action (e.g. inservice) to inform staff about the desired change is seldom sufficient.</p> <p>Strive for several different interventions: development of new patient teaching tools, developing clinical competencies required of the staff, establishing multidisciplinary work groups to implement the Best Practice, setting up a mentoring system, requesting</p>

	<p>consultation from clinical specialists.</p> <p>State what the quality team will actually do to implement the best practices:</p> <ul style="list-style-type: none"> • Intervention Action – describe it. (List of examples on Toolkits and Resources, www.cfmc.org) • When – what are the start and finish drop-dead dates? • Who is the lead person responsible for getting this done? • Monitoring Activity – How will you know it was completed? <p>Ex: Intervention Action: Develop a standardized care plan for patients having pain interfering with activity with specific interventions (pharmacologic and non-pharmacologic) included for low to moderate pain levels.</p> <p>Monitoring Activity: Susie Q. will present draft of care plan to team on 2/14/05; get feedback; make revisions; test on five patients for one week; get results back to team 2/28/05. Make final revisions by 3/06/05; Ready for inservicing staff.</p>
Evaluation	<p>6a - Refers to the team's quarterly evaluation of the POA (in its entirety). An identified date for the evaluation needs to be stated. A specific person also needs to be identified who will be responsible for ensuring that the evaluation takes place.</p> <p>6b – Checking your outcomes rates: (OBQI Outcome Reports on CASPER) Your agency's outcome reports should be printed out & reviewed <i>quarterly</i> to determine the real impact of the POA, specifically the best practices.</p> <p>6c –Monitoring activities: focus on best practices; will tell you whether staff is following the best practices, which will lead to improvement in the outcome.</p> <ul style="list-style-type: none"> • Concurrent Chart Review for Best Practices: is the most effective tool for monitoring best practices. See Toolkits and Resources on www.cfmc.org • Concurrent Chart Review – do <i>at least monthly for the first year</i> then quarterly to maintain/sustain improvement. • Other monitoring activities: peer reviews, supervisory visits, case conferences, and staff meetings