

1. Preferences

- Advance Directives
Eg. MOST
- Treatment Agreements
- Vaccination Declined
- Pharmanet Consents
- Info Disclosure/Permissions

2. Goals/Targets

- Non-standard Goals
Eg. A1C <8
- CA Survivorship
Eg. Quantitative-Chest xray 1 per yr
- Diet, Exercise, Weight
- Smoking Cessation
- Sleep
- Meditation
- Lifestyle discussion
- Future Referrals

3. Barriers to Care

- Can't afford meds
- Transportation issues
- Safety concerns/violence risks
- Low IQ
- Treatment Agreement Adherence (running log)
- Behaviour
- Psycho social

Uploading to Powerchart

1. Go to patient's Care Plan and click "Copy to Clipboard" on the top right. Create a snapshot in the second tab.
2. Log into Power Chart.
3. Select an appropriate patient encounter.
When choosing please consider...
1st priority – current active inpatient encounter
2nd priority – most recent encounter in local community (Nice to have but not essential -most recent inpatient encounter in local community)
3rd priority –avoid historical encounter.
4. Click on Documents Viewing.
5. Click on Add button (Add+).
6. In the drop down menu, select "Shared Care Plan".
7. Type "care plan" (or "care plan/advance directive) in Subject.
Then paste (ctrl + v) the Care Plan into the blank field.
8. Click "Sign".
(or the Care Plan will not be viewable by other Users.)

4. Patient Resources

- Support of family, friends
- Son drives to appointment
- Spirituality
- Recovery programs
- Habits
Eg. Exercise
- Home care for bathing

5. Planned Actions

- Chronic Pain Plan
Eg. Tapering
- Mental Health
Eg. CBT goals
- Interventions
- Lifestyle discussion
- Assessments
- Tapering Meds
- Teaching
Eg. glucose monitoring, inhaler technique, etc.

6. Auto Populate

(Data "pulled" into the Care Plan if you have entered them in MOIS)

- Health Conditions
- Long Term Medications
- Allergies
- Connections
- Associated Parties
Eg. Emergency Contact
- Extended benefits
- 7. Tagging
- Patient chart items can be tagged to show on the care plan.
Eg. Measures like PHQ9 or GAD7, Extended Benefits from Demographics.

IPT Service Request Guide

If urgent or if you need to discuss further please send service request and call IPT at 250-565-2612

Remember, some patients can access ICBC, WCB, EFAP, and Extended Health Benefits instead.



In your referral letter please include:

1. Client demographic info: name, address, phone number, PHN, alternative contact⁶ (name, phone, relationship with client)
2. Reason for referral/resources needed
3. Any known safety concerns/violence risk³
4. If known, best times to connect with client, or if a coordinated appointment with clinic is most appropriate
5. Priority level

Urgent: 1 day, **Semi-Urgent:** 1 week, **Routine:** 2-4 weeks

Please Include your Care Plan, and/or the following in your letter if available:

Mental Health Mental Status Exam ⁷ PHQ9 ⁷ GAD 7 ⁷ Suicidal ideation & plan ⁷	Social Work Barriers to accessing resources ³	Long Term Case Management ADL/IADL - Finances ³ - Mobility/Transfers - Frailty (CSHA) ⁷ Recent fall history Family support/caregiver burn out ⁴ Cognitive assessment (MoCA, MMSE) ⁷	Nursing Relevant assessment
PT/OT If home safety: recent fall history, palliative performance scale (PPS), cognitive screen If acute post-operative orthopedic: type of surgery and date ⁷ , weight bearing status, post-op precautions/contradictions ¹ If wound/pressure injury: location, stage ⁷ If chronic pain: consults ⁷ Other: relevant assessment			