

## Guidelines for Discussion at IDT

### Upcoming Recerts

1. Have goals been met?
2. Outstanding issues/barriers to reaching goals.
3. If recerting patient-What is the skill and /or clinical needs?
4. If recerting-Establish frequency and duration. Identify specific reason for recert and update the diagnosis.
5. Make sure the F2F has been obtained. If appointment has occurred and order has been discharged, ask Clinical Coordinator to call MD Office and follow up with fax for MD to complete.
6. Utilize Recertification "Clinical Toolkit" to help guide discussion
7. If applicable, review patient's PAM score and discuss how clinician can engage patient using appropriate tools and approaches
8. If patient is on telehealth, discuss patient's progress to self-management and/or continued need for TH based on clinical instability and ask primary clinician to communicate plan for continuing on TH with TH nurse.

### Starts of Care

1. Refer to print out from Home Health Gold-discuss HHRG
2. Identify disciplines that should be involved. Include review of risk tools to target specific disciplines (MAHC-10, Depression, Braden, etc)
3. Check for F2F-if no F2F make sure appointment has been scheduled within 30 days of start of care.
4. Review MD info for accuracy-identify who will be signing orders.
5. Discuss medications, diagnosis and plan of care.
6. Assess for community resources.
7. Assess for Telehealth and Lifeline.
8. Review DNR status and Health Care Proxy.
9. Refer to Clinical Pathways (if applicable).
10. Identify barriers to care. Assess for risks and determine if meets criteria for vulnerable patient.
11. Identify caregivers and list in attributes.
12. If applicable, review patient's PAM score and discuss how clinician can engage patient using appropriate tools and approaches

### Potential LUPAs

1. Review reason for LUPA.
2. If patient is a long term patient (i.e. B12, Foley cath) assess for change in condition or need for additional services and equipment. Assess for inclusion in Vulnerable Patient population.
3. If hospitalized-determine reason for hospitalization and whether Liaison Nurse should be contacted.

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### Vulnerable Patients

1. Review home safety assessment.
2. Review reason for identifying patient as vulnerable and whether status is the same. Review risk factors. Utilize criteria grid to guide discussion toward patient-specific risk factors.
3. Compare most recent OASIS with last OASIS to identify any areas of decline and address with new plan of care interventions.
4. Follow VP clinical protocol to determine need for MSW, PT and/or OT.