

<h3>1. Preferences</h3> <ul style="list-style-type: none"> • Advance Directives Eg. MOST • Treatment Agreements • Vaccination Declined • Pharmanet Consents • Info Disclosure/Permissions 	<h3>2. Goals/Targets</h3> <ul style="list-style-type: none"> • 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 	<h3>3. Barriers to Care</h3> <ul style="list-style-type: none"> • Can't afford meds • Transportation issues • Safety concerns/violence risks • Low IQ • Treatment Agreement Adherence (running log) • Behaviour • Psycho social 	<h3>Prepare your CarePlan for upload</h3> <ol style="list-style-type: none"> 1. Click Review in Health Conditions, Long Term Medications, & Allergies. 2. Update Associated Parties if information is available. 2. Confirm patient's name, gender, DOB, PHN, and insurance type match CERNER. <h3>Upload your CarePlan</h3> <ol style="list-style-type: none"> 1. Under the Care Plan section, click Distribute. 2. A new window will open. Check that the correct physician is entered as the author. Select NH POWERCHART as the Primary Recipient. 3. Ensure that Type is set to SHARED CARE PLAN and Diagnosis is entered as COORDINATION OF CARE PLAN". 4. Click Distribute. A second screen will appear, click Distribute again.
<h3>4. Patient Resources</h3> <ul style="list-style-type: none"> • Support of family, friends • Son drives to appointment • Spirituality • Recovery programs • Habits Eg. Exercise • Home care for bathing 	<h3>5. Planned Actions</h3> <ul style="list-style-type: none"> • Chronic Pain Plan Eg. Tapering • Mental Health Eg. CBT goals • Interventions • Lifestyle discussion • Assessments • Tapering Meds • Teaching Eg. glucose monitoring, inhaler technique, etc. 	<h3>6. Auto Populate</h3> <p>(Data "pulled" into the Care Plan if you have entered them in MOIS)</p> <ul style="list-style-type: none"> • Health Conditions • Long Term Medications • Allergies • Connections • Associated Parties Eg. Emergency Contact • Extended benefits <h3>7. Tagging</h3> <ul style="list-style-type: none"> • 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



Patients who have access to ICBC, WCB, EFAP and Extended Health Benefits should explore those options first prior to accessing IPT Services.

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 and Urgency (Urgent = 1 day, Semi-urgent = 1 week, Routine = 2-4 weeks)
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

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			