

## 1 Creating a Patient Centred Care plan

When creating a new care plan for a patient, or rebuilding a care plan for a patient, there will be a new option to select the style of care plan.

Clinical Care Plan is the traditional Inca care plan  
Patient Centred Care Plan is the new type of care plan.

Select the 'Patient Centred Care Plan' then click 'Next'



### *What is a Patient Centred care plan?*

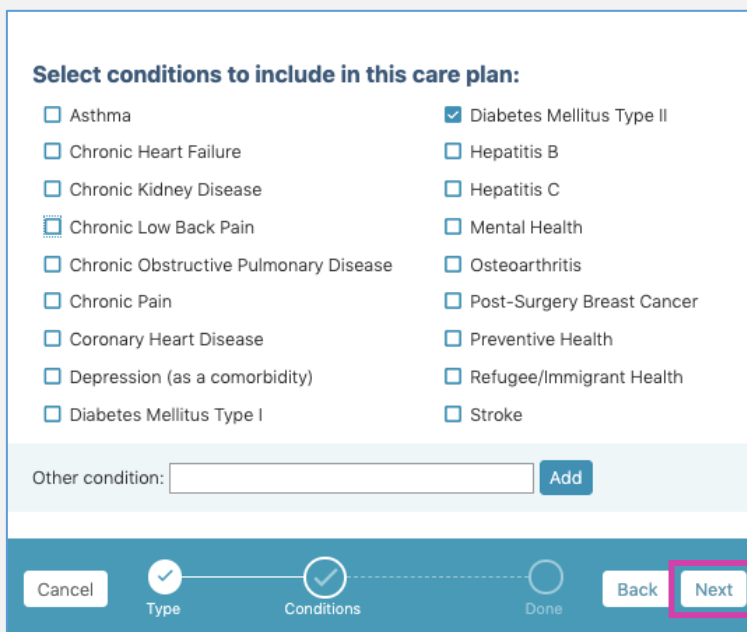
A patient centred care plan:

- ✓ **Is easier to read and navigate** – the plan is organised into sections that allows GP and nurses to easily complete and review the plan
- ✓ **Has a dedicated patient section with relevant, simple patient tasks** – patient tasks appear first in the care plan and divided into daily and ongoing tasks.
- ✓ **Recent patient bloodwork appears on the plan** – The patient's latest bloodwork values from the PMS will appear on the care plan
- ✓ **Simply assign tasks to referrals on the care plan** – the referrals on the care plan are managed in one section.

## 2

### Care Plan Workflow

Continue with the care plan workflow by selecting the conditions on the plan and the members on the care team.



Select conditions to include in this care plan:

<input type="checkbox"/> Asthma	<input checked="" type="checkbox"/> Diabetes Mellitus Type II
<input type="checkbox"/> Chronic Heart Failure	<input type="checkbox"/> Hepatitis B
<input type="checkbox"/> Chronic Kidney Disease	<input type="checkbox"/> Hepatitis C
<input type="checkbox"/> Chronic Low Back Pain	<input type="checkbox"/> Mental Health
<input type="checkbox"/> Chronic Obstructive Pulmonary Disease	<input type="checkbox"/> Osteoarthritis
<input type="checkbox"/> Chronic Pain	<input type="checkbox"/> Post-Surgery Breast Cancer
<input type="checkbox"/> Coronary Heart Disease	<input type="checkbox"/> Preventive Health
<input type="checkbox"/> Depression (as a comorbidity)	<input type="checkbox"/> Refugee/Immigrant Health
<input type="checkbox"/> Diabetes Mellitus Type I	<input type="checkbox"/> Stroke

Other condition:

Cancel ✓ Type ✓ Conditions ○ Done

A



## Patient vision for their health in the next 12 months

Improve mobility and stamina

B

## Patient Actions and Timelines

Add additional tasks to this section

## Daily Actions and Activities



- Eat a balanced diet of fruit, vegetables, whole grains, lean proteins and healthy fats ① ...
- Walk around neighbourhood 20 minutes per day each evening ...
- Routinely check for changes in feet e.g swelling, colour changes, pain, sores etc ...
- Home blood glucose monitoring (as directed once per day) ...

## Ongoing Activities



- Avoid excessive alcohol drinking maintaining maximum 2 drinks per day ...
- Reduce the number of cigarettes smoked by 2 until next review ...
- Aim to reduce weight by 5% by the next review ...

Delete this task

C

## Evidence and Outcomes

## Clinical Outcomes and Procedures



Action	Target	Latest Value	Frequency
Cholesterol ...			
<input checked="" type="checkbox"/> HDL (mmol/L)	≥ 1	2	Every year
<input checked="" type="checkbox"/> LDL (mmol/L)	< 2	4	Every year
<input checked="" type="checkbox"/> Total Cholesterol (mmol/L)	< 4	4	Every year
<input checked="" type="checkbox"/> Triglycerides (mmol/L)	< 2	3	Every year
<input checked="" type="checkbox"/> Microalbumin (Spot Albumin : Creatinine Ratio) (mg/mmol)	Add Target		Every year ...
<input checked="" type="checkbox"/> Blood Pressure (mmHg)	≤ 130/80	160/100	Every 6 months ...
Blood Glucose ...			
<input checked="" type="checkbox"/> Blood Glucose Level (mmol/L)	< 7	9	Every year
<input checked="" type="checkbox"/> HbA1c (mmol/mol)	≤ 53	56	Every year

D

## Treatments



Action	Team Member	Frequency	Notes
<input checked="" type="checkbox"/> Diabetes education	Diabetes Educator	Every year	Add Note ...
<input checked="" type="checkbox"/> Diet and lifestyle advice	GP	Every year	Add Note ...
<input checked="" type="checkbox"/> Endocrinologist review	Endocrinologist	As required	Add Note ...
<input checked="" type="checkbox"/> Optometry review	Optometrist	Every year	Add Note ...
<input checked="" type="checkbox"/> Medication review	GP	Every year	Add Note ...
<input checked="" type="checkbox"/> Podiatry review	Podiatrist	Every year	Add Note ...
<input checked="" type="checkbox"/> Dietitian review	Dietitian	Every year	Add Note ...
<input checked="" type="checkbox"/> Foot exam	GP	Every 6 months	Add Note ...

**A** – This is the overall patient goal for their care plan

**B** – Patient Actions and Timeline: All patient tasks can be completed in this section which includes daily activities or ongoing activities

**C** – Clinical Outcomes and Procedures: this includes the clinical investigations and blood tests that should be completed for the patient. This section also shows any relevant latest results that is present in the PMS

**D** – Treatments: this is all of the interventions a patient should be undertaking by care team members on their care plan. The interventions are assigned to a specialty that corresponds to members on the care team.