

INTERNATIONAL ACADEMY OF LIFE CARE PLANNERS (IALCP) – STANDARDS OF PRACTICE

Life care planning has evolved from a practice primarily within the field of litigation support to application in elder care, chronic illness, and discharge planning. The need for standards of practice has become more critical with this growth.

As the professional transdisciplinary organization for life care planners, the International Academy of Life Care Planners has developed Standards of Practice. Committee Chairwoman Sharon Reavis, RN, MS, CRC, CCM, Karen Preston, PHN, MS, CRRN, and Roger Weed, PhD, CRC, CDMS, CCM, CLCP, worked more than two years to develop these standards, consistent with the diversity of practice settings and individual professional standards of practice.

These standards will evolve as they are influenced by changes in the various professions of life care planners and by external forces, such as accrediting bodies and courts of law.

The field reviewed standards, which apply to the current practice of life care planning in all settings, are presented here for the use of life care planners.

Questions regarding Standards of Practice as published by the IALCP, may be directed to the national office, via email (debbiew@tcag.com) or telephone: (847) 657-6964.

I. Introduction

A. Definition of Life Care Planning

The Life Care Plan is a dynamic document based upon published standards of practice, comprehensive assessment, data analysis and research, which provides an organized, concise plan for current and future needs with associated cost for individuals who have experienced catastrophic injury or have chronic health care needs.

B. Historical Perspective

The development of a comprehensive plan of care has always been considered an integral part of the medical and rehabilitation process. This type of plan has historically been used by multiple disciplines. Rehabilitation professionals create a rehabilitation plan. Nurses develop a nursing care plan. Physicians define a medical treatment plan, and other professions develop plans specific to their practice. Pursuant to rapid growth in medical technology and an increased emphasis on the cost of care, including concepts of managed care, information regarding the specific cost of care has become an increasingly important aspect of health care. This process of developing a comprehensive plan and delineating costs has evolved over an extensive period of time and is now utilized by case managers, counselors, and other professionals in many sectors. This concept represents an acceptable and pragmatic approach to the delivery of services within myriad sectors of the health care delivery system.

The concept of Rehabilitation/Life Care Plans has been utilized in a variety of health care and legal settings to provide information and documentation regarding the cost of services related to long-term care. These plans are also provided as valuable tools for rehabilitation planning, geriatric services implementation, management of health care resources, discharge planning, educational planning, and long-term managed care, among other areas.

C. Transdisciplinary Perspective

Life Care Planning is a transdisciplinary specialty practice. Each profession brings to the process of Life Care Planning practice standards which must be adhered to by the individual professional, and these standards remain applicable while the practitioner engages in Life Care Planning activities. Each professional works within specific standards of practice for their discipline to assure accountability, provide direction, and mandate responsibility for the standards for which they are accountable. These include, but are not limited to, activities related to quality of care, qualifications, collaboration, law, ethics, advocacy, resource utilization, and research. Moreover, each individual practitioner is responsible for following the Standards of Practice for Life Care Planning in addition to the standards for the qualifying profession.

In addition, the individual practitioner must examine their qualifications as applied to each individual case. Therefore, a thorough knowledge of the medical diagnosis, disability and long-term care considerations, by virtue of education and experience, is a necessary component of the practitioner's competency for each individual case.

D. Education/Preparation/Certification

The Life Care Planner must:

- 1.** Possess the appropriate educational requirements as defined by their professional standards; e.g., nurses should possess the requirements to acquire licensure, rehabilitation counselors should possess the requisite Masters Degree, and other health professionals should possess the required degree for their field.
- 2.** Maintain current professional licensure or National Board Certification within a professional health care discipline.
- 3.** Demonstrate completion of an accredited program in nursing or a baccalaureate or higher level educational program in a professional health care field. Fields may include, but not be limited to, nursing, rehabilitation counseling, medicine, physical, occupational or speech therapy, or psychology.
- 4.** Demonstrate professional discipline provides sufficient education and training to assure that the Life Care Planner has an understanding of human anatomy and physiology, pathophysiology, the health care delivery system, the role and function of various health care professionals, and clinical practice guidelines and standards of care.
- 5.** Participate in specific continuing education, required to maintain the individual practitioner's licensure or certification within their profession.
- 6.** Obtain continuing education and/or training to remain current in the knowledge and skills in the field.

II. Philosophical Overview/Goals of Life Care Planning

The Life Care Plan should be a working document that provides accurate and timely information which can be easily used by the client and interested parties. It should be a document that can be updated and serve as a lifelong guide to assist in the delivery of health care services in a managed format.

It is appropriate, if possible, for the care plan to be a collaborative effort among the various parties and should reflect goals that are preventive and rehabilitative in nature. As a dynamic document, the Life Care Plan will require periodic updating to accommodate changes and should have as its goal quality outcomes.

Goals / Life Care Plans:

In accordance with the professional Standards and Codes of Ethics for the various practitioners and clinicians who are able to perform life care planning, the client is considered the person with a disability or illness who receives services. In life care planning, the client is defined as the person who is the subject of the life care plan.

- A.** To assist the client in achieving optimal outcomes by developing an appropriate plan of prevention of complications and restoration. This may include recommendations for evaluations or treatment that may contribute to the client's level of wellness or provide information regarding treatment requirements.
- B.** To provide health education to the client and interested parties, when appropriate.
- C.** To develop accurate and timely cost information and specificity of service allocations that can be easily utilized by the client and interested parties.
- D.** To develop options for care that may be necessary for alternative situations.
- E.** To communicate the Life Care Plan and objectives to the client and interested parties, when appropriate.
- F.** To develop measurement tools, which can be used to analyze outcomes.
- G.** To routinely develop comprehensive assessments of the projected goals of the Life Care Plan, whenever possible.

III. ROLE AND FUNCTIONS OF LIFE CARE PLANNING

A. Scope of practice/applications

As a member of a health care profession, the Life Care Planner must remain within the scope of practice for that profession as determined by state or national bodies. The functions associated with performing Life Care Planning are within the scope of practice for health care professionals, or evidenced by assessment.

Research analysis of data and evaluation of care recommendations are key elements in the functions of life care planning. In performing these elements, the Life Care Planner will communicate with a variety of health care professionals regarding a case. The Life Care Planner does not assume decision-making responsibility beyond the scope of his/her own professional discipline.

B. Specialization features

The Life Care Planner must have skill and knowledge in understanding the health care needs addressed in a Life Care Plan. Consultation with others and obtaining education are expected when the Life Care Planner must address health care needs that are new or unfamiliar. The Life Care Planner must be able to locate appropriate resources when necessary. The Life Care Planner provides a consistent, objective, thorough methodology for constructing the Life Care Plan, while relying on appropriate medical and other health related information, resources, and personal expertise for developing the content of the Life Care Plan. The Life Care Planner relies on state-of-the-art knowledge and resources to develop a Life Care Plan.

Specialized skills are required to successfully develop a Life Care Plan. These include, but are not limited to, the ability to research, critically analyze data, manage and interpret large volumes of information, attend to details, demonstrate clear and thorough written and verbal communication skills, develop positive relationships, create and use networks for gathering information, work autonomously, and demonstrate a professional demeanor and appearance.

C. Functions

1. Assessments – Assessment is the process of data collection and analysis involving multiple elements and sources.

- a. Collects data that is systematic, comprehensive, and accurate.
- b. Collects data about medical, health, biopsychosocial, financial, educational, and vocational status and needs.
- c. Obtains information from medical records, client/family/significant others (when available or appropriate), and relevant treating or consulting health care professionals. If

access to any source of information is not possible (e.g., denied permission to interview the client), this should be so noted in the report.

2. Plan Development Research

The determination of content and the cost research components of Life Care Planning require a consistent, valid and reliable approach to research, data collection, analysis, and planning. The Life Care Planner:

- a. Determines current standards of care and clinical practice guidelines from reliable sources, such as current literature or other published sources, collaboration with other professionals, education programs, and personal clinical practice.
- b. Researches options and costs for care, using sources that are reasonably available to the client.
- c. Considers appropriate criteria for care options such as admission criteria, treatment indications or contraindications, program goals and outcomes, whether recommended care is consistent with standards of care, duration of care, replacement frequency, ability of the client to appropriately use services/products, and care is reasonably available.
- d. A consistent method is used to determine available choices and costs.
- e. When available and/or helpful in providing clarity, classification systems (e.g. ICD-9, CPT) are used to correlate care recommendations and costs.
- f. Knowledge is maintained of care standards, services and products through continuing education, literature, exhibits, etc.

3. Data Analysis

- a. Analyzes data to determine client needs and consistency of care recommendations with standards of care.
- b. Assesses need for further evaluations or expert opinions.

4. Planning

- a. Follows a consistent method for organizing data, creating a narrative Life Care Plan report and cost projections.
- b. Develops and uses written documentation tools for reports and cost projections.
- c. Develops recommendations for content of the Life Care Plan cost projections for each client and a method for validating inclusion or exclusion of content.

5. Collaboration

- a. Develops positive relationships with all parties.
- b. Seeks expert opinions, as needed.
- c. Shares relevant information to aid in formulating recommendations and opinions.

6. Facilitation

- a. Maintains objectivity and assists others in resolving disagreements about appropriate content for the Life Care Plan.
- b. Provides information about the Life Care Planning process to involved parties to elicit cooperative participation.

7. Evaluation

- a. Reviews and revises the Life Care Plan for internal consistency and completeness.
- b. Reviews the Life Care Plan for consistency with standards of care and seeks resolution of inconsistencies.
- c. Provides follow-up consultation to ensure that the Life Care Plan is understood and properly interpreted.

8. Testimony

If the Life Care Planner engages in practice that includes participation in legal matters, the Life Care Planner:

- a. Acts as a consultant to legal proceedings related to determining care needs and costs.
- b. May provide expert sworn testimony regarding development and content of the Life Care Plan.
- c. Maintains records of research and supporting documentation for content of the Life Care Plan.

IV. Standards of Performance

a. Ethical

Ethics refers to a set of principles of "right" conduct, a theory or a system of moral values, or the rules or standards governing the conduct of a person or members of a profession. The primary goal of practice ethics is to protect clients, provide guidelines for practicing professionals, and to enhance the profession as a whole. Within the Life Care Planning industry all practitioners are members of one or more professional disciplines and/or are licensed or certified. It is expected that Life Care Planners follow appropriate relevant ethical guidelines within their areas of professional practice and expertise.

Life Care Planners are expected to maintain appropriate confidentiality, avoid dual relationships, adequately advise clients of the role of the Life Care Planner, and maintain competency in the profession.

1. Confidentiality: Appropriate confidentiality is a sensitive and important concept. Some professionals will have communications protected by "privilege" which is statutorily based in each state. For example, although no "Life Care Planners" are currently covered by privilege, many may be professional counselors, licensed psychologists or others who have the additional statutory protection. In addition, litigation has the additional component of attorney work product that may have an effect on what information may be disclosed. The Life Care Planner must be thoroughly informed on this topic.

Dual relationships: A personal relationship with a client is not appropriate during the course of service. Developing Life Care Plans for friends, co-workers, professional colleagues, or anyone where the objectivity and professionalism of the care plan is questions should be avoided.

2. Client advisement of role: Each client should be fully informed about the role of the Life Care Planner. For example, the client should be fully informed about who is requesting the Life Care Plan as well as the confidentiality of communications. Also, Life Care Planners who have dual role responsibilities should clarify that they are not acting as a case manager, psychologist, etc. and what the limits of their participation might be.

Competency: The Life Care Planner is expected to accurately represent any information received for a particular case. Medical recommendations are to have an appropriate medical foundation. Research information that the Life Care Planner has obtained for all aspects of care should be readily available for examination by appropriate reviewers.

b. Research

The Life Care Plan will have as its basis the Scientific Principles of medicine and health care. The involvement of the Life Care Planner in the area of research should include, but not limited to, the following objectives:

- 1.** The Life Care Planner will strive to identify and participate in research independently or in collaboration with others, utilizing research tools and activities that will promote quality outcomes.
- 2.** The Life Care Planner will critique literature for application to life care planning.
- 3.** The Life Care Planner will use appropriate research findings in the development of Life Care Plans.

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