

Implementation of Individualized Interdisciplinary Plan of Care (IPOC) for Each and Every Patient

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Introduction

Interdisciplinary Plan of Care (IPOCs) help develop nursing interventions based on the individual patient's need. IPOCs can improve patient satisfaction and outcomes by addressing individual patient assessments and incorporating proper education and interventions to correct abnormal findings (Jakobsson & Wann-Hansson, 2013). If a nurse charts "Not within" for any of the assessment categories, an individualized IPOC should be documented to address the patient's current medical issues (Keller, 2015).

Results

Results on 4-South are ongoing. Audits are done monthly to track progress on nursing compliance with the individualized IPOC. Feedback is sent via email with up-to-date trends. Nurses who go above and beyond with charting will be recognized on a monthly basis.

Methodology

A baseline retrospective chart review conducted on 20 random charts from 4-South, Orthopedic/Trauma unit found a 10% compliance rate of individualized IPOCs being documented by nursing staff. Further review indicates a 15% compliance rate with ongoing individualized IPOCs documentation throughout the patients' stay prior to the project. IPOC documentation education, targeted towards nursing staff on this unit, was delivered via e-mail and an informational trifold placed in the breakroom.

Examples of IPOCS

- Anxiety
- Diabetes
- Smoking/tobacco use
- Asthma
- Arrhythmias
- Hypertension
- Pain
- Safety concerns
- Impaired skin integrity
- Obstetrical/GYN

Conclusion

Evidence based practice shows that an individualized IPOC increases the quality of care patients receive, allows patients to address their own comorbidities, encourages collaboration, and increases patient safety (Jansson, Pilhammar-Andersson & Forsberg, 2010). When nurses individualize IPOCs they advocate for their patients and decrease future readmissions. Individualized IPOCs can improve cost savings and patient satisfaction (Comp, 2011).

References

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