

# **Field Review: Revised Standards of Practice for Life Care Planners**

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Life care planning continues to evolve as a specialty practice. In 2000, the first Standards of Practice for Life Care Planners were developed and put forth for field review. For one year, practitioners provided input into the Standards and in 2001 the Standards were finalized and published. The Standards of Practice have provided guidance and parameters for professional practice since that time. All Standards require repeated review, as the specialty practice is influenced by change in various professions. The International Academy of Life Care Planners (IALCP) saw the need for review and revision, as the organization moved toward a new model of management, growth and development. Sharon Reavis, MS, RN, CRC, CCM, FIALCP; Karen Preston, PHN, MS, CRRN, FIALCP; and Roger Weed, PhD, CRC, CDMS, CCM, CLCP, FIALCP, agreed to revisit the Standards for relevancy and meaning to current life care planning practice.

Completed in time to celebrate the merger of IALCP and IARP, the revised Standards of Practice are presented here for review and response from the field. The IALCP welcomes your input at [ialcp@aol.com](mailto:ialcp@aol.com). Field review will be open until February 15, 2006.

## **STANDARDS OF PRACTICE FOR LIFE CARE PLANNERS**

### **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 costs 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

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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 Life Care Planning 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 valuable tools for rehabilitation planning, geriatric services implementation, management of health care resources, discharge planning, educational planning, and long-term managed care.

### **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 assuring accountability, direction, guidance and responsibility to 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
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baccalaureate or higher level educational program in a professional health care field. Practitioners may include, but not be limited to, nursing, rehabilitation counseling, medicine, physical, occupational or speech therapy, or psychology.

4. Demonstrate that the 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.

## **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 life-long 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 of Life Care Plans:**

The life care plan is developed to:

- A. Assist the client in achieving optimal outcomes by developing an appropriate plan for prevention for 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. Provide health education to the client and interested parties, when appropriate.
  - C. Reflect accurate and timely cost information and specificity of service allocations that can be easily utilized by the client and interested parties.
  - D. Identify options for care that may be necessary for alternative situations.
  - E. Communicate the Life Care Plan and objectives to the client and interested parties, when appropriate.
  - F. Specify measurement tools, which can be used to analyze outcomes.
  - G. Clarify the projected goals of the Life Care Plan, whenever possible.
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### 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.

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 detail, 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. Assessment – Assessment is the process of data collection and analysis involving multiple elements and sources.

The Life Care Planner:

- 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
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treating or consulting health care professionals, when possible. 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. Uses a consistent method to determine available choices for care, goods and services, and costs.
    - e. Uses classification systems (e.g. ICD-9, CPT) to correlate care recommendations and costs, when available.
    - f. Maintains knowledge of standards of care, services and products through continuing education, literature, exhibits, research and collaboration with colleagues.
  3. Data Analysis: The Life Care Planner:
    - 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: The Life Care Planner:
    - 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: The Life Care Planner:
    - 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: The Life Care Planner:
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- 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: The Life Care Planner:
- 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 as an expert witness, the Life Care Planner:
- a. Acts as a consultant in legal proceedings related to determining care needs and costs.
  - b. Provides 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 ethics is to protect clients, provide guidelines to practicing professionals, and enhance the profession as a whole. Within the Life Care Planning specialty, 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 ethically conflicting dual or multiple relationships, and 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. Litigation has the additional component of attorney work
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product that may have an effect on what information may be disclosed. The Life Care Planner must be thoroughly informed on this topic.

2. **Dual or multiple 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 questioned should be avoided. Serving in dual or multiple professional roles, such as case manager or treater, is permitted as long as the simultaneous roles are not used for the purpose of providing benefit to the professional (e.g., recommending continued use of the professional without justification).
3. **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 the life care planning role is separate and should clarify what the limits of their participation might be.
4. **Competency:** The Life Care Planner is expected to accurately represent any information received for a particular case. Recommendations are to have medical, rehabilitation, psychological, and case management foundations with appropriate medical specialist and treatment team collaboration when possible, with support from medical recommendations, clinical practice guidelines, research, and other current literature.

Research information that the Life Care Planner has obtained should be readily available for review and reflected within the Life Care Plan.

Each case is unique and the Life Care Plan must demonstrate professional judgment in bringing together data, supporting documentation, and the individual characteristics of the person addressed within the plan.

The Life Care Planner should possess knowledge of professional legal requirements including the legal principles of consent and confidentiality including HIPAA requirements.

5. Life Care Planners are professionals, from varying educational backgrounds, who maintain professional conduct when addressing opposing Life Care Plan consultants. Life Care Plan consultants should focus upon methodology of plan development, supporting documentation for recommendations and plan content.
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**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 be 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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