



## PREFERENCE-BASED LIVING | FACILITATOR GUIDE: INTEGRATING PREFERENCES INTO CARE PLANNING

### ABOUT THE TRAINING VIDEO

Understanding and honoring individual preferences is a cornerstone of person-centered care. *Integrating Preferences into Care Planning* is a 34-minute training video that presents practical tips and strategies to help care team members collaborate effectively and develop care plans guided by each resident's preferences for daily living. The video highlights ways to:

- Include direct care workers' insights and perspectives into the care planning process
- Ask residents how satisfied they are with the way their preferences are being honored
- Create personalized care plans that enrich each individual's enjoyment and wellbeing.

The video shows two different examples of a care planning meeting. In the first scenario, the resident is capable of participating in the discussion along with her family member. In the second example, a family member takes part on behalf of a resident whose cognitive impairment prevents him from attending the session.

### WHO IS THIS VIDEO FOR?

The training video is geared to a diverse audience:

- Administrative staff
- Directors of nursing/unit managers
- Direct care workers (CNAs)
- Social workers
- Activity directors
- Dietary managers

### WHAT IS PREFERENCE-BASED, PERSON-CENTERED LIVING?

The concept of preference-based, person-centered care emphasizes "knowing the person" and honoring the way each individual likes to live daily life. This approach is based on the idea that people do not need to give up on the preferences that give life continuity and meaning, merely because they need to use long-term services and supports.

### WHAT IS THE PELI?

The *Preferences for Everyday Living Inventory (PELI)* is a scientifically validated quality improvement tool that can be used to assess resident preferences and inform care delivery. Research findings suggest that using the *PELI* as an assessment tool to promote person-centered care has benefits for residents, staff, and provider communities. Residents feel they have more control and purpose in their daily lives. Staff members become more comfortable caring for people they know. Nursing home communities using the *PELI* can meet regulatory mandates regarding person-centered care.

### BUT...WHAT ABOUT INDIVIDUALS WITH COGNITIVE OR COMMUNICATION PROBLEMS?

This training video provides examples of a care planning meeting conducted with a cognitively capable resident as well as a case where the resident cannot attend due to his advanced cognitive impairment. While it is always best to try to include residents with cognitive limitations in the care planning process, this is not feasible in some situations. The video provides guidance on how to structure care planning meetings that incorporate the resident's voice even when he or she is not present at the session.

### DISCUSSION QUESTIONS

The video can be viewed in its entirety or the facilitator may pause it at recommended intervals to allow for discussions along the way. Feel free to adapt the suggested discussion questions to meet your organization's needs:

### **Scenario 1 – Care Planning Meeting with Resident Participation**

- What are our organization’s values regarding person-centered care? (3:30)
- What is our current care planning process? Does our current process incorporate some form of preference assessment? (3:30)
- Do we currently integrate preference information into the care plan? If so, how? (3:30)
- How do we create a welcoming environment during care plan meetings? (6:10)
- Who is involved in the care planning process? Are all relevant departments represented? (8:48)
- Do we include certified nursing assistants (CNAs) in care plan meetings? If not, how can we gain their input? (8:48)
- Notice how all members of the team spoke directly to Mrs. Jones about her preferences. Does our team actively engage the individual and seek his or her input during the meeting? (12:47)
- During the conversation, it became apparent that Mrs. Jones’s snack preference had changed – and her daughter had a different impression of her mom’s preference. How do we handle changes in preferences? What do we do when residents and their families have different opinions about preferences? (12:47)
- At the end of the meeting, the social worker summarized the key points the group had been discussed. How does our team make sure everyone is on the same page before a meeting concludes? (17:30)
- If you had to receive long-term care services and supports, which important preferences would you want to inform and guide your care? (17:30)

### **Scenario 2 – Care Planning Meeting for a Resident with Cognitive Impairment** (start video at 17:31)

- In this example, Mr. Harris was unable to attend the meeting. How do we incorporate the voice of individuals who are unable to participate in the care planning process? How do we seek out or observe their preferences? (20:55)
- Do we invite family members, close friends or other trusted care partners – called “proxies” -- when we cannot learn about preferences directly from the resident? (23:16)
- Do we review a completed *PELI* or another preference assessment during the care plan meeting? (23:16)
- How does our team collaborate to come up with solutions to learn about and honor preferences? (30:15)
- In the video, James voiced frustration about not being updated on his dad’s condition. How does our team handle communication with family members? How do we ensure that family members understand the best way to communicate with us and vice versa? (30:15)
- After seeing the video, what questions do you have about our organization’s care planning process? Do you see areas where we could improve?
- How does our organization honor resident preferences? Do we use preferences to inform the care we provide? Give examples.
- After watching the training video, what barriers do you anticipate to integrating preferences into care plans? As a group, let’s brainstorm ways for to overcome any challenges.

These questions are designed to spark conversation and action aimed at translating the vision of preference-based care into everyday reality for residents.

#### **FOR MORE INFORMATION...**

- *PELI Tip Sheet: Integrating Preferences Into Care Plans* – for strategies to build personalized care plans.
- *PAL Card instructions and template* -- a tool to help communicate resident preferences across the care team.

*Visit our website at [preferencebasedliving.com](http://preferencebasedliving.com) for additional resources.*

*Have questions or comments? Please e-mail us at [PELI-Can@miamioh.edu](mailto:PELI-Can@miamioh.edu) or call our helpline at 513-529-3605.*

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