



CEOs, NHAs, and DONs take note! With the new PDPM paradigm, you'll be asking your nurses to:

- Continue to drive quality measures, star ratings, survey results, satisfaction scores, etc.
- Care for higher acuity patients; and
- Adopt *very different* documentation practices.

All of these requisites are vitally important to your facility's success under PDPM. But perhaps the most challenging change for nursing teams (who really just want to be patient caretakers, right?) will be #3 on this list.

Thorough clinical documentation will be the foundation for how skilled rehab facilities are reimbursed under PDPM...placing the burden squarely on (an already stressed) Nursing Team. So rather than requiring Nursing to do MORE documentation, HealthPRO® Heritage suggests one very necessary strategy to empower our Nursing counterparts.

“Documentation ReDesign”

“ReDesign” refers to process and/or system changes that make it easier for your team to work smarter – not harder. Specifically, in the case of redesigning documentation, the solution takes shape as follows:

- **“Begin with the end in mind.”** Just like your spring cleaning ritual, Nursing Administration to audit current documentation, and omit items that are not required.

- **The devil is in the details...**when it comes to ensuring very specific documentation elements are incorporated into new, PDPM-friendly documentation. HealthPRO® Heritage suggests: Documentation requirements should be precise and straightforward with clear, well-defined cues to guide Nursing staff. Consider that the documentation format will align to what's required by MDS and should serve to inform Nursing on clinical process changes and requisites. Use our industry's obvious signposts, roadmaps, and resources for guidance on what should be included:
 - State survey requirements
 - Rules of Participation
 - MDS requirements
 - Evidence-based clinical pathways
- **Take a number** with your EMR vendor. After all, you're not the only one who will be asking for support to build in new documentation parameters!
- **Start now!** If you wait much longer, it will be too late. EMR redesign doesn't happen overnight; likewise, it takes time to change clinicians' habits.
- **Change is sometimes hard...**HealthPRO® Heritage realizes: Nurses should be respected for their tendency towards being "creatures of habit." After all, that's why they are very good at what they do! As "change agents" for a diversified portfolio of clients, HealthPRO® Heritage consultants take the following approach to process/documentation redesign:
 - **Empower:** Make sure Nursing realizes how important their new role is to the viability and sustainability of the facility.
 - **Educate:** demonstrate how changes will facilitate a "work smarter, not harder" approach.
 - **Reassure:** While documentation practices are changing, the overall plan of care remains the same.
- **Do-It-Yourself?** Or bring in outside resources? Two factors should determine whether you seek support from a consultant, or use internal resources:
 - **Timing is everything:** With < 7 months til the transition, if you can't tackle your own well-defined "Strategic Work Plan" soon, then consider the support of an outside consultant to help you prepare, execute, and succeed.
 - **Ability to cross-pollinate and collaborate with industry peers:** In the midst of a significant change like PDPM, now is the time to beg, borrow or steal from what others in the industry are doing to overcome challenges. Either seek out opportunities to learn from your peers, or bring in a consultant who can share best practices from their experience working with other facilities and systems.

- **Path of least resistance:** Our Clinical Strategies Team leverages the expertise and experience of our seasoned consultants who specialize in collaborating with facility's IDT to achieve well-defined clinical, operational, compliance, and fiscal goals.

Prepare. Execute. Succeed.

Need support getting your head in the game? HealthPRO® Heritage is also a trusted, consultative partner leading the industry in PDPM readiness. Our deliverables: strategy, education, and execution on key clinical competencies that are crucial to PDPM success.