

## *ABSTRACT*

Life care planning is a specialty area of practice that relies upon a multidisciplinary approach to case analysis and comprehensive plan development. This area evolved as a tool of case management and has applications within a variety of industries and disciplines including private and government health insurance, disability management, home and facility-based health care, vocational rehabilitation, psychological counseling, durable medical equipment and assistive technology, and personal injury litigation. Life care planning methodology utilizes evidence-based standards of care, clinical practice guidelines, published research, and recommendations from members of a client's treatment team to identify long-term medical and rehabilitation needs for individuals with catastrophic injuries and chronic health conditions. Plan recommendations are based upon the unique needs of each individual and their anticipated needs over time. Associated costs of all plan recommendations are based upon the fees charged by service providers and vendors within the individual's local community or geographic region, and they are projected over the course of his or her life expectancy.

The purpose of the present study was to describe the outcomes experienced by individuals with spinal cord injuries for whom life care plans were developed. An exploratory qualitative case study approach involving semi-structured, in-depth interviews allowed investigators to describe emergent themes and to assess the consistency between current self-reported needs and those that were projected in each participant's life care plan. Seven individuals participated in the study.

Themes that emerged from participant interviews included: the importance of maintaining independence, health, pre-injury goals, and a positive outlook; fear of future health problems and further physical limitations; frustration with the health insurance claims process; the need for case management support; and the role of professionals in litigated cases.

Two specific categories within each participant's life care plan were explored; anticipated personal assistance needs and routine medical care. In considering the consistency between current and projected needs, plan recommendations regarding personal assistance were not applicable in three cases because the participants are not yet of the age when such services were projected to begin. In three cases, participants reported requiring fewer hours of personal assistance than were projected in their life care plans. In one case, the participant currently receives 24 hour attendant care as has been true since the time of the injury. The continued need for such care was accurately projected in the life care plan. With regard to medical care, each plan demonstrated areas where projections were consistent with current needs and areas where projections were inconsistent. Interpretation of these findings is limited by the lack of access to each participant's recent medical and rehabilitation records and the inability to interview the primary care physicians who are currently directing his or her medical care.

Given the emergent themes, post-injury outcomes, and unexpected findings revealed in the present study, an educational initiative focused upon informing clients of the value and utility of their individualized life care plan appears necessary. Investigators discuss the implications of the findings, identify challenges in conducting research within the specialty, and suggest directions for future research.