

## OASIS Alert

### Outcomes: Follow This Path To Lower Emergent Care Outcomes

#### Old visit patterns could trip you up.

Yes, you get sicker patients, but you can still head off emergent care episodes.

**Christi Jarrett**, clinical supervisor at **Lake Norman Home Health** in Mooresville, NC reports approaches her agency used to reduce emergent care:

**1. Encourage good communication.** Once the agency decides to admit a patient, the intake coordinator informs the clinical staff about any potential problems she has discovered. "The earlier we can identify problems, the more impact we can have on them," Jarrett says.

LNHH uses communication forms, voice mail, weekly "stand up meetings" - where weekend on-call staff report to case managers - and team meetings to provide continuity of care and improved communication, says **Gail Beatty**, LNHH's director.

Team communication has been key to quality improvement, and once the staff realized how well it works, "they like to talk to each other," Jarrett tells **Eli**.

**2. Educate referral sources.** Home health has changed over the years, but referral sources may not realize that, Jarrett says. The intake coordinator works with discharge planners and physicians to be sure their expectations for what home care can do are realistic. Even commercial insurance may not cover as many visits as physicians plan to order, Beatty says.

**Tip:** If one of your patients goes into the hospital, providing the hospital staff with a written summary of what you were doing for the patient in home care helps continuity of care and also encourages the two-way communication you want to have at discharge, Jarrett suggests.

**3. Develop a list of risk factors.** LNHH is finding there are identifiable factors that put their patients at high risk for emergent care, such as certain diagnoses like congestive heart failure or stroke. When a patient has one of the risk factors on their list, the clinician will include measures in the plan of care to prevent emergent care, if possible.

**4. Jump in quickly.** Providing extra nursing visits in the beginning of the episode may help identify and address problems before a crisis occurs. Getting the team involved quickly once the patient is admitted also helps to provide the support when the patient needs it most, LNHH found.

**5. Prepare the patient and family.** Patients need to know who to call if they are concerned about something, so the agency can intervene before a problem becomes an emergency. LNHH clinicians encourage patients to call backup staff in the office first, so they can provide immediate assistance and then notify the appropriate staff member, Jarrett says.