

VNS Staff Meeting

August 16, 2023

Agenda

- Welcome refreshments
- Introductions, Welcome Sarah Daugenti , RN
- Case conferences and communication
- Best Practice At SOC , Initial visits ROC and Recerts.
- ED and Hospital discharge- what is needed on the next visit
- ORDERS
- Wound Care pictures and measurements
- Review new work flow (med reconciliation and request for MOLST/ DNR)
- Phone number policy
- On-call schedule
- Annual in-services
- Reminderly
- Questions/Answers
- Next meeting

Case conferences

- **Case conferences must occur**
- Will include IDT members.
- Two weeks after SOC
- Prior to DC a patient.
- Prior to Recertification.
- Can occur anytime there is an issue concern or change.
- Please note we are discussing skilled need, reason for dc , ensure safe DC and compliance with visit frequency

Case conferences cont.

- A LUPA stands for Low Utilization Payment Adjustment and is a per visit reimbursement to a home health agency when they do not meet a minimum visit threshold. This differs to the traditional reimbursement model for home health, which reimburses at a lump sum per 30 days.

SOC

- Why the patient is being opened for services- what does the referral state?
- SN for medication management and education , wound care ? PICC ?
- PT/OT for strengthening, and balance due to falls? PT?OT for post operative knee or hip Fx. ?
- SN for cardio Pulmonary assessment by MD or is it post ED visit or post hospital stay
- SOC ensure that orders for each of the disease process are selected , if they are not please indicate in narrative note, the reason they were omitted.



SOC

- Must be homebound & document homebound status.
- Medicare considers you homebound if: You need the help of another person or medical equipment such as crutches, a walker, or a wheelchair to leave your home, or your doctor believes that your health or illness could get worse if you leave your home”.
- Frequency of services, obtain VO
- Medication reconciliation
- Summary / narrative should include all of the above

Initial Visit

- **Initial visit**
- Will include f/u on medication reconciliation
- Orders are in place
- Teaching infection, medication interactions/side effects, when to call PCP , when to call us . Refer to SOC packet.
- Collaboration with Rehab director , Teaching needs, f/u needs , communication with PCP , to the visit frequency align with the patient's needs.
- Summary / narrative

ROC

- **Resumption of care**
- After a patient has been hospitalized and is returning home
- Patients must be placed in transfer status during the admission.
- ROC visits , must include dc instructions, changes in medication regimen, teaching to dz/medication changes. Reconciliation of any discrepancies.
- Summary/ narrative.

Recertification

Recertification

- Two weeks before Recertification Shirley will fax the medication profile to PCP
- Two days later , RN CM are expected to f/u with any med discrepancies and complete reconciliation.
- Case conference to identify continued SN, DC needs and plan to recert or dc.
- If not recertifying , document safe DC. Family educated, plan for next visits etc

ED and Hospital discharge- what is needed on the next visit

- **What to include in post ED or hospital discharge visits as required by VNS**
- ****The items below are what any NYS DOH surveyor will look for when reviewing charts.**
- In the summary document reason for the visit which should be seeing patient for post discharge from ED visit or discharge from hospital stay. **Identify the hospital/ED by name.**
- Include the date of ED or hospital admission and date of discharge from ED or hospital admission.
- Document why patient went to ED or why admitted OBV or inpatient and what the discharge diagnosis was.
- Document any new meds prescribed or discontinued by hospital providers which is included in discharge paperwork.
- Do med teaching with teach back and document this.
-

ED and Hospital discharge- what is needed on the next visit cont.

- Update the MARs in NDOC.
- Enter any new orders into NDOC such as: labs due, discharged with knee immobilizer, oxygen order, etc.
- Review discharge instructions with patient which should include any orders and include teach back and document this.
- Regarding provider follow up which is always in all discharge instructions:
- Document if patient has made the appointment and when it is or if patient is refusing to go and provide education with teach back and document this also.
- Add appointment to patient calendar.
- Report any pertinent findings during visit to PCP and document you did so. Enter an activity note for this phone call.



Wound care

- **Wound care**
- Wound measurement and pictures weekly and if there are can changes.
- All pictures are to be sent to LPN support Specialist email swestervelt@vnsithaca.org
- Pictures will be saved and uploaded to NDOC from email
- Wound vac every order must include , white or black foam, have suction , a physician / practice that will over Wound vac and wound care , can have 2 visits per week , the third will need to be wound clinic .

Phone use and patient safety

Phone Use and Patient Safety

It is VNS policy that employee phone numbers are not given to our patients

- This is for your safety as well as our patients
- If a patient has your cell phone number and does not reach us through the office number where there is a nurse on call 24/7- it puts you on call 24/7! **You are responsible for handling these calls because you are the only one aware of the call.**
- Each employee is given a cell phone to use for work
- These phones are set up with a caller identification that says VNS (not the caller number)
- If you text a patient the caller number is not blocked and the patient will have your phone number

It is also a VNS policy that you do not text your patients since this gives them your phone number.

- Use our centralized system to send texts to our patients.
- VNS has just secured a system called “Remindedly” where a text can be sent to patients from a computer and no phone number is exchanged. The number of users for this system is limited so if you need a text sent, please notify our LPN Clinical Support Team to send the text message.

Every visit

- Refer to orders , they are the Plan of Care.
- Ask about , changes in medication regimen, additions or subtractions, any OTC , any concerns , issues.
- Any visit to the ED , Next MD / appointment
- Discrepancies must be documented including notification PCP , reconciliation ..
- Teach , teach , and once done can remove the order.
- Ex. When remove a PICC , the PICC line orders should be DC.

Orders

- **Orders**
- Orders are the plan of care .
- SOC and Initial visits the MD orders must align with diagnoses.
- Teaching orders.
- Once teaching or treatment is completed, the orders must be DC.
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Orders

- All medication orders must have name of medication , dose , frequency and end date (prednisone, anbx , etc)
- All IV medications need to include , name of medication , dose, solution and volume of solution, rate of infusion , frequency , end date and how to be infused . Pump etc.
- Include name and number of Infusion vendor.
- PICC line orders , orders for Blood draw dates
- PICC removed , must DC orders for PICC

Reminderly

- Update on Reminderly
- Calls to let patients know of next day visits
- Any feed back?



On call schedule

- Tara will be joining our team 8/21/23
- She will be covering M-F 5-8am
- Team will pick up Saturday 8am to 8am and Sunday 8a-8am
- Weekday coverage as needed 5p to 8 am
- Holiday begins at 8a .



On call schedule

ON CALL CALENDAR											
ON CALL TIME INCLUDES TWO DIFFERENT DAYS BUT THE DAY YOU ARE SIGNING UP TO COVER IS THE START DAY OF THE COVERAGE TIME											
WEEKDAY COVERAGE STARTS AT 5:00 PM ON THE DAY YOU ARE COVERING AND ENDS AT 8:00 AM THE NEXT DAY											
WEEKEND AND HOLIDAYS START AT 8:00 AM ON THE DAY YOU ARE COVERING AND ENDS THE NEXT DAY AT 8:00 AM.											
TIME	WEEKDAY ON CALL					TIME	WEEKEND ON CALL			HOLIDAY ON CALL	
	MONDAY 5:00 PM-8:00AM	TUESDAY 5:00 PM-8:00 AM	WEDNESDAY 5:00 PM -8:00 AM	THURSDAY 5:00 PM-8:00 AM	FRIDAY 5:00 PM-8:00AM		SATURDAY 8:00 AM-8:00 AM	SUNDAY 8:00 AM-8:00 AM	TIME	HOLIDAY WEEKDAY OFFICE CLOSED	HOLIDAY WEEKEND OFFICE CLOSED
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On call changes

- ON CALL TIME INCLUDES TWO DIFFERENT DAYS BUT THE DAY YOU ARE SIGNING UP TO COVER IS THE START DAY OF THE COVERAGE TIME
- WEEKDAY COVERAGE STARTS AT 5:00 PM ON THE DAY YOU ARE COVERING AND ENDS AT 8:00 AM THE NEXT DAY
- WEEKEND AND HOLIDAYS START AT 8:00 AM ON THE DAY YOU ARE COVERING AND ENDS THE NEXT DAY AT 8:00 AM.

Annual in-services

- We will be working on Annual in-services
- Health assessments
- Supervisory visits
- Performance evaluations

Next meeting

- We welcome topic ideas.
- Dynamic Health is a Educational resource program that CMC is going to make available us.
- More to come !

A red speech bubble graphic with a white outline, containing the word "Questions" in white text. The bubble has a tail pointing downwards and to the left.

Questions

Thank you !