



EXCEEDING PATIENT EXPECTATIONS **DURING COVID-19 AND BEYOND**



SPEAKERS

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Objectives

- Review current patient care challenges
- Identify best practices for supporting patient care during challenging times
- Outline key patient-centered steps organizations can implement short and long term

Opening Thought

"There's more than one way to get to the goal that you want to get to,
but once you compromise your own principles, then you're lost.

You're really lost."

- Anthony S. Fauci, M.D., NIAID Director

CMS Focus on Patient-Centered Care

- “Our goal is to activate the most powerful force in our healthcare system for creating value: **the patient**.”
- We will transform the individual patient into a consumer of healthcare – one that is **empowered** to shop for the provider that delivers the best care at the lowest price.
 - Seema Verma, CMS Administrator

A screenshot of the CMS.gov Newsroom page. The header includes the CMS.gov logo and the text "Centers for Medicare & Medicaid Services". Below the header is a blue navigation bar with the word "Newsroom" in large white letters, and links for "Press Kit", "Data", "Contact", and "Blog". The main content area features a yellow "Press release" tag above the headline "Speech: Medicare Remarks by CMS Administrator Seema Verma at the Commonwealth Club of California". Below the headline is a green horizontal line and a date "Jul 25, 2018" followed by a list of topics: "Billing & payments, Data, eHealth, Leadership, Medicaid & CHIP, Medicare Part C, Medicare Part D, Medicare Parts A & B, Physicians, Prescription drugs".

CMS.gov | Centers for Medicare & Medicaid Services

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Press release

Speech: Medicare Remarks by CMS Administrator Seema Verma at the Commonwealth Club of California

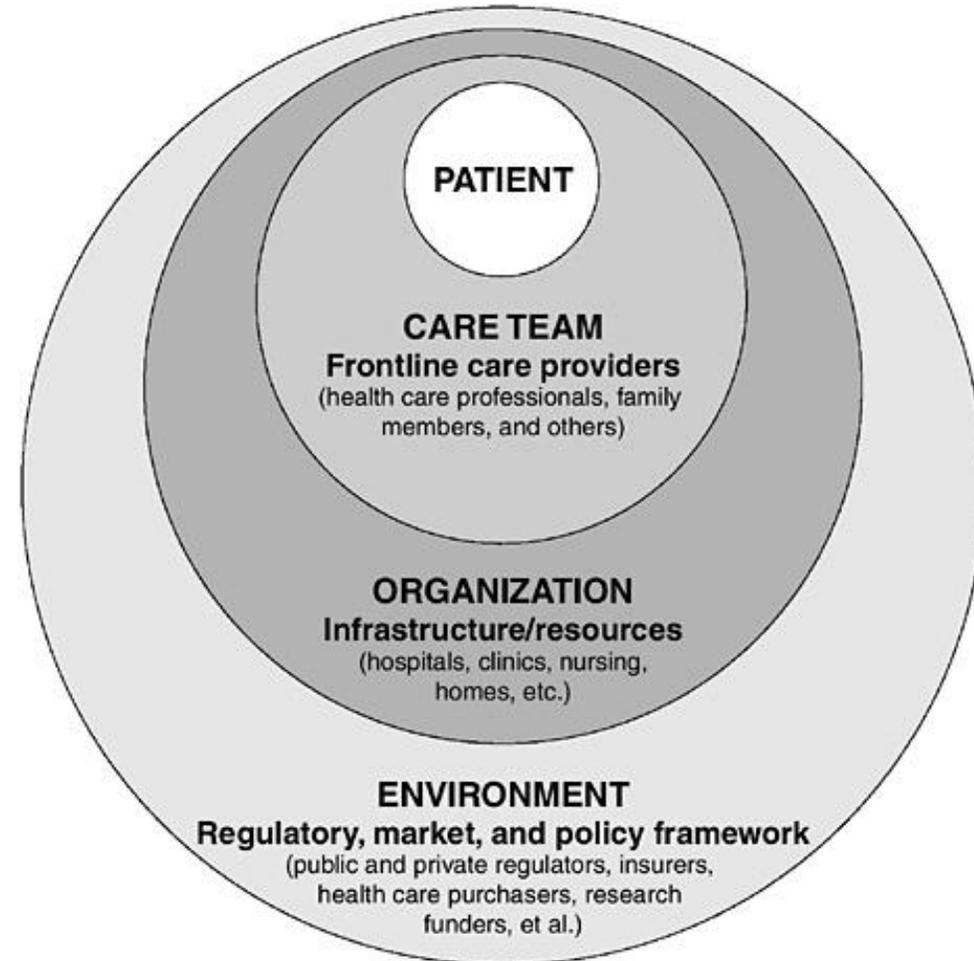
Jul 25, 2018 | Billing & payments, Data, eHealth, Leadership, Medicaid & CHIP, Medicare Part C, Medicare Part D, Medicare Parts A & B, Physicians, Prescription drugs

Source: <https://www.cms.gov/newsroom/press-releases/speech-medicare-remarks-cms-administrator-seema-verma-commonwealth-club-california>

Systems Approach to Healthcare Delivery

Patient-Centered Care driven by support from:

- Provider/Care Team
- Organization
- Environment



Characteristics of Medicare Patients

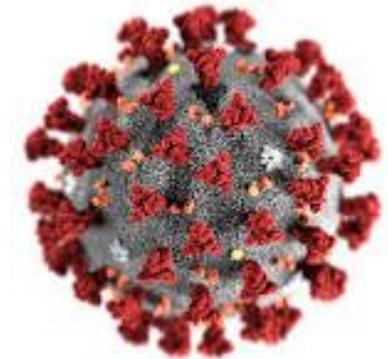
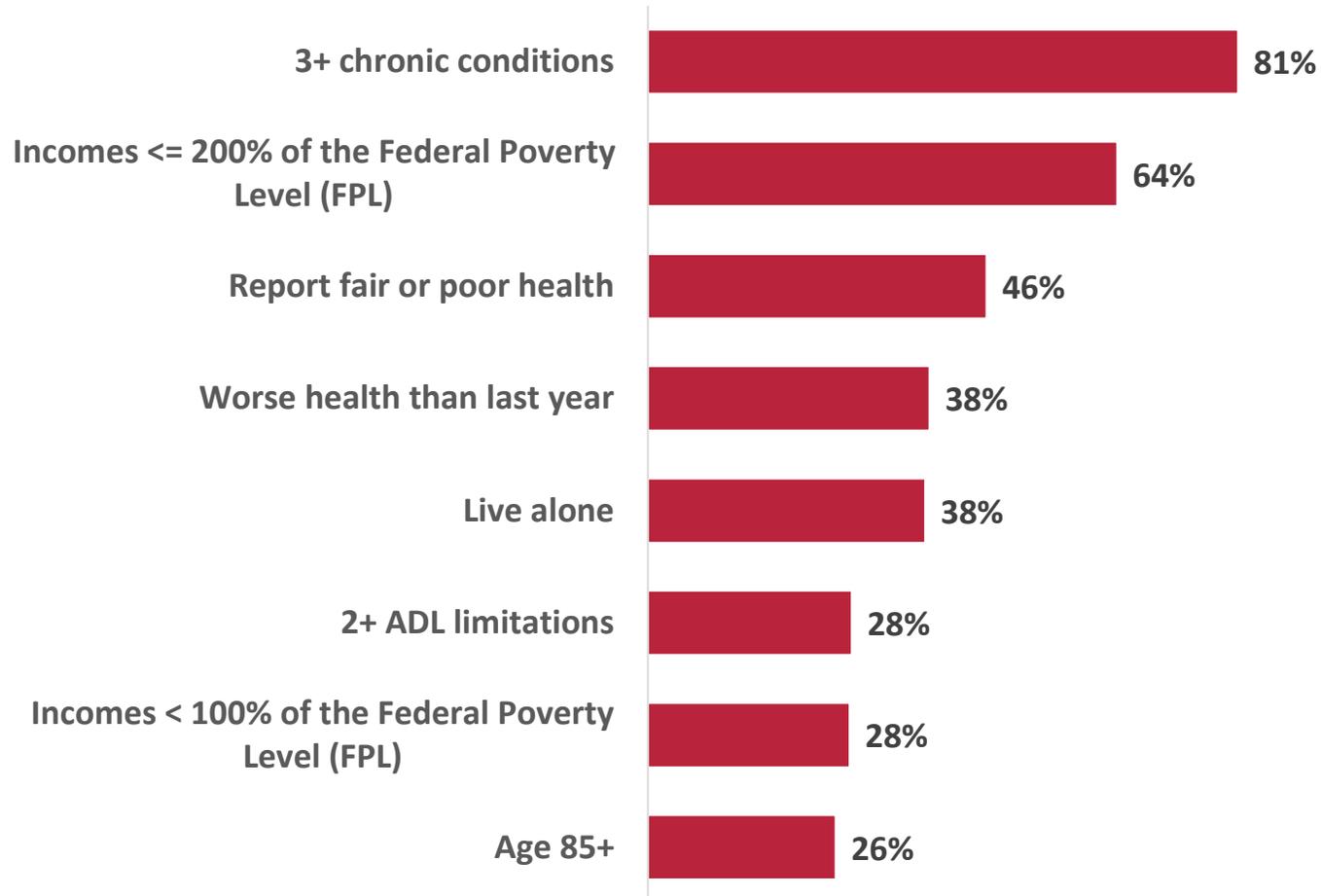
Selected Demographic Characteristics of Medicare Beneficiaries, 2010



SOURCE: Kaiser Family Foundation analysis of the Medicare Current Beneficiary Survey 2010 Cost and Use file.



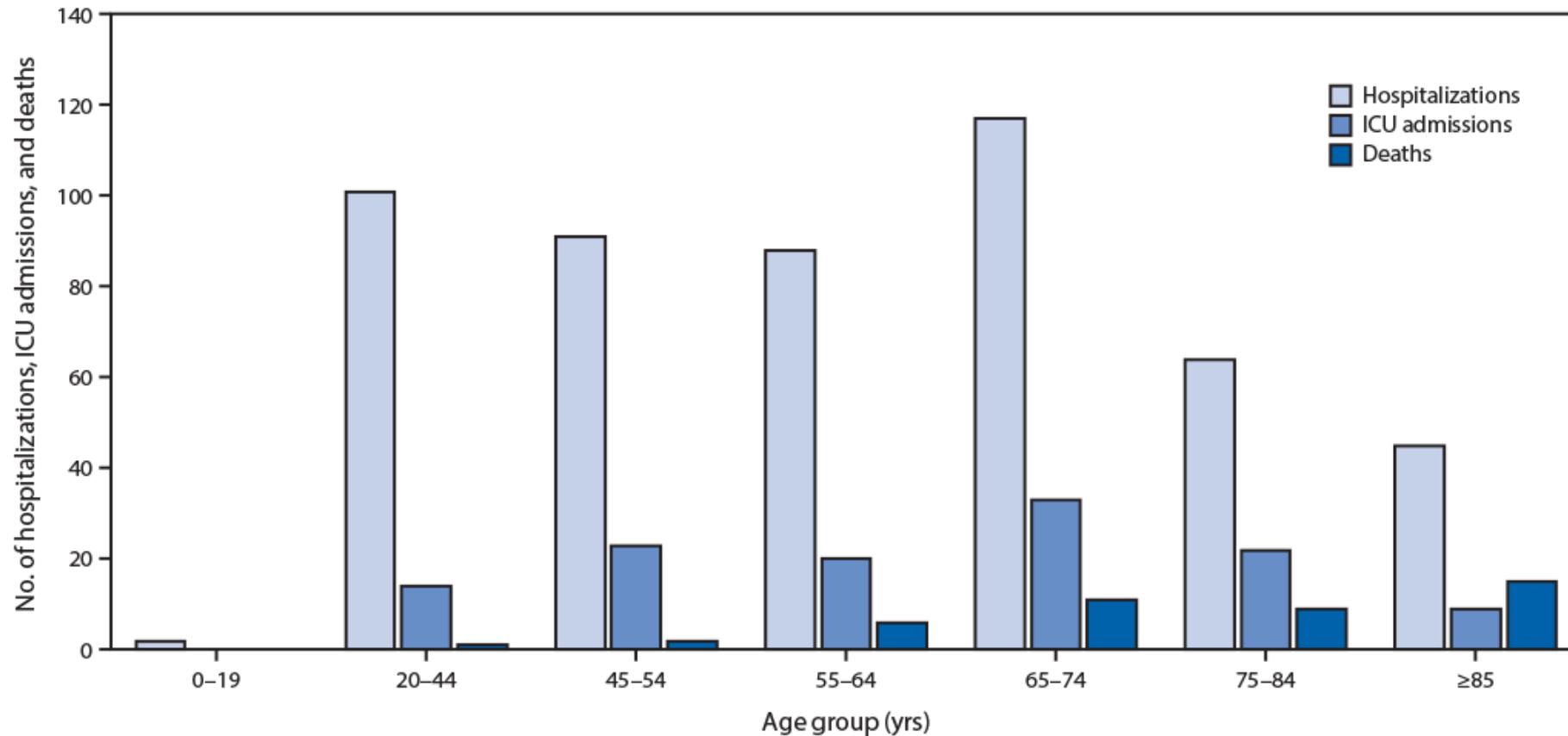
Selected Measures of Medicare Home Health Population, 2016



Source: AHHQI Home Health Chartbook 2019

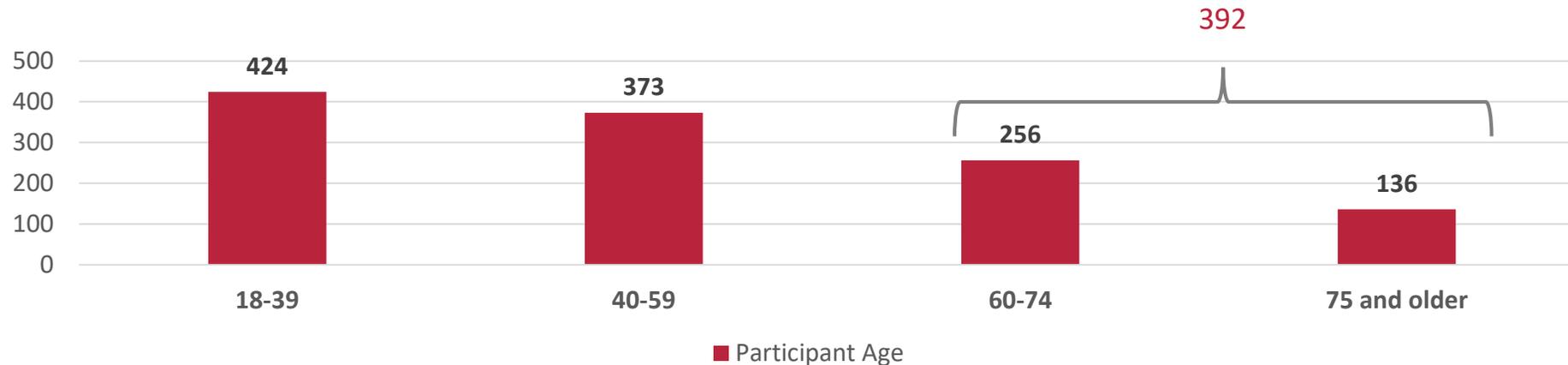
COVID-19 Hospitalization and Death Rates (US)

US COVID-19 hospitalizations, ICU admissions, and deaths, by age group
February 12– March 16, 2020



Source: [MMWR Morb Mortal Wkly Rep 2020;69:343-346](https://www.cdc.gov/mmwr/morbidity-and-mortality-reports)

Kaiser Family Foundation (KFF) Coronavirus Poll



Methodology:

- The survey was conducted March 25-30th, 2020
- Nationally representative random digit dial telephone sample of **1,226 adults ages 18 and older**
- Included 293 respondents who previously completed an interview in prior 9 months
- Lives in the United States, including Alaska and Hawaii

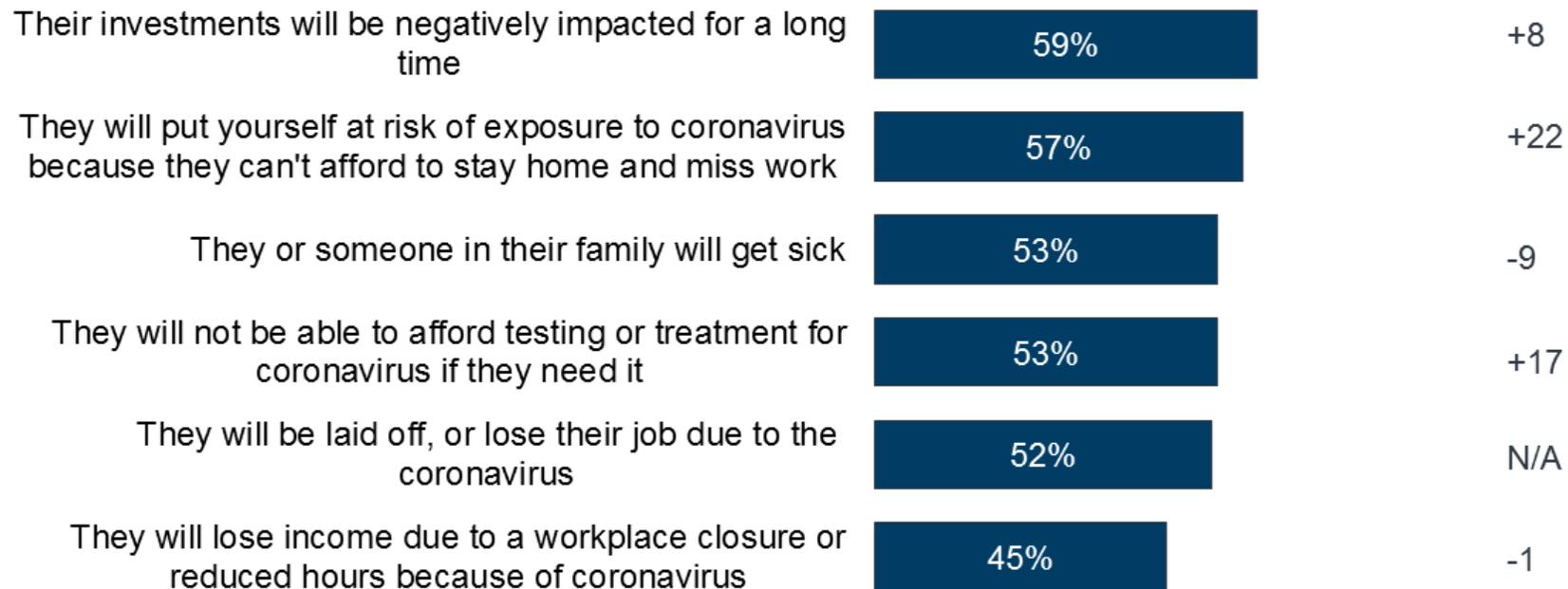
Kaiser Family Foundation (KFF) Coronavirus Poll

Key Findings (Early April 2020)

Large Shares Of Americans Now Worry About Both Personal Economic Impact And About Them Or Their Families Getting Sick

Percent who say they are worried about each of the following:

Change from March poll:



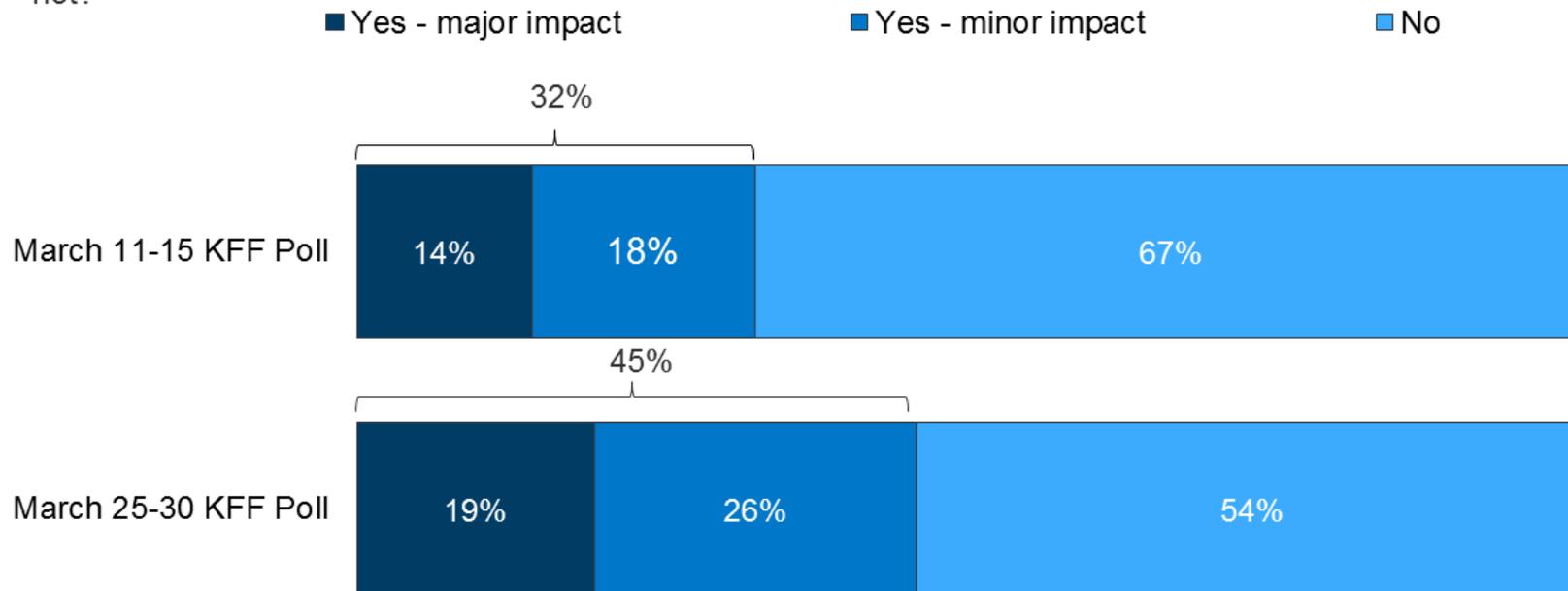
SOURCE: KFF Health Tracking Poll (conducted March 25-30, 2020). See topline for full question wording.

Kaiser Family Foundation (KFF) Coronavirus Poll

Key Findings (Early April 2020)

Larger Share Now Reporting Negative Mental Health Impacts

Do you feel that worry or stress related to coronavirus has had a negative impact on your mental health, or not?



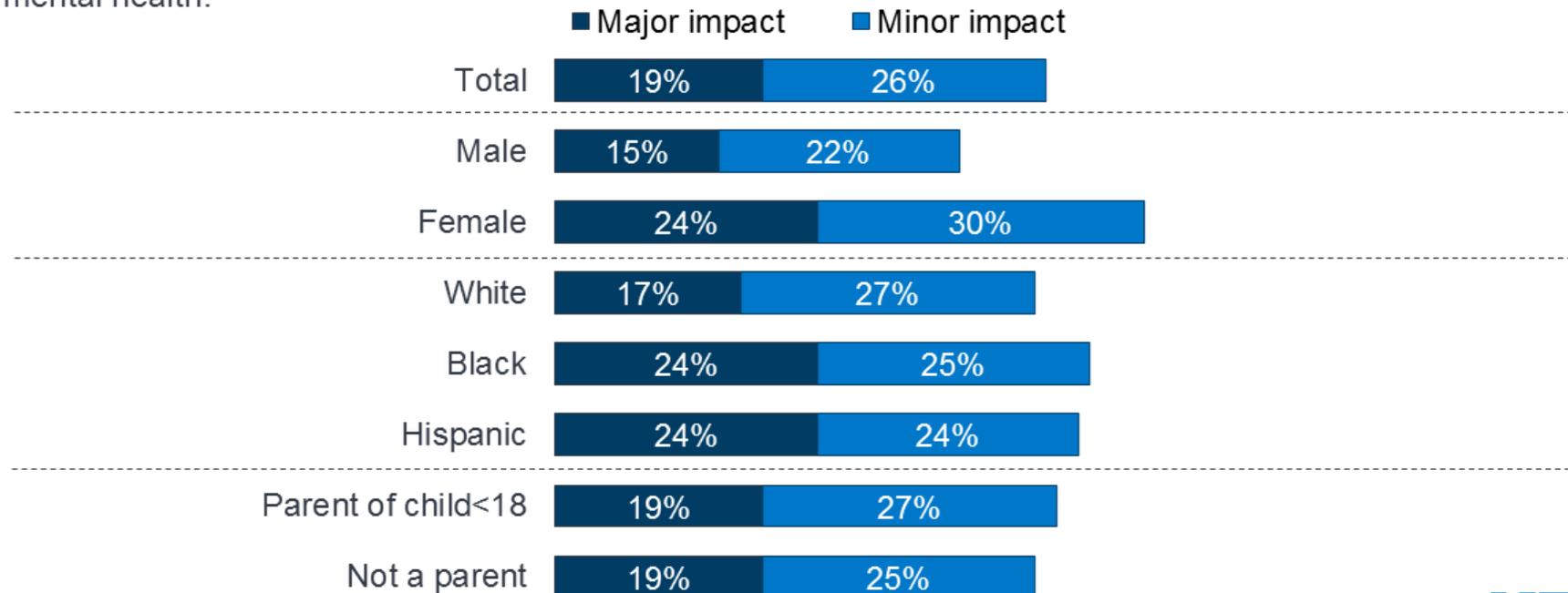
SOURCE: KFF Health Tracking Poll (conducted March 25-30, 2020). See topline for full question wording.

Kaiser Family Foundation (KFF) Coronavirus Poll

Key Findings (Early April 2020)

Significant Shares Say The Coronavirus Has Had A Negative Impact On Their Mental Health

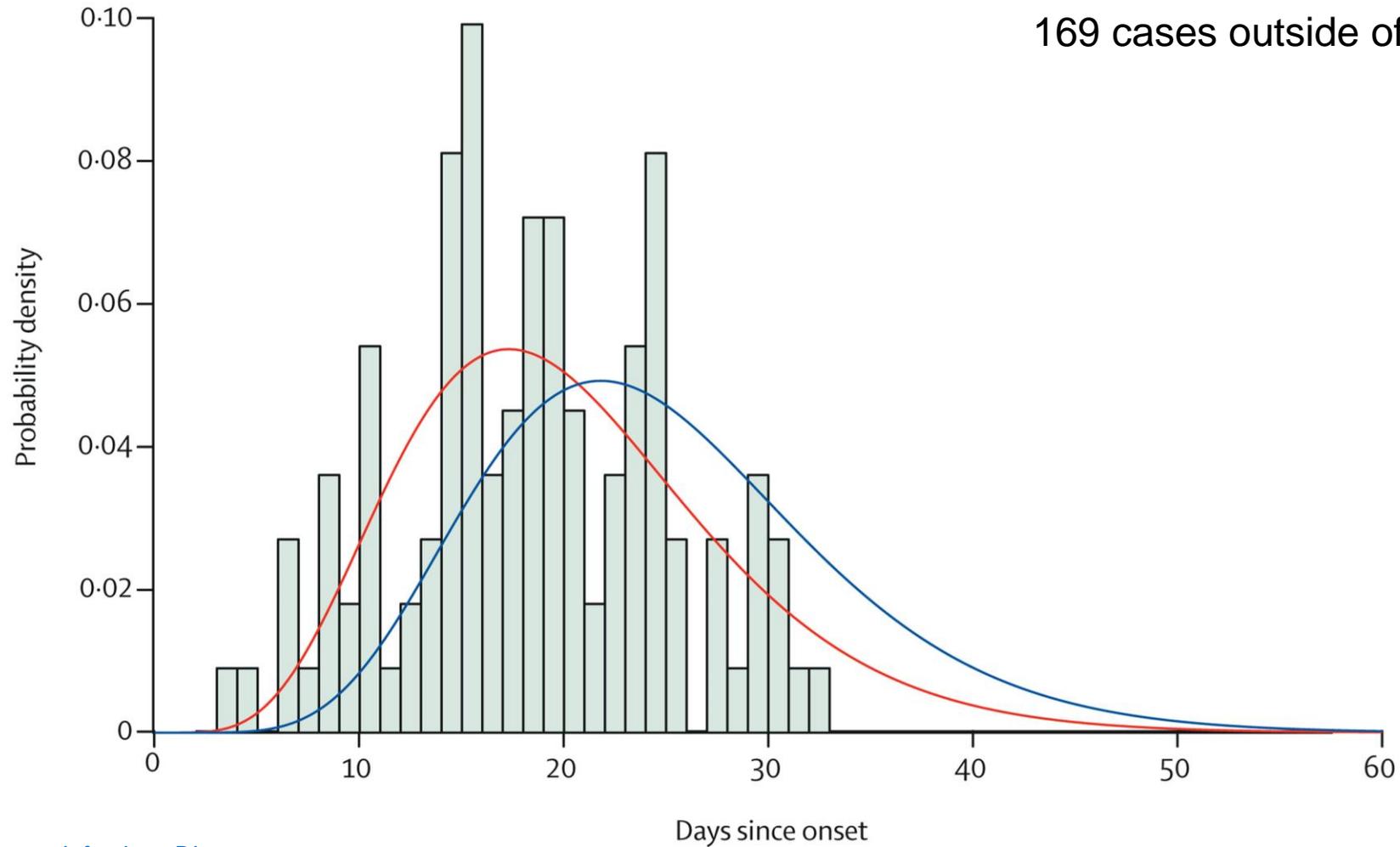
Percent who say they feel that worry or stress related to coronavirus has had a negative impact on their mental health:



SOURCE: KFF Health Tracking Poll (conducted March 25-30, 2020). See topline for full question wording.

Course of Time to Recovery

169 cases outside of mainland China



Source: [The Lancet Infectious Diseases](#)

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Practical Applications

Health of Organization

The organization's health is crucial to deliver exceptional service. The following areas are key considerations:

- Leadership
- Financial review
- Focus on employees/staff
- Technology Partner
- Patient support

Leadership

- Recommitment to organization vision, mission, culture around patient care
- Visibly support incidence management at all levels
- Internal education on COVID-19 and best practices
- Clear communication and messaging (internal and external)
- Understand local COVID-19 infection rates, patterns and impact analysis
- Promote effective COVID-19 strategies aimed at comprehensive system transition
- Procurement of appropriate PPE, burn rate, and supplier capability
- Implement remote/telework infrastructure as appropriate
- Incident management command center

Emergency Preparedness Plan

- Both Medicare certified home health and hospice provide are required to have an Emergency Preparedness Plan (EPP)
- EPP requirements were revised in early 2019 which required agencies to include emerging infection diseases (EIDs) as part of their all-hazard risk assessment
 - These EIDs may require modifications to facility protocols to protect the health and safety of patients, such as isolation and personal protective equipment (PPE) measures

Emergency Preparedness Plan

- Implementation of your EPP
 - DOCUMENT, DOCUMENT, DOCUMENT
- Review your EPP NOW!
- Office of the Assistant Secretary for Preparedness and Response has developed a COVID-19 Healthcare Planning Checklist
 - <https://www.asprtracie.hhs.gov/COVID-19>
 - COVID-19 Home-based Healthcare and Hospice

Infection Control

- Both Medicare-certified home health and hospice provide are required to have an Infection Control Plan (IC)
 - If you haven't reviewed your IC policies, do so NOW!
 - Review your IC education with staff and patients and caregivers
 - Tracking and reporting of infections
 - Quality Assessment and Performance Improvement
 - Stock of Personal Protective Equipment (PPE)
 - COVID-19 Focused Infection Control Survey: Acute and Continuing Care Resources

Financial Review

- Review organizations financial health
- Financial modeling
- Identify lines of credit and funding resources
- Participation in federal and state financial relief programs
 - Medicare sequestration (2%) temporarily suspended
 - Accelerated and Advanced Payment Program
 - Paycheck Protection Program Loans
 - Small Business Debt Relief Program
 - Economic Injury Disaster Loans and Grants

Employee/Staff Focus

- Prioritize employee well being
- Check-in with each employee and personal and family status
- Address staff needs depending on organizational capability
- Utilize remote and telework capabilities
- Determine employee work status and availability
- Update policies and procedures to accommodate COVID-19 pandemic
- Education on COVID-19 and organizational response (policies, procedures, telework capabilities etc)
- Address employee internal feelings routinely through frequent communication
 - Fear, Anxiety, Sense of Powerlessness, Depression
 - Encourage self-care and rest

Self-care for Healthcare Providers

- Fear and anxiety is prevalent
- Encourage and model self-care
- Listen to experts
- Limit exposure
- Encourage talk-therapy
- Identify areas of control
- Be flexible when possible
- Promote teamwork

Technology Partner

Technology partner that fully supports COVID-19 response:

- Track screening for patients and providers
- Enhance communication between providers and patients
- Facilitate patient care documentation
- Identify relevant patient subpopulations for proactive care
- Provide appropriate guidelines and reminders for providers and patients
- Monitor KPIs for patient, staff, and overall system
- Mobile point of care documentation with offline capabilities
- Embedded COVID-19 Support Resources

Patient Support

- Prioritize patient care
- Check-in with each patient on personal and family status (as appropriate) by phone
- Address needs depending on organizational capability
- Provide telehealth and face to face visits based on triaging
- Update policies and procedures to address COVID-19 needs
- Educate on COVID-19, implications for care delivery and organizational response
- Address patient internal feelings routinely during visits and other communications
 - Fear, Anxiety, Sense of Powerlessness, Loneliness, Depression
 - Encourage self care and rest

People don't care how much you know,
until they know how much you care... about them

- Anonymous

Patient Care Approaches

Patient Touchpoints

We have a number of exceptional service opportunities during patient contacts:

- Referral/Intake
- Initiating Care
- Routine visits
- Emergent situations
- Discharge
- Contact with Office

Review opportunities to deliver care while incorporating COVID-19 measures.

Enhancing Patient Touchpoints

- Referral/Intake
 - Contacting patients by phone when possible
 - Screen for COVID-19 and level of basic knowledge
 - Outline how the organization protects patients from COVID-19
 - Determine patients' homebound status by record review or telehealth (two-way audio/visual communication)
 - Ensure certifying physician includes order for telehealth option for visits (POC)
- Admission/Initial Assessment
 - Identify immediate care and support needs e.g. medication, mobility aids for safety, skilled nursing treatments and items to address fall risks and nutritional needs
 - Complete comprehensive assessment with appropriate PPE
 - Educate patient on COVID-19

Enhancing Patient Touchpoints (continued)

- Routine visits
 - Schedule in-person visits to prevent LUPAs utilizing appropriate PPE
 - Effectively utilize telehealth to meet patient needs
 - Nurse aide supervisory visit conducted online
- Emergent situations
 - Option to utilize telehealth to triage emergency
 - Complete in-person visit with appropriate PPE
- Recertification
 - Option to utilize telehealth to perform recertification
 - Complete in-person visit with appropriate PPE

Enhancing Patient Touchpoints (continued)

- Discharge
 - Option to utilize telehealth to perform recertification
 - Complete in-person visit with appropriate PPE

- Contact with Office
 - Use of telephone
 - Ensure COVID-19 screen updated if negative
 - Respond to any COVID-19 concerns

Screening Patients for COVID-9

In-home care organizations should identify patients at risk for having COVID-19 infection **before** or immediately upon **arrival to the home**, and **ongoing basis** utilizing the following questions:

- International travel within the last 14 days to countries with sustained community transmission. Updated information on affected countries is on the CDC website
- Signs or symptoms of a respiratory infection, such as a fever, cough, and sore throat.
- In the last 14 days, has had contact with someone with or under investigation for COVID19, or are ill with respiratory illness.
- Residing in a community where community-based spread of COVID-19 is occurring.

** Documentation and tracking of screening findings in EHR for subsequent visits*

Triaging Patients

Ensuring care providers understand CDC guidelines for COVID-19 care protocols, track local occurrence of transmission, and utilize for prioritizing patient care.

- Asymptomatic patients
 - Screen and assess on ongoing basis
 - Utilize standard precautions (Face mask, gloves, hand washing, respiratory hygiene etc)
- Patients Under Investigation (PUI)/ Symptomatic patients/ Diagnosed COVID-19
 - Utilize appropriate PPE (face masks, N95, gloves, face protection, gowns, shoe covers etc)
 - Limit visits to essential personnel
 - Appropriate cleaning, disinfecting, and disposal of supplies and PPE

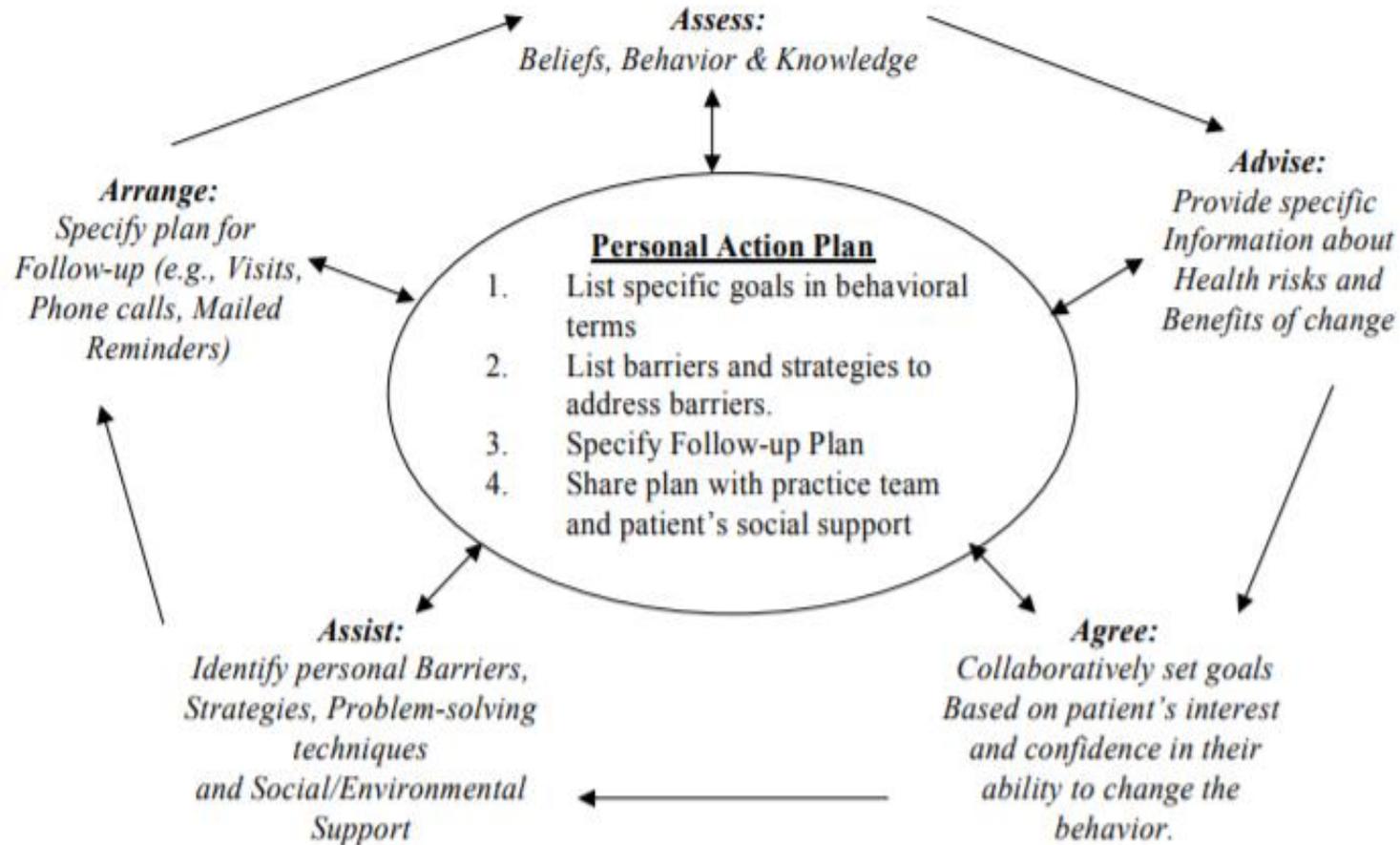
Patient Self-Management Support

- Emphasize the patient's central role in care.
- Use effective self-management support strategies that include assessment, goal-setting, action planning, problem-solving, and follow-up.
- Organize resources to provide support.

Source: Institute of Healthcare Improvement

Self-Management Model

Self-Management Model with 5 A's (Glasgow, et al, 2002; Whitlock, et al, 2002)



Locus of Control

External

The consequences of my behavior are outside my control

- News about COVID-19 scares me
- Infection cannot be prevented
- Afraid to allow anyone into my home
- Stressed out due to COVID-19



Internal

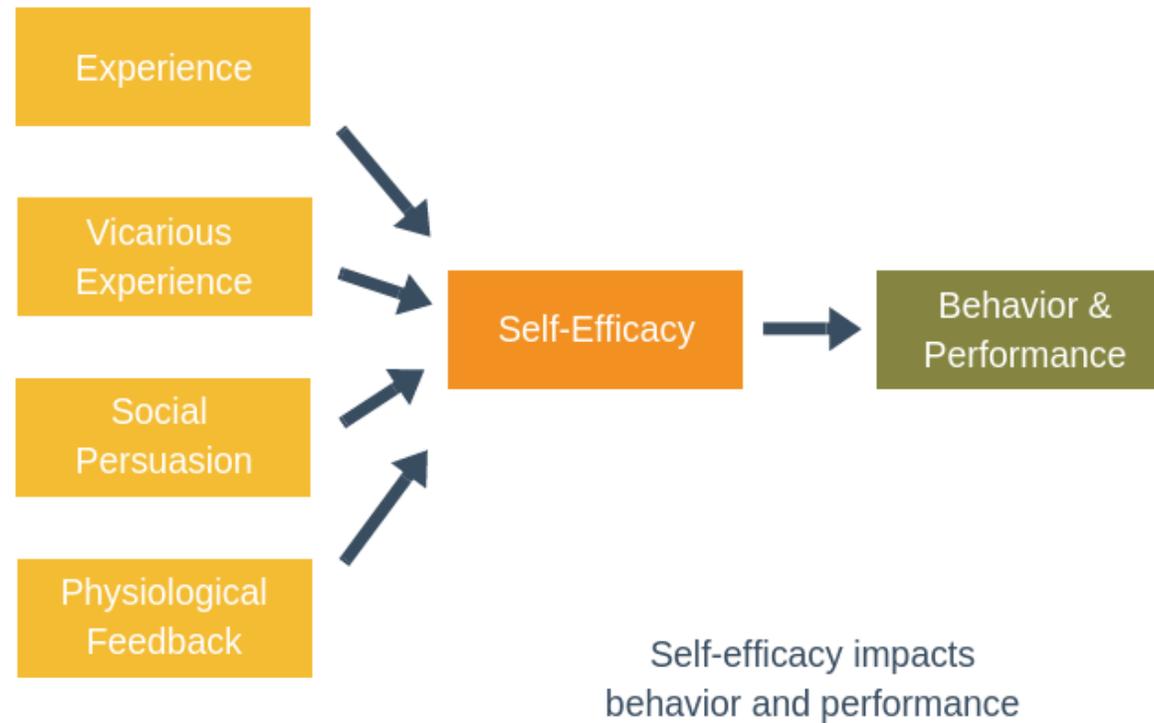
I control the consequences of my behavior

- Learn about COVID-19
- Plan how to prevent infection
- Reduce watching distressing news
- Improve interpersonal relationships
- Manage stress

Individuals locus of control is on a continuum between external to internal.

Self-Efficacy

Self-Efficacy Theory of Motivation



Source: [Expert Program Management](#)

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Sample Personal Action Plan

1. **Goals:** *Something you WANT to do:*
Begin exercising

2. **Describe:**
How: Walking
Where: Around the block
What: 2 times **Frequency:** 4 x/wk
When: after dinner

2. **Barriers:** have to clean up; bad weather

4. **Plans to overcome barriers:**
ask kids to help; get rain gear

5. **Conviction 8 & Confidence 7 ratings
(0 - 10)**

6. **Follow-Up:** next visit – 1 week

COVID-19 and the Future

- Older human coronaviruses first identified in the mid-1960's
- Reality is COVID-19 will remain as part of our healthcare repertoire
- Patients not requiring a ventilator are likely to be in the home care arena
- Agencies will need to revised policies and procedures not just for this period of crisis but ongoing
- Immediate need is to retain documentation regarding waivers
 - Any change in policy should be reflected it is due to COVID-19
 - <https://www.cms.gov/about-cms/emergency-preparedness-response-operations/current-emergencies/coronavirus-waivers>

Source: Human Coronavirus Types. <https://www.cdc.gov/coronavirus/types.html>. Accessed March 5, 2020.

Measuring Patient Experience

Home Health CAHPS – A Guide

The Home Health CAHPS (HH CAHPS) survey measures patient care experience with their agency (or caregivers familiar with their care). A review of the questions provide insight into exceeding patient care experiences.

HH-CAHPS questions are grouped into the following areas:

- Care of patients
- Communication between providers and patients
- Specific care issues
- Rating of the home health care on a scale from 0 to 10
- Would you recommend this home health agency

Composite - Care of Patients Questions

Care of Patients

Composite	Response Categories
Q9. In the last 2 months of care, how often did home health providers from this agency seem informed and up-to-date about all the care or treatment you got at home?	Never, Sometimes, Usually, Always
Q16. In the last 2 months of care, how often did home health providers from this agency treat you as gently as possible?	Never, Sometimes, Usually, Always
Q19. In the last 2 months of care, how often did home health providers from this agency treat you with courtesy and respect?	Never, Sometimes, Usually, Always
Q24. In the last 2 months of care, did you have any problems with the care you got through this agency?	Yes, No

Care of Patients

Q1. In the last 2 months of care, how often did home health providers from this agency seem informed and up-to-date about all the care or treatment you got at home?

Potential Interventions

- Adequate preparation for visit e.g. select **appropriate PPE**, discharge information, diagnosis, treatments, other providers
- Screen patient and determine whether **telehealth** is appropriate for delivering in-home care for patients
- Identify appropriate **PPE** for in-home patient visit
- Clear communication of reason for visit, progression, and typical course of treatment
- Point of care documentation and effectively accessing chart during visit.

Composite - Communication Questions

Communications Between Providers and Patients

Composite	Response Categories
Q2. When you first started getting home health care from this agency, did someone from the agency tell you what care and services you would get?	Yes, No
Q15. In the last 2 months of care, how often did home health providers from this agency keep you informed about when they would arrive at your home?	Never, Sometimes, Usually, Always
Q17. In the last 2 months of care, how often did home health providers from this agency explain things in a way that was easy to understand?	Never, Sometimes, Usually, Always
Q18. In the last 2 months of care, how often did home health providers from this agency listen carefully to you?	Never, Sometimes, Usually, Always
Q22. In the last 2 months of care, when you contacted this agency's office did you get the help or advice you needed?	Yes, No
Q23. When you contacted this agency's office, how long did it take for you to get the help or advice you needed?	Same day, 1 to 5 days, 6 to 14 days, More than 14 days

Communications Between Providers and Patients

Q2. When you first started getting home health care from this agency, did someone from the agency tell you what care and services you would get?

Potential Interventions

- Screen patient and determine whether **telehealth** is appropriate for initiating care for patients
- Identify appropriate **PPE** for in-home patient visit
- Ensure orientation of patient to agency services at admission and reinforce periodically utilizing **telehealth** as appropriate
- Utilize a change in patient status as an opportunity to reinforce education about condition and services being provided to address and improve

Composite - Specific Care Issues Questions

Specific Care Issues

Composite	Response Categories
Q3. When you first started getting home health care from this agency, did someone from the agency talk with you about how to set up your home so you can move around safely?	Yes, No
Q4. When you started getting home health care from this agency, did someone from the agency talk with you about all the prescription medicines you were taking?	Yes, No
Q5. When you started getting home health care from this agency, did someone from the agency ask to see all the prescription medicines you were taking?	Yes, No
Q10. In the last 2 months of care, did you and a home health provider from this agency talk about pain?	Yes, No
Q12. In the last 2 months of care, did home health providers from this agency talk with you about the purpose for taking your new or changed prescription medicines?	Yes, No
Q13. In the last 2 months of care, did home health providers from this agency talk with you about when to take these medicines?	Yes, No
Q14. In the last 2 months of care, did home health providers from this agency talk with you about the important side effects of these medicines?	Yes, No

Specific Care

Q3. When you first started getting home health care from this agency, did someone from the agency talk with you about how to set up your home so you can move around safely?

Potential Interventions

- Screen patient and determine whether telehealth is appropriate for initiating care for patients
- Identify appropriate **PPE** for in-home patient visit
- Orient patient to services to be provided by agency including **COVID-19 education** to protect themselves and others
- Educate patient on rational for key activities and identifying with maintaining their safety

Global Measure Questions

Global type Measures	Response Categories
Q20. What number would you use to rate your care from this agency's home health providers?	Use a rating scale (0-10) (0 is worst, 10 is best)
Q25. Would you recommend this agency to your family or friends if they needed home health care?	Definitely no; Probably no; Probably yes; Definitely yes

Review of Key Items

- In-home care providers are experts at meeting patient care challenges in the home
- Infection Control is possible in the home with the right tools
- Successful models for delivering exceptional care in challenging times exist
- Documentation is key for continued long term success
- Delivering exceptional care despite COVID-19 transforms us for the better
- COVID-19 is a defining care delivery opportunity of our generation

Closing Thought

“I hope in the years to come everyone will be able to take pride in how they responded to this challenge. And those who come after us will say that the Britons of this generation were as strong as any. That the attributes of self-discipline, of quiet good-humoured resolve and of fellow-feeling still characterise this country.”

- Queen Elizabeth II

QUESTIONS?

Additional Information

Accreditation Commission for Healthcare

www.achc.org



ACHCU is the educational division of the Accreditation Commission for Health Care (ACHC), a national accrediting organization known for providing value, integrity, and the industry's best customer service. With a comprehensive suite of resources designed to help healthcare providers excel in their fields and prepare for accreditation, ACHCU offers program-specific materials including workshops, workbooks, and webinars.

Visit www.achcu.com for more information.

References

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- <https://www.apa.org/pi/aids/resources/education/self-efficacy>