



Grow Your Private Duty Business Through Specialty Programs and Contracting



Debbie Miller

Founder and CEO
52 Weeks Marketing,
LLC



Brian Nelson

Senior Product
Marketing Manager
Axxess

AGILE

AXXESS GROWTH INNOVATION & LEADERSHIP EXPERIENCE

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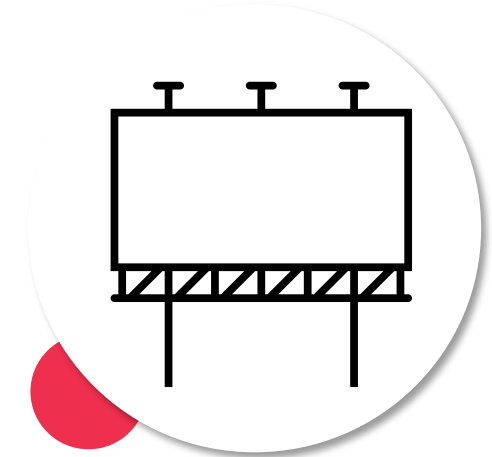
Objectives



Explore changes in
the industry



Develop specialty
programs to diversify
business and create
revenue



Market specialty
programs to various
stakeholders



A Case for Home Care

- Increase in hospital-to-home programs
- Congress looking at new legislation to support home-based programs
- Payers looking for lower-cost solutions
- 37% could bypass skilled nursing facilities if they had support at home
- People are discharging from skilled nursing facilities quicker and sicker

It's in the Numbers

80%

Percentage of people ages 65+ who have at least one chronic condition

40%

Percentage of hospitalized people in the United States who are 65+

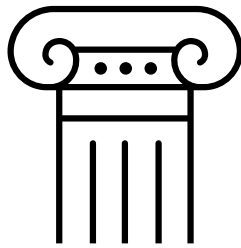
3.5 million

Number of people who receive Medicare home- and community-based services (HCBS)

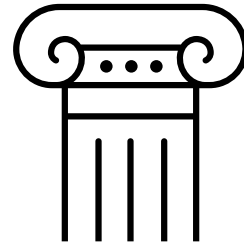
70%

Percentage of people over 65 who will need assistance with activities of daily living

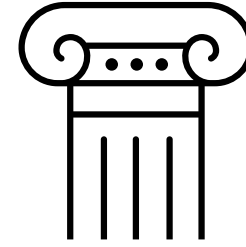
Pillars of Success



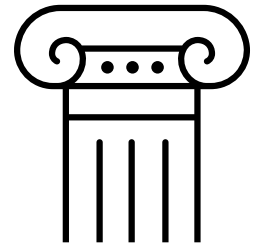
People



Promotion

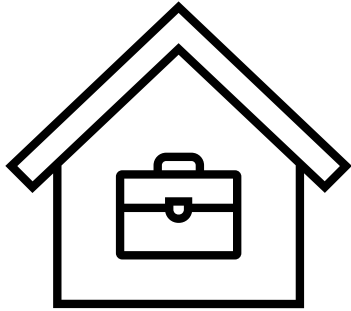
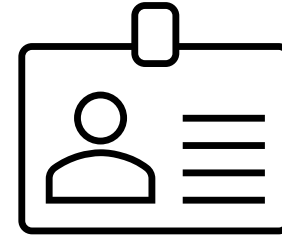
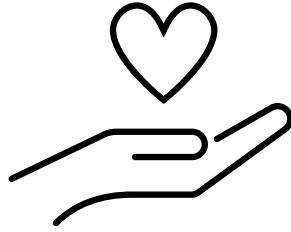
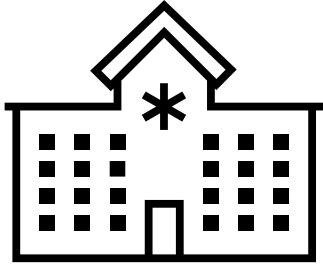


Programs



Partnerships

Process



Trends Shaping the Future of Home Care

Home care as the new healthcare frontier

Reducing hospitalizations, improving outcomes

Providers seeking home-based solutions

Staff shortages

Care management – one-stop shop

Home Care Caregivers by the Numbers



22.3% of adults reported providing care or assistance to a friend or family member in the past 30 days

53 million people were providing informal, usually unpaid, care and support to aging family members

\$522 billion estimated in lost income due to family caregiving

1/5 of adults are providing unpaid care to an adult with health or functional needs

National Caregiver Study: Changing the Culture of Care

Providers have seen a 23% decrease in home care aides since 2020

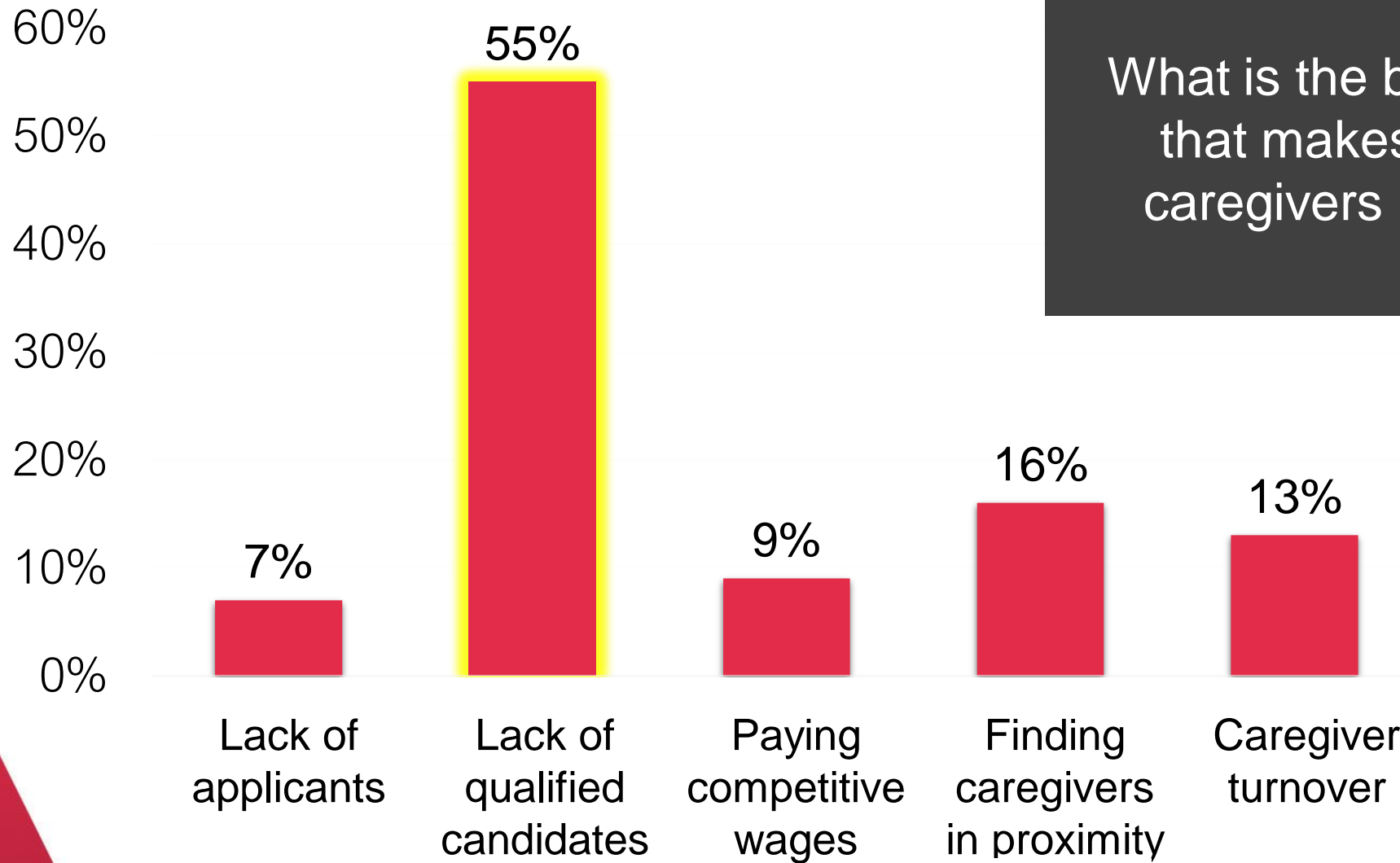
Half of all direct care workers leave the field every year

Home care needs 8.2 million workers to accommodate future needs



Recruitment Woes

What is the biggest factor that makes recruiting caregivers so difficult?



Seven Key Personas of Future Caregivers



Career Caregiver



Single Moving Mamas



Caring on the Siders



Empty Nesters



Young and On the Move



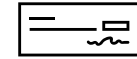
Still Going Strong
Retirees



Oodles of Offspring

*Insights on the Future of Senior Care
(Mission Care Collective)*

Recruitment and Retention



Pay



Recruit outside of normal channels



Career path – a variety of jobs



Internal training programs

Focus on **who** to target, **how** to target, **where** to target and **what** motivates and inspires each person.

Capitalize on Growth Opportunities

Build Pipelines

Build pipelines for referrals

- Five key channels

Build Relationships

Build relationships with those interfacing with seniors

- Feet on the streets/
marketer

Use Programs

Use programs to transition relationships to partnerships

- Focus on your referral partnership pain points

Expand Services

Expand services offering to diversify revenue streams and be a one-stop shop for your partners

Build Pipelines

Five Main Pipelines for Generating Referrals

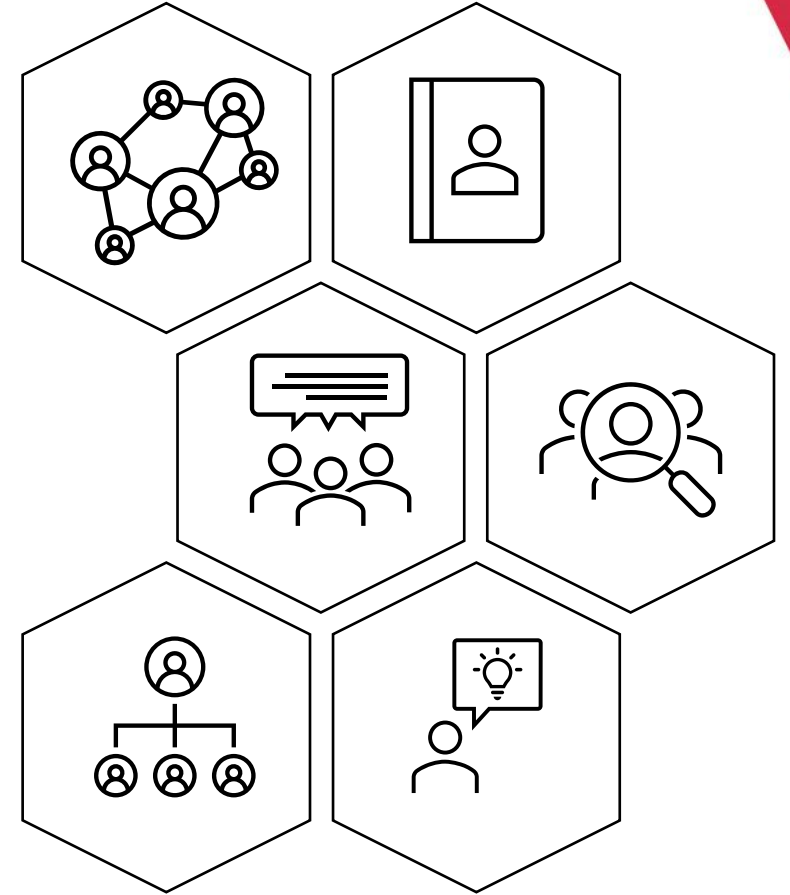
Direct-to-consumer efforts through SEO, Google search, etc.

Clients

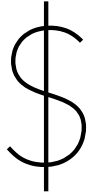
Referral providers
(Agingcare.com, A Place for Mom, corporate websites, etc.)

Government programs

Community providers that engage with people in need and their families who are looking for solutions



Build Relationships



Donate at point of need



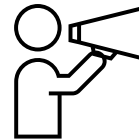
80% of home care revenue comes from referrers



Need for marketer



Relationships come from frequent touchpoints



A system to ensure reach, frequency and consistency

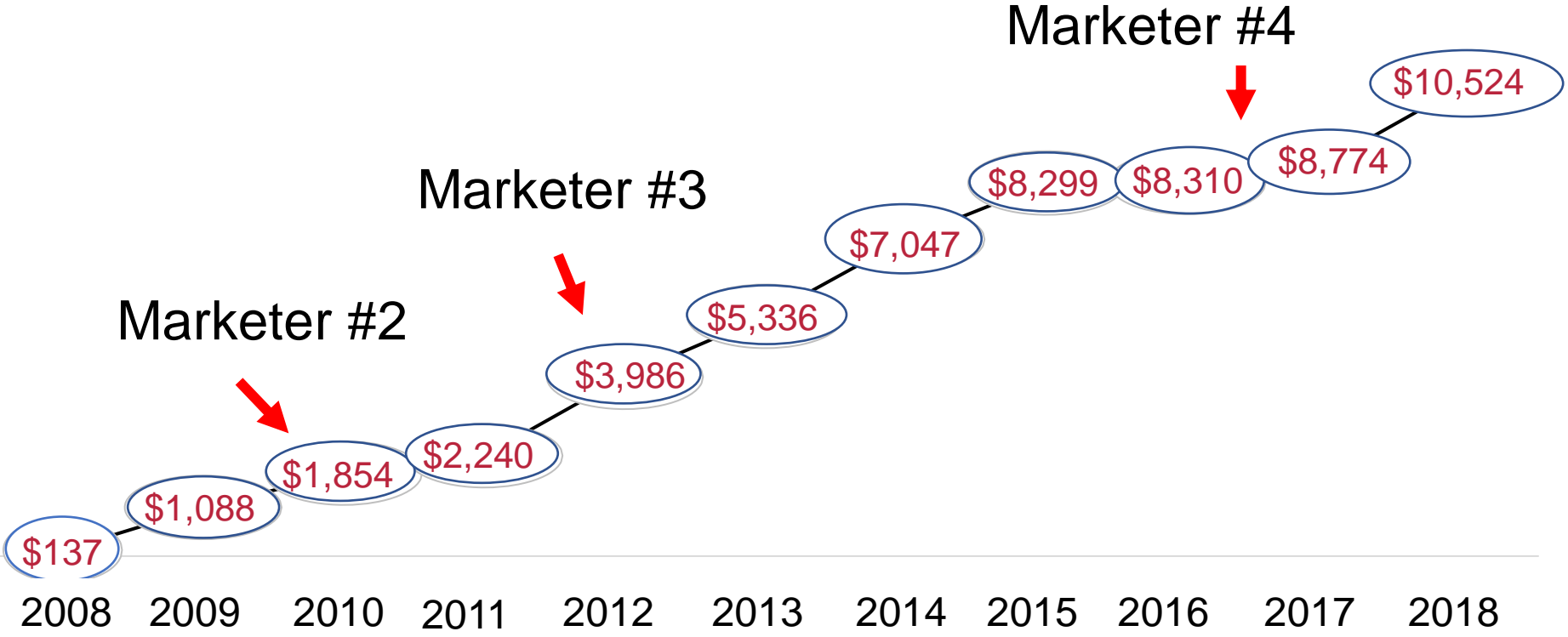


CRM – own your referral sources

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Marketing ROI



Marketing System



Dedicated marketer



Database of key targets



Marketer routing system



Strong marketing materials to support weekly frequency



CRM and marketing software for tracking marketer activity, accountability



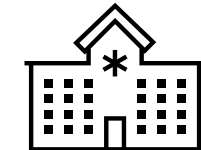
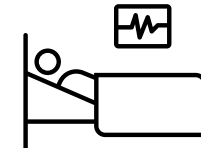
Referral management system and referrer communication platform

Targeting the Right Places

Hospitals

Geriatric psych
hospitals

Skilled nursing
facilities/rehab
centers



Doctor offices

Home health
agencies

Hospice
providers

Memory care
communities

Assisted living
communities



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Targeting the Right Places

Consider places where seniors live and are managed and supported by staff who can identify a senior in need

Independent living communities

Retirement villages

55+ communities



Targeting the Right Places

Consider community support organizations and companies whose mandate is to help seniors

Alzheimer's/
dementia
associations

Support groups:
Alzheimer's,
Parkinson's
disease, etc.

Elder law
attorneys

Trust managers

Insurance
agents (long-
term care
insurance)

Churches



...and the Right People

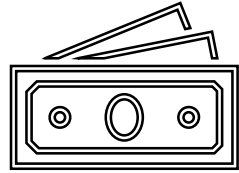


Discharge planners, social workers, administrators, MDs and NPs, nurses, therapists, attorneys, managers, etc.



Use Programs

Focus on Pain Points



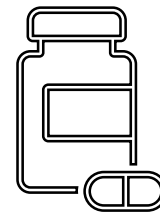
Penalties



Rehospitalizations



Patient
Outcomes



Chronic Disease
Management

What Causes Hospitalizations?



Falls



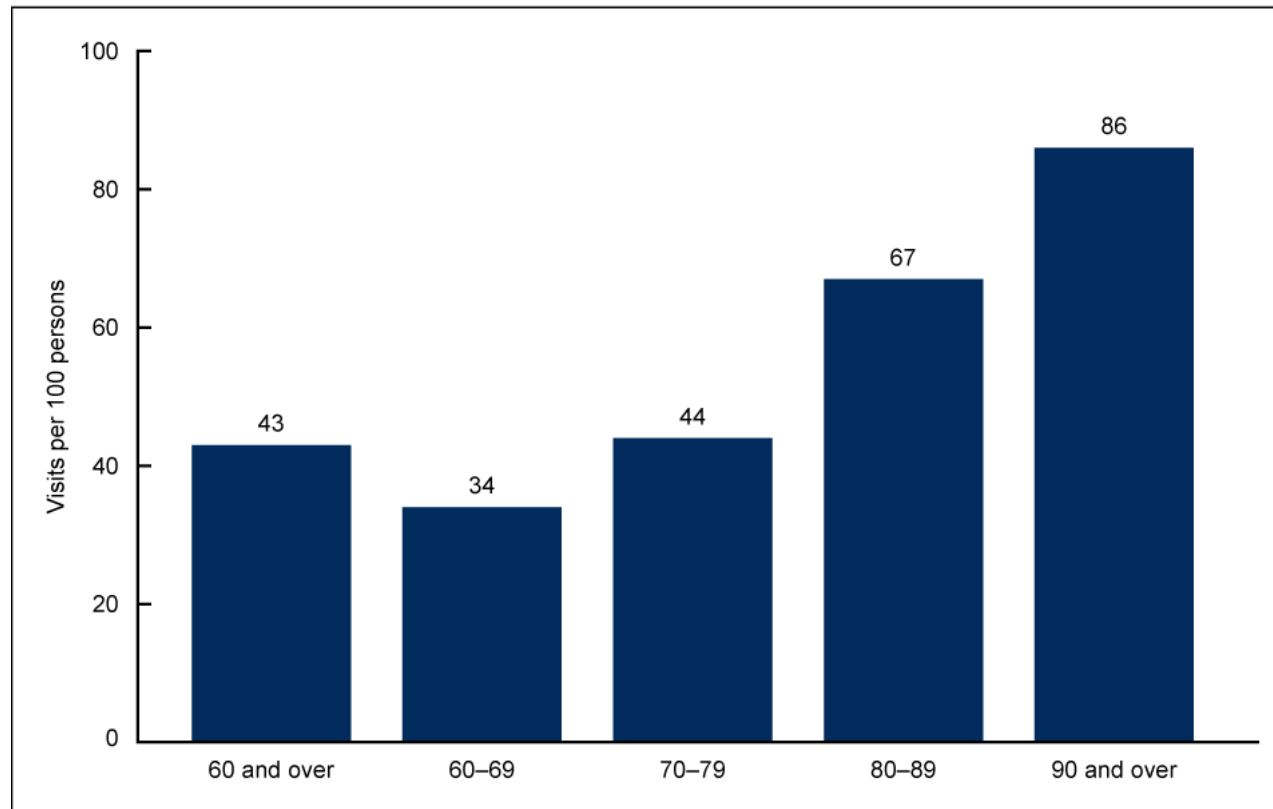
Poor medication
management



Improper disease
management

ER Visits Increase With Age

Figure 1. Emergency department visit rates for patients aged 60 and over, by age: United States, 2014–2017



NOTES: Based on a sample of 16,497 emergency department (ED) visits made by patients aged 60 and over, representing an annual average of approximately 29 million ED visits (20% of all ED visits). Visit rates are based on the July 1, 2014–July 1, 2017, sets of estimates of the civilian noninstitutionalized population of the United States, as developed by the U.S. Census Bureau's Population Division. Trend shown is significant ($p < 0.05$). Access data table for Figure 1 at: <https://www.cdc.gov/nchs/data/databriefs/db367-tables-508.pdf#1>.
SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2014–2017.



Who Is at Risk for Falls?

- Being on three or more medications
- Having one or more functional limitations
- Having pets
- Having chronic diseases and illnesses
- Cluttered home environments
- Eating or drinking inadequate amounts
- Having an unsteady gait or use of assistive devices
- Vision problems
- Living with pain
- Being 65 or older
- Living alone

Home Safety Checklist

Too Many Seniors Will Fall This Year!



Most serious falls occur in and around the home and can be life-changing.

- One-third of people 65 and older fall each year
- 1 out of 5 falls causes a serious injury, such as a head trauma or fracture
- Every 29 minutes an older adult dies from a fall



Home Care Interventions to Reduce Risk:

- Home safety check
- Chronic care management
- Assistance with activities of daily living (bathing, dressing, etc.)
- Medication management
- Meal planning and preparation
- Transportation to doctor appointments and errands
- Housekeeping and laundry
- Encourage regular exercise

Fall Risk Factors:

- | | |
|--|--|
| <input type="checkbox"/> Previous falls | <input type="checkbox"/> Dehydration, malnutrition |
| <input type="checkbox"/> Lower body weakness | <input type="checkbox"/> Psychoactive medications |
| <input type="checkbox"/> Balance issues | <input type="checkbox"/> Poor vision |
| <input type="checkbox"/> Chronic health conditions | <input type="checkbox"/> Unsafe home environment |

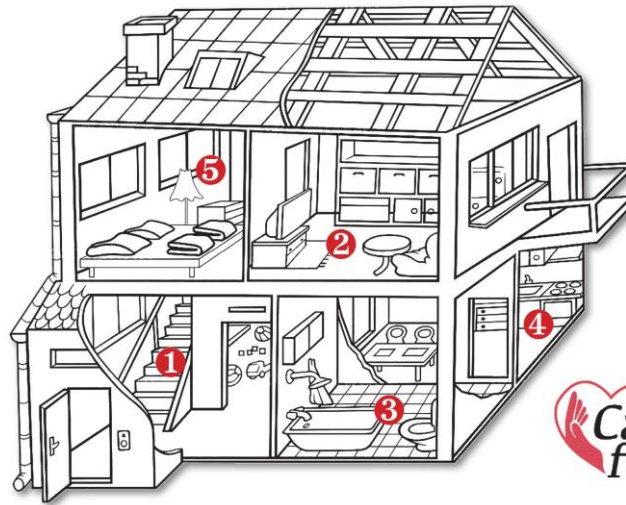
To help maintain your independence, it's important to understand the ways you can protect yourself from falls.

Call to learn more about our strategies for reducing falls.



Spring County
1-202-555-0128

Some simple precautions can ensure safety and reduce your risk of falling at home.



A Checklist For Preventing Falls in Your Home:

1 Stairways

- Are all handrails solid and securely fastened?
- Do both sides of the steps have handrails?

2 Floors and rugs

- Is there a clear path through each room with no furniture to walk around?
- Are floor boards even?
- Are rugs, including area rugs, secured to the floor with tacks, non-skid pads or double-sided carpet tape?
- Is the floor clear of papers, magazines, books, shoes and other objects?

3 Bathroom

- Can you move safely in the bathroom area, and is there easy access to the tub or shower?
- Are there non-slip strips in bath/shower?
- Is a shower chair needed?

- Is there an adjustable hand-held shower head?

- Are grab bars at the toilet, bath and shower secured to the walls with reinforcements?

- Are bath mats non-slip or fastened securely with double-sided rug tape?

4 Kitchen

- Are items that you use frequently, such as dishes and food items, easy to reach?
- Is there a step stool with a bar to hold on to?

5 Lighting

- Are there night lights in hallways, bedrooms, bathrooms and stairways?
- Are there light switches at the top and bottom of stairs?
- Is there a lamp (and telephone) near the bed?
- Is lighting uniform in each room with no dark spaces?



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Name of Medication	Dose	When to take:				With or without food?	What is the medication for?	Date started/ date stopped/ date dose changed.	Doctor who started the med.	Side Effects
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					
		A.M.	Noon	P.M.	Bedtime					



Medication Management

- Medication tip sheets
- Use of pill box
- Medication tracking
- Pre-packed medications

Data for Outcomes



Visit fulfillment



Staff-to-client ratio

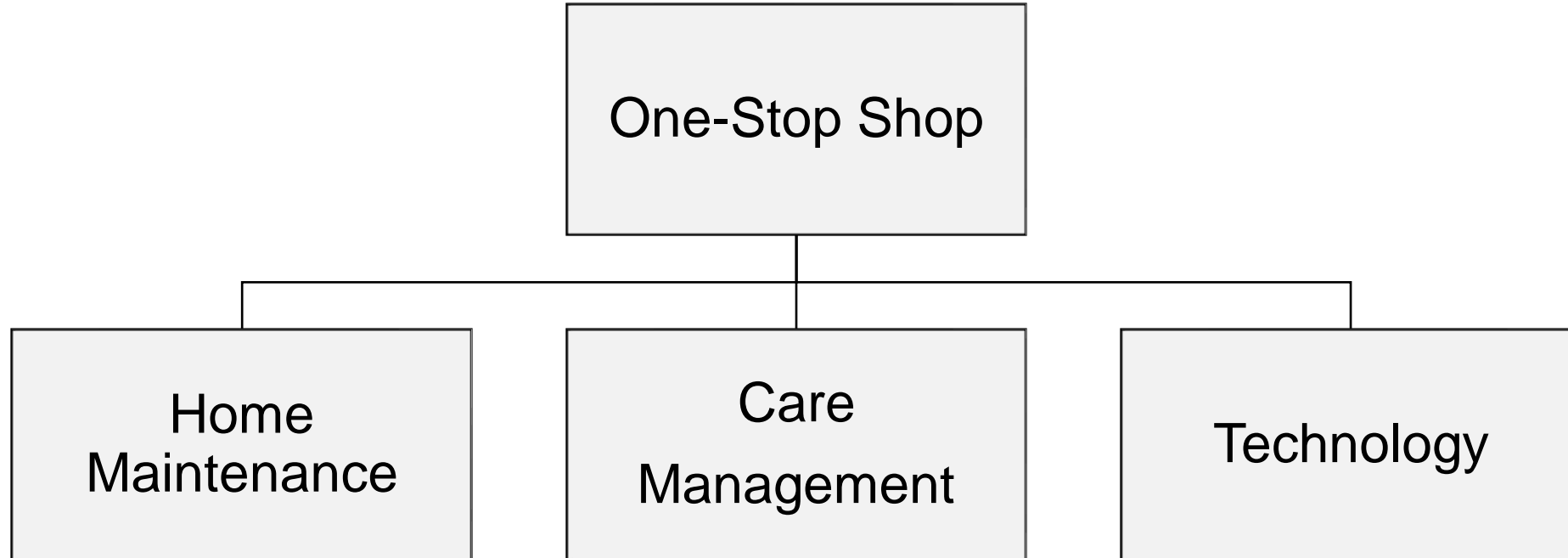


Hospitalizations/rehospitalizations



Infection control reporting

Expand Services





Home Maintenance

Safety Enhancements

- Bathroom equipment
- Lighting
- Declutter
- Handrails/ramps

Routine Repairs

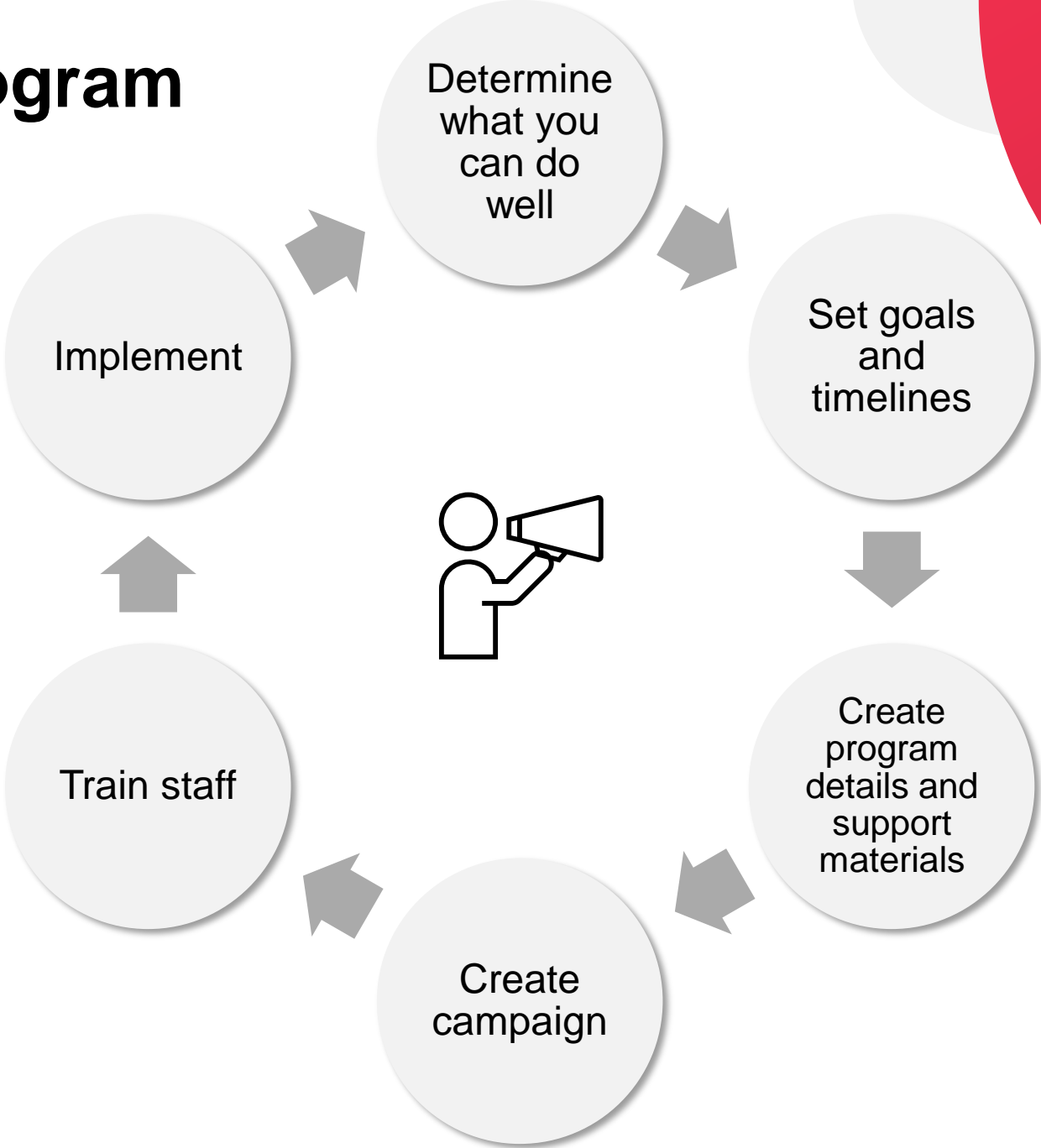
- Smoke detector
- Yard work

Technology

- Artificial intelligence (AI) technology provides insights into what is happening in the home
 - Helps providers target key times of the day when care is needed
 - Motion, infrared and sound
- Helps detect issues ahead of time to reduce hospitalizations, falls, etc.
- Can augment “hands-on” care
 - Does not require staff
- Creates a new revenue stream for the home care agency that is not reliant on staff



Market Your Program



Program Ideas

Bridge to Home Program

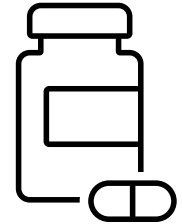
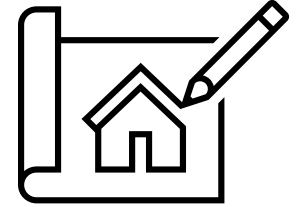
- Onsite assessment prior to discharge
- Safety assessment of home
- Family meeting to discuss solutions
- Medication management
- Care coordination

Aging in Place Safe Program

- Safety assessment of home
- Home modification recommendations
- Medication management
- Care coordination

Partners in Care

- Chronic disease management
- Medication management
- Activities of daily living (ADLs)
- Transportation to appointments
- Meal planning and preparation



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Referrer Facing - Education

Care Management

- ✓ Onsite Discharge Plan Review with Staff
- ✓ Family Care Meeting
- ✓ Home Safety Evaluation
- ✓ Coordinate Community Services - as needed
- ✓ Care Planning and Coordination



**A Bridge
to Home**

- Assist with ADLs
- Emotional Support
- Medication Management
- Chronic Disease Management
- Meals
- Transportation

Client-Facing Collateral



A little assistance goes a long way to help you transition home safely!

**Our professional caregivers are
highly trained and will assist you with...**

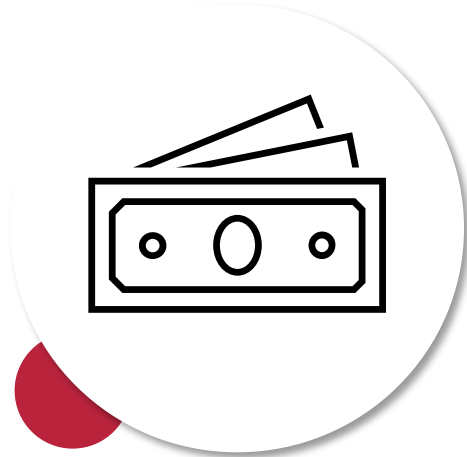
- Bathing / Dressing
- Medication Reminders
- Toileting / Hygiene
- Incontinence Care
- Assistance with Walking
- Laundry
- Linen Changes
- Companionship
- Light Housekeeping
- Meal Preparation
- Feeding
- Shopping
- Errands
- Transportation
- And so much more!

**We can support your recovery and reduce
complications that lead to rehospitalization.
Call to learn more about our home care strategies!**



**Spring County
1-202-555-0128**

Summary



Capitalize on market changes – “opportunity”



Find creative ways to recruit – always be hiring and retaining



Feet on the street to develop relationships. Partner with providers vs. “ugly stepsister”

THANK YOU



Debbie Miller

Founder and CEO
52 Weeks Marketing, LLC
dmiller@seniorhelpers.com



Brian Nelson

Senior Product Marketing Manager
Axxess
bnelson@axxess.com

