



Professional Healthcare
RESOURCES

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HEARTBEAT

4th Quarter 2010



Eileen DeCesare, RN,
President & CEO
Emeritus of Professional
Healthcare Resources, Inc.

Giving Thanks and Appreciation to our Staff and our Patients

As we approach the last quarter of the year and start preparing for the holidays, it is fitting that we take a step back and reflect on all the blessings that we have received and to consider how far we have progressed. Last October, we celebrated the inclusion (once again) of several of our branches in the Home Care Elite List, the first year anniversary of our Cerner implementation, our 4th year

anniversary with Infnit-O Philippines, the 3rd year anniversary of our Baltimore Home Health and Hospice agency, and its move to a new office location. We also gave thanks for our staff as we celebrated PT Month in October and National Home Care and Hospice Month last November.

During the last week of September, Professional Healthcare Resources launched hospice services in both its DC and

Annandale locations. The opening of Hospice services in these two locations have increased the number of PHR locations offering Hospice services to three – Baltimore, Annandale and DC.

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The Professional Healthcare team prepares Thanksgiving meals for our patients

Editorial

Welcome to the last issue of Heartbeat in 2010. We have some interesting articles lined up for you, Garth Granrud writes about Care Transitions and Cam Compton tells us about coping with grief and loneliness through the holidays. There is an excerpt from our press release about how many of our branches were named to the Home Care Elite for the fifth time in 2010. Lastly Eileen DeCesare has given us a thorough synopsis of events throughout the year. And so as 2010 draws to a close and we look forward to what lies ahead in 2011 all of us at Professional Healthcare would like to wish you and your families a very happy holiday season.

Justin Ivatts, PCM (AMA), Editor

Care Transition Programs Improve Patient Outcomes

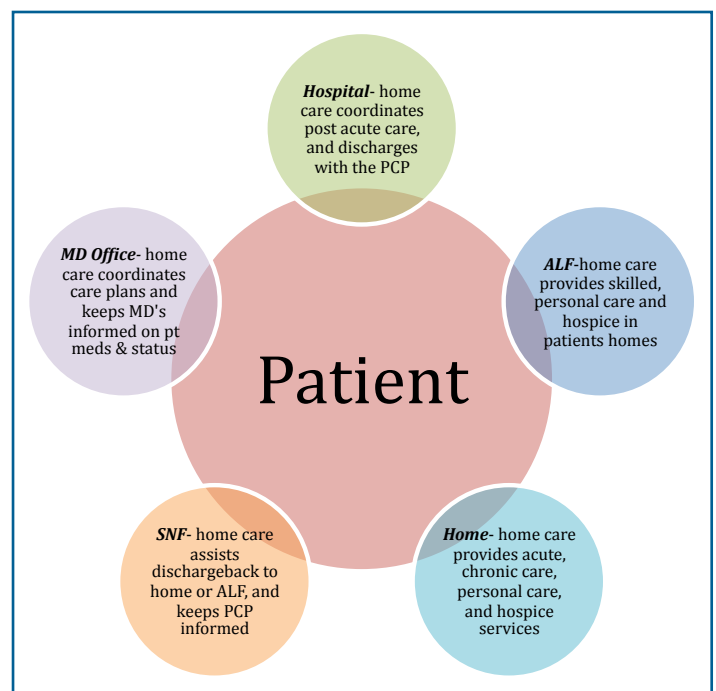
The Affordable Care Act mandates a Community-based Care Transitions Program by section 3026, and provides funding to test models for improving care transitions for high risk Medicare beneficiaries. At a recent CMS conference on care transitions many of the care transition projects currently in progress used similar methods to prevent hospital re-admissions and improve the continuity of care. Most of the project included:



- Targeting high risk patients such as those with heart failure, COPD, diabetes, pneumonia, kidney disease and hypertension
 - the programs also used risk scales to identify potential problem case like those with a high number of medications, the existence of multiple co-morbidities, or the lack of a support system
- Conducting a thorough medication review of hospital medications and medications in the home
 - some used pharmacists to assess the medications and made sure that patients understood why they were taking medications, and what to do if they missed doses to improve adherence and self-management
 - they also looked at their insurance formularies to make sure that the medications were not too costly so the patients would continue to refill the medications
- Improving post-discharge follow-up by a PCP, specialist, and/or nurse
 - they provided PCP's with discharge summaries in a timely manner
 - understood the patients barriers to follow-up care like a lack of transportation
 - provided patient education on "red flags" or warning signs and symptoms and how they should respond
 - scheduled home care visits and/or telephone follow-up
- Providing enhanced patient education and coaching on their medical issues

- throughout hospital stay and post discharge they kept patients informed about their medical tests and lab results and meaning of the results
- provided easy to read care plans and instructions
- provided coaching and use teach-back techniques to understand the patient's knowledge of their disease processes and taught them how to take better care of themselves

With Medicare reimbursements decreasing healthcare providers must continue to seek new ways to reduce avoidable hospital re-admission and ER visits to drive out unnecessary costs while improving patient outcomes. Providers will have to work more closely together to improve the coordination of care and develop formal and informal networks to deliver better community-based care. Home care providers are in the unique position of delivering services to patients in their homes. At Professional Healthcare we have implemented a point of care EHR system to share information both internally and with our allied care providers. We are developing chronic disease management programs and care paths to identify and help high risk patients. We are constantly looking at new ways to enhance our collaboration and coordination with our referral hospitals, nursing homes and physicians to improve quality, reduce costs, and improve the lives of our patients - the goal of every healthcare provider.



Giving Thanks

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We have developed a service line synergy that offers complimentary product lines within our services: wound care, vision care, fall prevention, medication management and chronic disease management. We aim to provide superior management practices through continuous improvement and performance management that will ensure desired outcomes consistently. Additionally, we are focusing on productivity, efficiency, risk mitigation and operational and financial discipline.

Despite the frenzy created by all our activities, we have not forgotten our patients. They remain paramount and at the center of everything we do. While much of what we have implemented is patient-related and consequently will benefit the patients, we have not forgotten that they are part of the PHR family. For Thanksgiving, we again (for the 15th year) prepared dinners for our patients who are living alone. We are their families, so to speak, so we cooked Thanksgiving dinners and packaged them for our patients. We encouraged the field staff to eat dinners with



Some happy faces, knowing that we have improved Thanksgiving for some of our patients

their patients so that they will have what everyone should have during the holidays: companionship and camaraderie. This is a tradition that we have at PHR and one that we will continue every year.

As we near the close of the year, I wish to thank all of you for your support throughout the year. Happy Holidays everyone!

Eileen DeCesare, RN, MS, CNA, LNC, NE-BC
President, CEO Emeritus

Professional Healthcare Resources Named as One of the Top Homecare Providers in the Nation for the Fifth Year in a Row.

Professional Healthcare Resources, the largest independent home healthcare and hospice agency in the Washington, DC metropolitan area has again been named to the HomeCare Elite (HCE) list of the top home care agencies in America. This is the HCE's fifth year; selections are made by OCS HomeCare and DecisionHealth®. The selecting organizations rank over 9,000 Medicare certified agencies through an analysis of quality outcomes, quality improvement, and financial performance.



“The 2010 HomeCare Elite winners continue to demonstrate a commitment to providing their patients with the best possible care while performing at the highest level,” said Amanda Twiss, CEO of OCS HomeCare. “We congratulate Professional Healthcare Resources on being one of the top home care agencies in the country. In addition, we salute all forward thinking providers who are already working on measuring and improving their performance using outcomes and process measures.”

The list is divided into the Top 100, Top 500, and Top 25% home care agencies. Professional Healthcare Resources' Washington, DC branch was named to the Top 100. The DC branch has been named to the HCE list every year since the list's inception in 2006, and this is the branch's second time in the Top 100. The company's Lanham, MD and Bethesda, MD branches were both named to the Top 500. The company's Annandale, VA branch was named to the Top 25%.

“On the fifth anniversary of HomeCare Elite, DecisionHealth would like to congratulate all of the winners who have achieved excellent clinical and financial outcomes, especially during times of such drastic regulatory changes,” added Marci Heydt, executive editor of DecisionHealth's *Home Health Line*.

Justin Ivatts, PCM (AMA)



Beating the Winter Blahs

Do you struggle with the onslaught of holiday busyness or feel left in a hazy fog after the break-neck pace of parties, shopping, and merry-making? Our culture has an exaggerated and commercialized view of “the Holidays.” Those who are not independent or who are otherwise homebound feel left out and struggle to feel part of the season. This is especially difficult for elderly and those people who do not have family or friends in their immediate area and are unable to get out of their homes – whether their home is in an Assisted Living Facility, Independent Living, or a Skilled Nursing Facility.

Part of the struggles that many of these patients experience is that the hustle-bustle of the holiday season just simply bypasses them, or worse, leaves them out altogether. So, it’s no wonder, then that the holiday season can leave these vulnerable populations feeling sad and blue. Often, they are already struggling with depression and loneliness from not being able to go out and may even have had to give up a previously active lifestyle prior to an illness or surgical procedure.

So, how can you and I help? What can we say or do to help people with putting the holiday season into perspective and regaining some of the peace and joy that we would all like to experience, no matter which holiday we choose to celebrate as part of our collective cultural heritage? The answers to these questions, will of course, vary depending upon the person, the circumstance, and our own ability to reach out and help. Here’s a list of suggestions to help stave off the winter blues and to encourage our clients and other geriatric clients to get creative and fight the winter blahs. Here are some ideas to not only help your clients, but you might find them helpful for yourself as well!

- Recognize that emotions are healing and that pushing the emotion aside does not make it go away
- Remember that you are loved, cared about, and valued
- Understand that part of what you are experiencing is normal, a change in lifestyle or activity is hard
- Eat right, get plenty of sleep
- Exercise and release some endorphins into your system!
- Raise the blinds/open the curtains and let the sunshine spill into your home
- Do things that give you pleasure – even small things
- Bring a new plant into your home – having something to take care of sparks energy
- Set a goal – make it realistic so that it is an achievable goal; otherwise, you set yourself up to fail and that’s counterproductive.
- Talk it out – Connect with sunny people who you enjoy being around and don’t “bring you down”
- Engage – Socialize – Indoor activities
- Participate in activities that sharpen your mind. Puzzles and word problems like crossword, word search and of course Sudoku can help keep your mind sharp.
- Stay hydrated! Keeping your body well-hydrated can help improve your brain function which will impact your thought processes, thus keeping you in a good place emotionally.



Great website for resources: <http://www.familyaware.org>

Cam Compton, BA, QMHP

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