



American Health Care Professionals Newsletter



IMPORTANT SWINE FLU UPDATES: See Page 5

Review of JCAHO #1 patient safety goal for 2009

Use at least two patient identifiers when providing care, treatment and services.

This includes while administering medications or blood products and when collecting blood samples and other specimens for clinical testing.

When the patient cannot actively identify himself or herself, then a single caregiver can be responsible for identity verification.

What does this mean for us at AHCP?

At start of care, or if a patient is new to you, you must ask the patient to state their full name and date of birth before you start your assessment. Make sure you have the referral with you to verify that they are telling you the correct information. This includes all nurses, therapists and aides.

Right now, there are two places where it is necessary to actually document that you did the 2 patient identifier check. On the PT care plan page 5 and on the SN careplan, page 7. These must always be filled in with the two types of identification checked or written in. If a caregiver did the identity check, then write their name on the line. Thank you for adhering to this important patient safety goal! ~ Claire RN

Quality Improvement Issues

Mary Kay and Kei

Can you believe summer is nearly over?!!! We hope each of you had a great one.

Our desire is to be supportive and helpful to all of your working in the field with our clients. In order to do so we need to communicate all required (by Medicare, Joint Commission,

Kaiser, AHCP) dates, documents and requirements to you. There are strict requirements that must be met and we need your cooperation DAILY in meeting these rules.

We KNOW you give wonderful care and attention to our clients. Please help by prompt

follow-up with documentation.

Thank you!!



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Special points of interest:

- Swine Flu update
- Quality Improvement issues
- Billing , Payroll & OASIS
- Spiritual Counseling
- Nsg. And Rehab
- Upcoming meetings and events
- Resource for AHCP staff

Billing, Payroll, OASIS & Select Data Issues: Beatriz Arroyave & Jocelyne Spellman

REMINDER:

To: All
(RN,PT,PTA,OT,ST,HHA)

When you go to see a client and client refuses care, is not at home or canceled the visit , the compensation for the visit is travel time. Travel time will be paid on the mileage rate set by the office. If you do not know rate, please call Beatriz ext. 208.



Steps to miss visit pay:

1. You must have called the client the day of your visit and received an okay to visit from the client.
2. You must call the office and explain reason why you were unable to do visit. You must record on a visit note.
3. You must get an approval to get compensation for missed visit from supervisors

Beatriz ext. 208. or Nursing Director.

In order to be paid for missed visit, you need to write miles on your visit sheet and also document the reason for not seeing the client and the supervisor, name that authorized missed visit. * This will be compared with the supervisor notes.

~Thank You

“ The Ministry of the Unnoticed”

By Oswald Chambers

The New Testament notices things which from our standards do not seem to count. “Blessed are the poor in spirit,” literally— Blessed are the paupers—an exceedingly commonplace thing! The preaching of to-day is apt to emphasize strength of will, beauty of character—the things that are easily noticed.

The phrase we hear so often, ‘Decide for Christ,’ is an emphasis on something Our Lord never trusted. He never asks us to decide for Him, but to yield to Him, a very different thing. At the basis of Jesus Christ’s Kingdom is the unaffected loveliness of the commonplace. The thing I am blessed in is my poverty. If I

know I have no strength of will, no nobility of disposition, then Jesus says— Blessed are you, because it is through this poverty that I enter His Kingdom. I cannot enter His Kingdom as a good man or woman, I can only enter it as a complete pauper.

The true character of the loveliness (cont. pg 3)

Blessed are the poor in spirit.
Matthew 5:3

Weekly Schedules

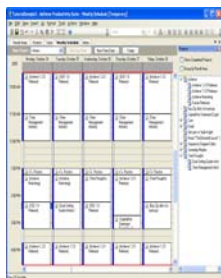
Tja Fort

I would like to thank all of you who have been compliant with turning in a weekly schedule. It seems to be such a tedious task, but it does help us better staff cases. We can use this schedule to see when you will be in certain areas on what day, and allows us to accept more referrals. Not only does it help with

staffing but it's also useful for when patients call into the office wanting to know the day and time a clinician is coming out to see them. Without the schedules we can not tell the patient this information, and therefore have to call the clinicians to find this out. This is not a good example of coordi-

nation of care, and can also affect our relationship with any referral sources. For those who have yet to turn in a weekly schedule please be sure to send one in. You can fax, email, mail or even drop it off.

I have also noticed a significant improvement on documentation. Not only (cont. 3)





“The Ministry of the Unnoticed”

Continue from page 2.....

that tells for God is always unconscious. Conscious influence is priggish and un-Christian. If I say, ‘I wonder if I am of any use,’ I instantly lose the bloom of the touch of the Lord. “He that believeth in Me, out of him shall flow rivers of living water.” If I examine the outflow, I lose the touch of the Lord.

Which are the people who have influenced us most? Not the ones who thought they did, but those who had

not the remotest notion that they were influencing us. In the Christian life the implicit is never conscious; if it is conscious, it ceases to have this unaffected loveliness which is the characteristic of the touch of Jesus. We always know when Jesus is at work because He produces in the commonplace something that is inspiring.



UPCOMING MEETINGS AND EVENTS

Please mark these dates on your calendar :

Innovative Team: Headed by Kekelwa Nyaywa

Meeting September 10, 2009

12-1pm * Lunch will be provided

Staff Meeting: Every Wednesday at 11a-12noon.

Morning Prayer: Every Morning (all AHCP staff invited).



Weekly Schedules

Continue from page 2.....

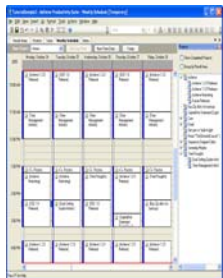
does this mean we are in compliance with JCAHO but it also means a quicker response when requesting more visits through Kaiser.

Reminders on case coordination: Please be sure that before or after you discharge a patient that you contact any clinicians that may still be in on the case.

This cuts down any errors on filling out un-necessary paperwork and cuts down the amount of time being spent to audit the paperwork. Clinicians should also be keeping the physicians updated with the care of the patients, as well as the office and any other disciplines. This is a perfect example of case

coordination.

We understand that changes can not happen overnight, but we are willing to work with you all to reach our maximum goal. Again thank you all for the outstanding improvements and please continue to keep up these improvements.





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The Vision and Mission of American Health Care Professionals (AHCP):

AMERICAN HEALTH CARE PROFESSIONALS WAS ESTABLISHED WITH ONE GOAL IN MIND: TO PROVIDE COMPASSIONATE, HIGH- QUALITY, SAFE, AFFORDABLE HOME HEALTH CARE TO THOSE IN NEED.

American Health Care Professionals (AHCP), a division of the American Health Home Care Group, Inc., was established in 1995 in the State of Virginia. AHCP is one of the leading providers of comprehensive home health care services in the Northern Virginia area. AHCP participates in Medicare / Medicaid, commercial insurance, private pay, and personal care waiver.

AHCP is a single source for skilled nursing, physical, occupational, speech and social work, disease management education, help with daily living activities, as well as other therapies and services. A **CHRISTIAN COMPANY OPERATING UNDER CHRISTIAN PRINCIPLES.**

For further information, please contact Clishia Taylor RN, MBA - Administrator ex. 204

EMPLOYEE OF THE MONTH (September 2009)

American Health Care Professionals would like to recognized **Victor Mesina RN** for being voted as Employee of the Month for September 2009. **Victor** is a **Registered Nurse** and has been outstanding in the care he provides to our clients.



IMPORTANT UPDATES OF SWINE FLU

PANDEMIC DECLARATION MEANS VIRGINIANS NEED TO REMAIN VIGILANT IN H1N1 RESPONSE

(RICHMOND, Va.)— Earlier today, the World Health Organization raised its influenza pandemic alert from Phase 5 to Phase 6, reporting that confirmed cases of the novel Influenza A (H1N1) virus have now been found in 74 countries. In most countries, according to the WHO, the increase in cases can be attributed to “good surveillance and testing.”

In Virginia, State Health Commissioner Karen Remley, M.D., MBA, said the WHO’s action was not unexpected. “This change means that the H1N1 virus has reached more parts of the world and is an indication of how easily the virus is spread from person to person,” Commissioner Remley said. “Today’s declaration does not change the nature of the virus’ severity, which remains mild in Virginia, nor does it indicate any change in the behavior of the virus.” What the declaration does mean for Virginians, the Commissioner said, is the need to remain vigilant against the spread of the disease. “We are focused on monitoring the activity of the virus in our state and on reducing its impact, especially among those at highest risk for complications,” Commissioner Remley said. The state has reported 84 confirmed cases of H1N1 virus, with relatively few hospitalizations and one death of a person who had the infection. Nationwide, the Centers for Disease Control and Prevention has reported 13,200 confirmed cases, approximately 1,000 hospitalizations and 27 deaths.

The state continues to concentrate its testing protocol on those members of the population who are at highest risk for complications from the virus. These include people who are hospitalized with influenza-like illness, people with underlying chronic health conditions, pregnant women, the elderly and the very young.

People with influenza-like symptoms that include fever, cough, sore throat, headache, chills, fatigue and body aches should:

- stay home from work or school and limit their contact with others to keep from spreading the virus
- cover their nose and mouth when they cough or sneeze and to throw the tissue in the trash
- wash their hands often with soap and water, especially after they cough or sneeze. Use of alcohol-based hand cleaners also is effective.
- limit close contact with sick people
- prevent the spread of germs by not touching their eyes, nose or mouth

call their health care provider if they have questions or concerns Stay informed. We encourage you to monitor the CDC Web site (<http://www.cdc.gov/h1n1flu/>) and that of the Virginia Department of Health (<http://www.vdh.virginia.gov>) and Virginia Department of Education (<http://www.doe.virginia.gov>) for additional resources and the most current recommendations.