

American Health Care Professionals Newsletter



2 Falls Risks You May Have Overlooked:

If your patient uses a walker but has had no instruction in using it safely, don't be surprised to find her in the emergency room.

A new study published in the July issue of the Journal of the American Geriatric Society shows that injuries and hospital admissions for falls associated with walking aides are frequent in the over-65 population. The most common injuries are fractures, contusions, and abrasions. About one-third of the injured required hospitalization.



“An estimated 47,312 older adults falls injuries associated with walking aids were treated annually in U.S. emergency departments: 87.3 percent with walkers, 12.3 percent with canes, and 0.4 percent with both,” the study reports. Seven times as many injuries occurred with walkers as with canes, and women were higher rate than men, the study says.

Heads up: Sixty percent of the falls injuries with walkers and canes occurred at home. Be sure your patients using walking aides are instructed in the safe use of these devices. And focus on safety issues when completing the OASIS assessment, experts advise for Eli publication.



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Special points of interest:

- Home Health care updates
- Quality Improvement issues
- Billing , Payroll & OASIS
- Spiritual Counseling
- Nsg. And Rehab
- Upcoming meetings and events
- Resource for AHCP staff
- Employee of the Month

Quality Improvement Issues

Mary Kay and Kei

"QI Reminders for Clinicians:

1. When a client is admitted to hospital or other inpatient facility:

(a) please notify the office immediately,

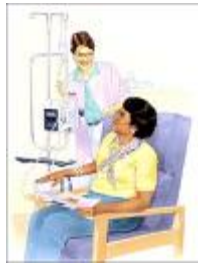
(b) prepare & submit transfer paperwork to the office within 48 hours of admission.

2. Discharge Oasis Protocol: Last discipline is responsible for discharge oasis upon discharge and completion of all services for a client. This should be done regardless of

whether a client is Kaiser, Medicare, Private Pay, etc.

Thank you to each and every one of you for your great service for clients.

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



Education: Follow Oasis wording carefully for data accuracy.

Scenario: Your patient is routinely admitted to the hospital for planned chemotherapy.

Question: Do you have to complete an RFA 6/7 (Transfer to the Inpatient Facility) each time the patient goes into the hospital for these planned admissions?

- A. Yes, because it is a planned admission for treatment, not for the diagnostic testing exception allowed by MO100.
- B. No, Because this is a routine planned admission, not an unexpected or emergent care admission.

Answer: B

An RFA 6/7 (Transfer) is required any time the patient is admitted to an inpatient facility for 24 hours or longer for reasons other than diagnostic testing. The

fact that it was planned admission is not a factor in determining the Transfer OASIS data collection and submission are required, the Center for Medicare/Medicaid Services (CMS) explains in Question 6 of the April 22, 2009 OASIS questions and answers. In this scenario you must complete an RFA 6/7 (Transfer) each time the patient is admitted as an inpatient for 24 hours or longer, since the admission is for treatment and not just diagnostic testing.

“ The Baffling Call of God”

By Oswald Chambers

And all things that are written by the prophets concerning the Son of man shall be accomplished. . . . And they understood none of these things. Luke 18:31, 34.

God called Jesus Christ to what seemed unmitigated disaster. Jesus Christ called His disciples to see Him put to death; He led every one of them to the place where their hearts were broken. Jesus Christ’s life was an absolute failure from every standpoint but God’s. But what seemed failure from man’s standpoint

was a tremendous triumph from God’s, because God’s purpose is never man’s purpose.

There comes the baffling call of God in our lives also. The call of God can never be stated explicitly; it is implicit. The call of God is like the call of the sea, no one hears it but the one who has the nature of

the sea in him. It cannot be stated definitely what the call of God is to, because His call is to be in comradeship with Himself for His own purpose, and the test is to believe that God knows what He is after. The things that happen do not happen by chance, they happen entirely in the decree of God. (continue on page 3)

Documentation Reminder to all Clinicians

Tja Fort



- When opening a case please be sure to do the pages 36, 37, 38 and the corresponding SOC paperwork found on the right pocket of the Red Admission Folder.
- If you are a clinician who is doing an evaluation please be sure that you fill out the corresponding Eval Oasis as well as a

Physicians Order.

- When transferring a patient to the hospital please be sure that the last clinician in the home fills out and completes the Transfer Oasis (case coordination between the clinicians will verify this) and a physicians order.
- When resuming a patient’s

case please remember that a Physicians Order, a CM-1 and the corresponding ROC pages are to be filled in and completed. A ROC does not call for a new careplan to be completed UNLESS there is a change in the careplan that was originally written i.e. (visit frequency changes, visit duration changes) (cont. page 3)



“The Baffling Call of God”

God is working out His purposes.

If we are in communion with God and recognize that He is taking us into His purposes, we shall no longer try to find out what His purposes are. As we go on in the Christian life it gets simpler, because we are less inclined to say—‘Now why did God allow this and that?’ Behind the whole thing lies the compelling of God. “There’s a divinity that shapes our ends.” A

Christian is one who trusts the wits and the wisdom of God, and not his own wits. If we have a purpose of our own, it destroys the simplicity and the leisureliness which ought to characterize the children of God.

Continue from page 2.....



UPCOMING MEETINGS AND EVENTS

Please mark these dates on your calendar :

Innovative Team: Headed by Kekelwa Nyaywa

Meeting September 3, 2009

12-1pm * Lunch will be provided

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

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



Documentation Reminder to all Clinicians

Continue.....

All discharges are to be done by each clinician. If you are the last clinician in the home please make sure that you fill out the Discharge Oasis and the 2-Day Medicare sheet. If you are not the last discipline in the home please be sure that you only fill out the Discharge Summary and the 2-Day Medicare. A physicians order should only be filled out

with a discharge IF you have not checked off the box in the care-plan that states “May decrease visits or discharge as goals are met”.

Please contact the office for a copy of the Smartscribe Form Submission Packet sheet. This covers what documents are to be filled in by each clinician for

each scenario.

Thank you to all the clinicians that have turned in a weekly schedule, this has greatly improved on the scheduling and the intake of client referrals. Please feel free to contact the office for clarification on any issues addressed individually and/or in the Newsletter.





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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 (August 2009)

American Health Care Professionals would like to recognized **Diana Haverlack PT** for being voted as Employee of the Month for August 2009. **Diana** is a **Physical Therapist** and has been outstanding in the care she provides to our clients.

