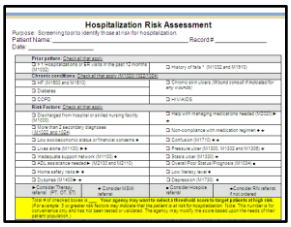
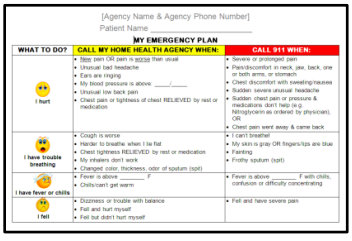
Home Health Quality Improvement Resources

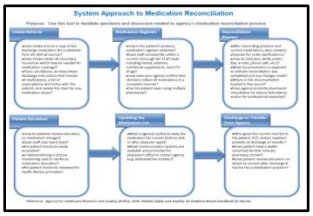
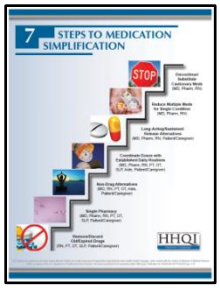
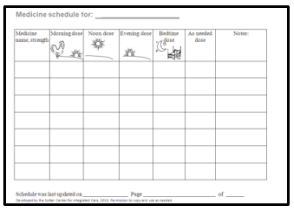
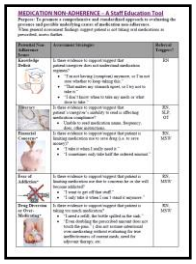
Below are some of the key resources that were discussed during the presentation (and a few additional tools) with a brief description and link to the location of the materials. There are many different resources with each Best Practice Intervention Package (BPIP).

You will need to sign up for the HHQI Campaign to access the free resources. (If you're not a home health agency, just select "No" when registering.) Materials are typically appropriate across settings and can be modified to meet your organization's needs. All materials are in the public domain and, therefore, are free to use without express permission. If you have any questions, please contact HHQI@wvmi.org.

Reducing Hospitalizations

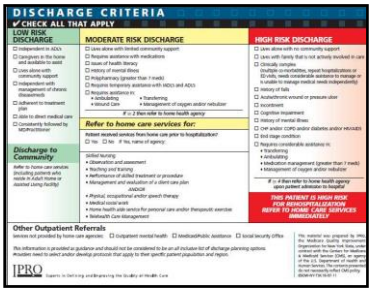
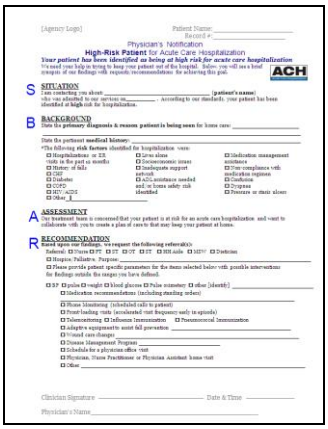
BPIPs	• **Fundamentals of Reducing Acute Care Hospitalizations BPIP** • **All other BPIPs support reducing hospitalizations**
	• **Home Health Hospital Risk Assessment** • **Clinician tool** • Identify evidence-based risk factors for home health patient that align with most of the home health data assessment (OASIS)
	• **Call Me First Posters** • **Patient tool** • Provides visual reminder for patient/family to call the agency with issues first instead of going to emergency department unless if true emergency • Alternative versions
	• **Emergency Care Plan** • **Patient tool** • Identify who to call related to symptoms (4-pages) using yellow and red to indicate severity of symptoms

Medications Management

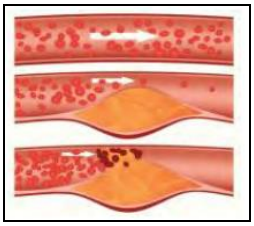
BPIPs	• Medication Management Focused BPIP • Improving Management of Oral Medications BPIP
	• System Approach to Medication Reconciliation ○ **Agency level tool** ○ Assess reconciliation from intake to discharge from home health agency
	• 7 Steps to Medication Simplification ○ **Clinician tool** ○ Identify possible steps to simplify patient's medication regimen to improve adherence (3-pages) ○ Beers Criteria included on page 3
	• Patient friendly Medication List ○ **Patient tool** ○ Provide a simple medication list for patient's with health literacy issues or other barriers to schedule of medications
	• Guiding Patients Towards Medication Adherence ○ **Clinician tool** ○ Assists clinicians on engaging patient in medication adherence including open-ended questions on topics of access, schedule, administration, and behavioral modifications
	• Medication Non-Adherence – A Staff Education Tool • **Clinician tool** • Consider different underlying reasons for non-adherence and appropriate discipline referrals as interventions

Care Transitions

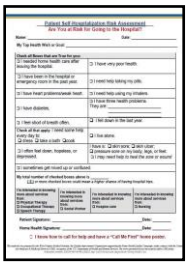
Note: Many of the tools above are also appropriate for Care Transitions

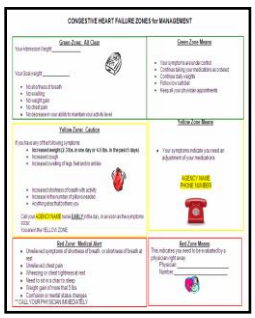
BPIPs	• [Cross Settings I BPIP]
	• [Discharge Planning Tools] • **Clinician tool** • Use or modify tool for inpatient discharge planners or for home health liaisons
	• [SBAR High-Risk ACH] • **Clinician tool** • Incorporate SBAR fax sheet that includes interventions for reduce hospitalizations ○ **S**ituation-**B**ackground-**A**ssessment-**R**ecommendation • Alternative version [I-SBAR]
	• [Teach-back Tools] • **Clinician tools** • Use exercises and cards to practice and use teach-back to evaluate message sent is received

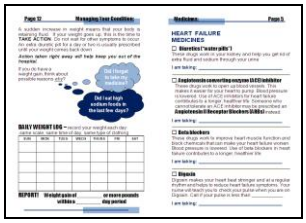
Cardiovascular Health

BPIPs	• Cardiovascular Health Part 1: Aspirin as appropriate & Blood pressure control • Cardiovascular Health Part 2: Cholesterol management & Smoking Cessation
Aspirin as Appropriate 	• Using Aspirin for the Primary Prevention of Cardiovascular Disease - Clinician fact sheet • Taking Aspirin to Prevent Heart Attacks – brochure for men • Taking Aspirin to Prevent Strokes – brochure for women
Blood Pressure Control 	• At a Glance: Lowering Your Blood Pressure with DASH • Blood Pressure Accuracy & Accurately Assessing Orthostatic Hypotension • Getting Blood Pressure Under Control • Hyperte3nision Classifications: Stages & Management • Lifestyle Modifications What You Need to Know: High Blood Pressure • And many more
Cholesterol Management 	• Risk Categories: Cholesterol & Triglyceride Levels • LDL Goals with Therapeutic Lifestyle Changes & Drug Therapy • Types of Fats • Cholesterol-Lowering Medications • Questions About My Heart for My Doctor (patient tool) • Take Control of Your Cholesterol (patient tool)
Smoking Cessation 	• 5 A's Behavioral Counseling Framework • Clinical Practice Guidelines for Treating Tobacco Use & Dependence • Drug Interactions with Tobacco Smoke • Fagerstrom Test for Nicotine Dependence • FDA-Approved Medications for Smoking Cessation • Tobacco Use Log • Withdrawal Symptoms Information Sheet • And many more

Patient Self-Management & Disease Management

BPIPs	• Patient-Self Management Focused BPIP • Cross-Settings II BPIP • **Look for Disease Management: Diabetes Focused BPIP (02/03/14) and Disease Management: Heart Failure Focused BPIP (04/01/13)**
	• Patient Hospital Risk Assessment • **Patient tool** • Assist patients and caregivers in identifying their hospitalization risks and behaviors to begin working on patient-centered interventions to prevent redmissions
	• Personal Health Record • **Patient tool** • Track health information for patient to share cross-setting and to be active partner with health history
	• My Action Plan • **Patient tool** • Set goals including conviction and confidence rulers • Alternative Action Plans

	• Disease Management "Zone Tools"
	• **Patient tools**
	• Utilize tools to identify s/s and interventions for symptoms using the green, yellow, and red approach
	  ○ Includes CHF, COPD, Depression, Diabetes, Foley Catheter, Heart Disease, High Blood Pressure, Respiratory, and Wound Care
	• Alternative Zone Tools including some Spanish versions are located on CHAMP website
	  ○ Under Resources; scroll to tools; search for "zone"

	• **Disease Management Patient Self-Care Workbooks** • **Patient tool**s • Use workbook for patient education and reinforcement with information on disease, medications, diet, and self-management activities ○ Includes Heart Failure, Diabetes, and COPD

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