



Petersburg Medical Center

Home Health Report October 2023

Workforce Wellness

The Home Team continues to be fully staffed. The clinical staff meets each morning to review caseloads, patient acuity and any immediate department needs. We also are continuing the Monday-Friday all staff meetings. This continues to improve continuity of patient care and creates cohesiveness among staff. Twice a month the therapy department joins us for case review and coordination. (IDT meetings.) These are documented in the patient electronic medical record and also have improved continuity of care. Once a month we have an all-staff meeting. Wellness and health are a priority here in Home Health. Several members continue to utilize the community center gym. Staff are encouraged to take their “wellness walks,” and there is a strong focus on work/life balance. In addition to the snacks provided by the wellness team, staff members often bring in healthy light meals or treats to share with the team. We celebrate monthly birthdays as a team. Staff are encouraged to use breaktime as an opportunity to get outside.

Community Engagement

The priority of this department continues to be reaching as many community members as possible. Whether through traditional home health services, program extensions or working directly with other community agencies. Even with our patient navigator moving to a hybrid work schedule, (she will be in town on 10/30/23) she is busier than ever. We set up a workstation in the HH department and consumers can come in and work with her face-to-face via Zoom. There has been no decline or break in services during this transition. Ongoing projects include partnering with Mountain View Manor, waiver and care coordinating services, and assistance with the quality programs throughout the hospital. We have a nurse part-time in the schools as well. Also, we continue to work with the clinic on utilizing the Healthsnap remote home monitoring system. We continue to move forward slowly with the adult day program. We experienced multiple, unforeseen hurdles as we began the rollout, which slowed our progress. We have been very fortunate to partner with Petersburg Indian Association. They are renovating the building and will be creating a space specific to the adult day program. We will rent the space, and the renovations are at no cost to PMC. The Home Health team submitted a grant for senior and disability in-home services. We were awarded \$51,000. This is about 10% of the total award, and we received it without having any of these services in place. This will allow us to reach more members of the community who do not meet the criteria for HH or waiver services. We partnered with Beat the Odds and were granted money for a “voucher program” to provide housekeeping services for those who have been impacted by a cancer diagnosis. We have just about exhausted this fund. Members of the home health team continue to participate in the Share Coalition meetings. Two Home Health staff members are also members of the local EMS squad. Recently, I was invited to participate in SREC, the Southeast Regional Eldercare Coalition. This has proven to be an exceptional opportunity. The goal of the coalition is to share resources and expand opportunities for the aging population of Southeast Alaska. The caregiver café has been on hold due to summer schedules and staff location changes. We will be restarting this group in the near future. This is a support and educationally focused program for those who are the primary caregiver for someone with a chronic or progressive or dementia related illness.

We had a decent turn out to our Adult Day community forums. All but one of the surveys returned were very favorable. We appreciate the community’s input and are always open to suggestions and feedback.

Patient Centered Care

The clinical staff here in Home Health continue to go above and beyond providing support and care to the patients we serve. Though we do not yet offer traditional Hospice, we continue to provide care and support to those patients under our care who are at end-of-life. The kindness and respect along with strong clinical skills

offered to these patients and their families is exceptional. These are not easy cases and often require the staff to work outside regular hours. Often the primary nurse volunteers to cover the patient until their death for continuity of care. More often, it's simply because they want to. We also recently connected with Pastor Deborah Gelerter from the Lutheran church. She provided supportive training for the HH staff. Pastor Deb has extensive experience as a Hospice chaplain. We recently utilized her talents to assist with a very difficult end-of-life case.

Facility

The home health department is fortunate to have a space that is large enough to accommodate all staff and equipment. Our conference is occasionally used by other departments as well. We are also talking with PIA about a temporary space until the renovations are done. Though we love where we are it may prove to be more cost effective and make for a smoother transition if we were to move sooner. Of note, the HH department will not have designated office space in the new hospital, instead, we plan to move our offices to the PIA building to be in closer proximity to the adult day program.

Financial Wellness

Home Health continues to have financial challenges, although the past months have shown improvement. These financial hurdles are industry wide. In fact, the HH agencies in the state of Alaska have closed in the past year. This is a result of several factors including decreased referrals, decreased reimbursement and increased acuity patient care and in-home needs. To counter this, we again obtained an MOA with the school system to provide a nurse to manage school nursing needs 20 hours each week. PMC receives a stipend for this project. Adding the adult day program will not result in a need for significant staffing increases. Instead, we will utilize the current staffing and add positions as the program grows. Our half-time school nurse will also oversee the adult day program. We will utilize our current HHA to assist in the program. All staff in home health understand that they may be asked to cover in the adult day program as needed. The HH team has had an integral part in admissions to LTC. In addition, our quality nurse is providing support to LTC and assisting in managing the quality needs within the PMC community. The patient navigator works across departments and into the community to provide support and resources. Ongoing projects include: partnering with Mountain View Manor, Waiver and care coordinating services, including the adult day program and the opportunity to provide respite care. We also have 2-3 staff participating in the Falls prevention grant programs. We are fortunate enough to have received grant funding from SDS, allowing us to expand our support to seniors in our community and possibly surrounding communities as well.

Submitted by: Kirsten Testoni, RN, WCC, Home Health Manager
