**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November 30, 2019***

**Agency Name: Mary Greeley Home Health**

**Program Name: HOMEMAKER**
Brief Description of Program:

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to November 30, 2019.**

The Homemaker service provides personal care, assistance with activities of daily living, meal prep, grocery shopping and light housekeeping. During the Homemaker visit the client's safety is assessed and recommendations for a safer environment are encouraged. A nurse visit is provided for each personal care homemaker client at least every other month and at this visit they review the client's medications and provide a comprehensive physical assessment. She also supervises the homemaker. The Homemaker service assists the client to maintain an independent lifestyle in their own home. Personal care and exercises provided by the homemaker increase a client's strength and help the client return to a more normal life after an illness or hospitalization.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to November 30, 2019.**

Surveys are sent to all Homemaker clients annually. In addition the Iowa Department of Public Health conducts yearly record reviews and on-site compliance audits every other year. We completed this compliance audit this past year with no findings. We are also periodically reviewed by the Iowa Department of Inspection and Appeals.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to November 30, 2019):**
The client survey is currently being prepare to be sent to all homemaker clients in December.
2. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to November 30, 2019.**:
No changes from last survey. Will be sending out the annual survey out in December.
3. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to November 30, 2019):**
Homemaker Staffing has been a challenge this six months. We had two Full time Employee retire at the same time in addition to an already open full time open position. These entry level positions can be difficult fill in a market with a low unemployment rate.
4. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to November 30, 2019.):**
For the period July 1, 2019 through November 30, 2019 , Mary Greeley Home Health Services provide Homemaker service to 137 clients of which 134 lived in Story County.
5. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**Seven Homemaker referrals were placed on a waiting list for about 6 weeks while completing the interviewing, hiring and orientation process of new staff. These have since be seen.
6. **Comments:**

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

**Reporting for: July 1 – November 30 , 2019**

**Agency Name: Mary Greeley Medical Center Home Health Services**

**Program Name: Community Clinics and Health Education**
Brief Description of Program:

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to November 30, 2019.:** Senior Health clinics continue to address the foot care needs of our aging population, and provide education on prevention of strokes and hyper/hypo blood pressure. Blood pressure screenings/records along with education are offered at our clinics to help clients avoid complications and even hospitalizations. Flu and pneumonia vaccines were offered at the fall Senior Health clinics to all clients and the general public. These clinics help us reach those that are homebound and/ or in rural areas. Foot care provided at our clinics assist in maintaining the ambulatory status of the clients and detects any open wounds, poor circulation, edema and or infection. Immunizations Clinics provide clients with protection from serious communicable diseases that are vaccine preventable. They also assist parents in obtaining immunizations for their children that are required by Iowa law to attend school, preschool and/or daycare. Presentations/education have been provided to the community on Flu and pneumonia related illnesses. Presentations were done on the role of Public Health in Story County to Iowa State Community Public Health students in Kinesiology classes & DMACC Advanced Nursing CNA students. In addition presentations on the Importance of influenza vaccines & safety in winter weather was presented to Low Income Senior Housing residents.
2. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to November 30, 2019. MEASUREMENT 1:** Senior Health clinic survey results are collected once a year In the Spring. Opinions and/or complaints are taken any time via MGMC grievance policy. **MEASUREMENT 2:** Immunizations audits are being performed now in all public schools and daycares/preschools by Story County Public Health nurses. **MEASUREMENT 3**: At the end of each presentation questions were asked “has anyone learned anything new today?” The results/comments of attendees are reported.
3. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to November 30, 2019.):** **OUTCOME 1:** There hasn’t been any complaints or grievances noted. MGMC Grievance policy was reviewed, updated and listed online this past summer. **OUTCOME 2:** Story County has a vaccination rate of greater than 98%. **OUTCOME 3:** There was 100 percent positive outcome recorded stating that all attendees learned something new.
4. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to November 30, 2019.**: **OUTCOME 1:** Senior Health Clinic survey results are as follows: Clinics have improved the condition of my feet 89.67 (+1.97) from last year, skill of nurses who provide foot care 95.56 (-4.03) down from last survey, nurses have instructed me (client) on importance of maintaining proper foot care 91.28 (+2.68) up from last survey & likelihood of recommending clinics 96.67 (-1.91) up from last survey. **OUTCOME 2:** Story County has an immunization rate of above 98 percent. **OUTCOME 3:** There was 100 percent positive outcome recorded that all attendees at presentations learned something new.
5. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to November 30, 2019.):** Barriers encountered include weather and disease outbreak. Our policy is if school is delayed or canceled, our Senior Health clinics are also cancelled. This is for the safety of our clients and employees. We did have to cancel two Senior Health clinics due to Norovirus outbreaks. This was requested by the facilities to prevent the spread of Norovirus to the clients and Public Health employees.
6. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to November 30, 2019.):**
MGMC Home Health Services served 1,924 clients at our Community Clinics and Health Education events July through November 2019. This number is not an unduplicated number of clinic participants as we have no inexpensive efficient way to gather unduplicated clients at our various clinic sites and events. The additional clerical staff needed to gather this information would increase our costs with little or no added benefit to the client.
7. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?** Everyone who is 60 years of age and older qualifies for our Senior Clinics regardless of financial and or economic status. There are no financial barriers. Clients under 60 are still offered service if they pay full fee or qualify for Exception Request Form.
8. **Comments:**

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November -2019***

**Agency Name: Mary Greeley Medical Center Home Hospice Services**

**Program Name: Home Based Hospice**
Brief Description of Program:

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to November 30, 2019.:**

Home Hospice care is a multi-disciplinary service for persons at the end-of-life. Our focus is on maintaining comfort and relief from any distressing symptoms that our patients may have. Our availability to home hospice patients and their family/caregivers improves the ability to remain at home for end-of-life care. Our services bring a sense of calm and normalcy to families who are dealing with the impending death of a loved one. Maintaining comfort, dignity and quality of living are hallmarks of our service. Our end-of-life services must be consistent with the patient and family needs and goals. We also provide bereavement support to our surviving family members. We provide individualized grief counseling, grief support groups and educational materials on grief and loss.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to November 30, 2019.:**

As a Medicare certified hospice, we measure many patient and quality outcomes. We use medical record review for some data captured and also participate in national benchmarking data bases, including family satisfaction of hospice care through Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS). We receive ongoing data from the National Research Corporation (NRC) on a monthly basis along with family comments. We monitor most quality measures quarterly, although some are monitored on an ongoing basis with every new admission. Through ABILITY we receive data quarterly which is demonstrated on a Clinical Dashboard that measures our Hospice Item Set (HIS), which includes admissions, discharges, symptom management and our outcomes. For the last several quarters, Hospice Compare, a Medicare sponsored web site, assists consumers to find hospices that serve their area and compare them based on the quality of care they provide.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to November 30, 2019.):**

The ABILITY report for Q3.2019 shows we are at 100% for patient’s screened for pain and if they had pain they received a comprehensive pain assessment.  We are also at 100% for shortness of breath screening and treatment, treating patients on opioids with a bowel regimen to avoid constipation, assessing their spiritual preferences, and assessing their preferences for life sustaining treatments. On the Hospice Compare report all outcomes exceed the National Average for our quality measures, and except for one area that is just below by 1 point, we also meet or exceed the National Average for our Family Experience of Care outcomes.

1. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to November 30, 2019:**

CAHPS Rolling averages up to 6/29/19-Our Hospice rating was 90% with the NRC at 90.1%; would recommend was 90% with the NRC at 90.7%. ABILITY/HIS: Pain screening/timing, pain assessment, screening for dyspnea, bowel regimen, and life sustaining treatment preferences are all 100% or above the national average. Hospice Compare: All of our scores were at or above the national average.

1. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to November 30, 2019.):**

The Medicaid Managed Care Organizations (MCOs) have difficulty paying timely. We currently have 2 MCO’s that serve our patients. We continue to have a patient average length of stay that is below the national and state average. In a months’ time, we have as many deaths as we have admissions. Competition is always a factor in the counties that we serve, with more “for profit” Hospice programs moving into the service area.

1. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to November 30, 2019:**

Mary Greeley Home Health Services provided Hospice Homecare to 151 clients July 1 through November 30, 2019. 111 of the 151 clients lived in Story County.

1. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**

A client is only turned away from our program if we do not have the staff available to provide the quality of care that they deserve. In the past six months approximately two clients were not served and given names of other hospice agencies to contact.

1. **Comments:** The support we receive from ASSET assists our patients to be able to die comfortably in a setting of their own choice, mainly their own homes. Comfort cares, such as pain and symptom management are provided to the patient along with education to the primary caregivers/family members. Our hospice care reduces the need for hospitalization associated with end of life care. Our bereavement support helps not only the families of our hospice patients who have died, but also individuals in our communities who need grief support and/or counseling.

**MID-YEAR REPORT FOR OUTCOME PROGRESS**

***Reporting for: July 1 – November -2019***

**Agency Name: Mary Greeley Medical Center Home Health Services**

**Program Name: Skilled Nursing**
Brief Description of Program:

1. **Program/ Service Outcome (Change/ Benefit to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on program/ service outcome from July 1 to November 30, 2019:**

Skilled nursing provides a wide variety of services such as medication management, dressing changes, intravenous therapy, enteral feedings, monitoring vital signs and general health status, cardiac assessment, etc. These interventions allow the client to be discharged from an acute facility to their own home rather than transitioning to a higher level of care. Clients can remain safely in their own homes and still have their health care needs met. Hospital length of stay and readmission rates can be reduced and the burden on the patients’ caregivers can also be lessened. All of this can enhance the patients’ quality of life. The assessment skills of the RN often allow the nurse to notice a change in the client’s health that if left untreated could lead to very serious medical issues. The nurses teach clients and families how to care for themselves or their family member and recommend changes that can lead to a healthier life style.

1. **Measurement Used (How Often, Tools Used) – please refer back to the corresponding ABF 5(O) and provide an update on measurement used from July 1 to November 30, 2019:**

We are Medicare certified which requires strict compliance to exacting standards. We have frequent internal audits for patient outcomes and to adhere to the guidelines set forth by the regulating agencies. Clinical data and outcomes are benchmarked with other Home Care agencies statewide and nationally. To help with this a tool called Strategic Health Care Programs (SHP) is utilized. We currently subscribe to survey vendor National Research Corporation (NRC) to measure satisfaction of our Skilled Nursing care.

1. **Measurement Update (Please provide update on measurement data collected based on the ABF 5(O) from July 1 to November 30, 2019):**
Mary Greeley Home Health Services measures a number of patient customer satisfaction measures to ensure that we are providing the care that is expected of us by our patients. One of the tools used is NRC or National Research Corporation. Mary Greeley Home Health Services strives to be in the NRC 75th Percentile. The following data reflects our overall customer satisfaction score:

Percentile ranking of Overall experience asking we want to know your rating of your care from this agency’s home health providers. Using any number from 0 to 10, where 0 is the worst home health care possible and 10 is the best home health care possible, what number would you use to rate your care from this agency’s home health providers: Publication date of 12/10/2019, Fiscal Year-To-Date, Mary Greeley Home Health Services is 82.0% (32 choose 10, 9 choose 9, 6 choose 8, 1 choose 6, 1 choose 5, and 1 choose 4.) NRC 75th Percentile is 90.1%. Leadership is currently developing a process to increase our score.

1. **Outcomes Achieved (Result to Clients/ Community) – please refer back to the corresponding ABF 5(O) and provide an update on the outcomes achieved from July 1 to November 30, 2019**:

Mary Greeley Home Health Services measures a number of patient outcomes and quality measures to ensure that we are providing the best care possible. One of the tools used is SHP (Strategic Health Care Programs). The following data reflects some of those quality measures when compared to the industry database:
* Percent of patients who demonstrate drug education of all medication in a short term episode of care: Publication date expected January 2020, SHP Iowa database average 99.2%, CMS Iowa database average is 98.2% and Mary Greeley Home Health Services 94.3%.
* Percent of patients who required acute care hospitalization within 60 days (lower percentage is better). This refers to the percentage of active skilled homecare clients that require a 60 day re-hospitalization in the course of their homecare episode. Publication date expected January 2020 SHP Iowa database average is 14.6%, CMS Iowa database average is 15.8% and Mary Greeley Home Health Services average is 13.7%.
1. **Barriers Encountered (please refer back to the corresponding ABF 5(O) and provide an update on the barriers encountered from July 1 to November 30, 2019):**
The Medicaid Managed Care Organization’s (MCO) continue to be a challenge. This past year a new MCO joined the system, as well as one left. This brings about new changes in authorization and covered services. We continue to look at processes to make sure that our services remain with the clients and reimbursement continues to our home health agency. As a provider of care we strive to provide seamless uninterrupted care to our clients in their homes and believe we have been successful through continued education to staff and clients.

The Centers for Medicare & Medicaid Services (CMS) implemented a pilot program in January 2016 for nine states of which Iowa is one of them entitled Home Health Value-Based Purchasing (HHVBP). The model is to incentivize Medicare Home Health Agencies to provide higher quality and more efficient care through a payment adjustment system. HHVBP is based on 6 process measures and 10 outcome measures, both of which data is derived from OASIS assessment, 5 HHCAHPS survey questions, so data derived from the clients, and 3 agency reported measures which in influenza, herpes zoster and advanced care planning. Much planning and education continues by the Quality Assurance and Performance Improvement Team related to these measures and outcomes. The education for staff continues with a focus on OASIS documentation and customer satisfaction, as well as constant review of all available data. After almost 4 years into the HHVBP pilot program we are currently above the Iowa state average, so in line for an additional 1.296% payment from CMS for FY 2020.

1. **Clients Served (please refer back to the corresponding ABF 5 Service Statistics and provide an update on number of clients served from July 1 to November 30, 2019):**
Mary Greeley Home Health Services provided Skilled Nursing Service to 213 clients July 1 through November 30, 2019. Of these 213 clients, 152 lived in Story County.
2. **Have you had to turn any clients away that desire to participate in this program? If so, why? If so, how many? If so, when?**

We provide care to most everyone that requests our service and qualifies for Skilled Nursing visits. As our program census grows, a client is only turned away from our program if we do not have the staff available to provide the quality of care that they deserve. In the past six months approximately seven clients were not served and given names of other home care agencies to contact.

 **8. Comments:**