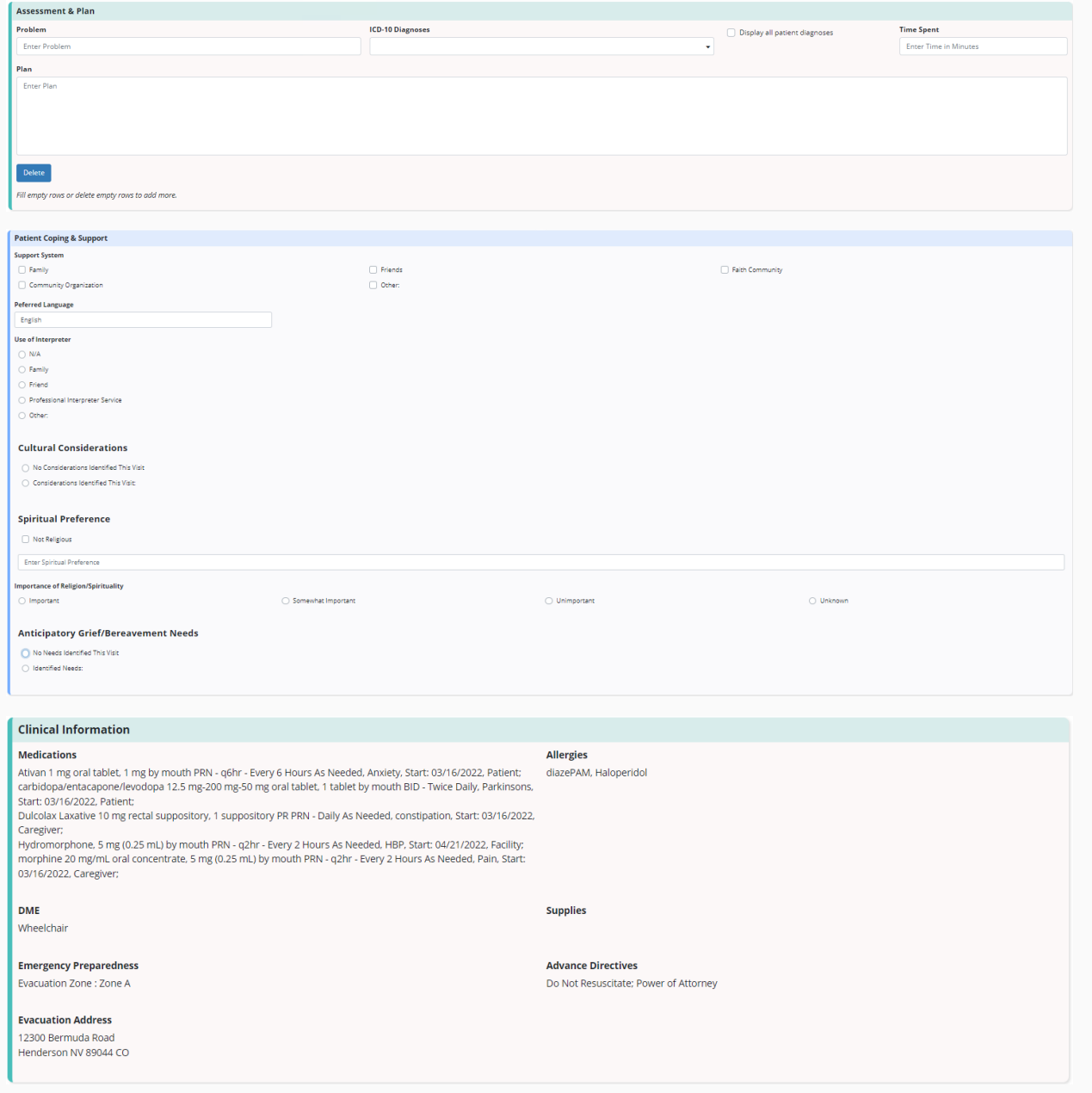


TOP SEVEN PALLIATIVE CARE DEFICIENCIES FOR 2021

and How Axxess Palliative Care Helps

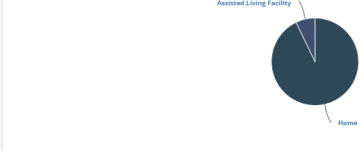

PCAC.13

Standard Content	Tips for Compliance	Axxess Solution
<p>Treatment plan includes all required elements:</p> <ul style="list-style-type: none"> The scope and frequency of services and treatment to meet the patient's and the family's needs and goals. The patient and family's ability and willingness and participation in care. Education and training facilitate patients and families understanding of their roles and responsibilities in care. Pharmacological and non-pharmacological treatment procedures and complimentary therapy to manage pain and other symptoms. Needed medical equipment, supplies, and appliances, and sources to access such Measurable outcomes anticipated by implementing and coordinating the care plan. 	<ul style="list-style-type: none"> Ensure the team has clear policies and procedures defining roles and responsibilities for documentation. Conduct interdisciplinary group meetings at agency defined intervals to ensure the team is covering interdisciplinary patient needs and to monitor progress towards goals. Complete routine audits to ensure all areas of required treatment plan items are included in documentation. 	<p>There are multiple avenues to capture and collaborate on this data:</p> <ul style="list-style-type: none"> Within documentation Care Coordination Notes Comprehensive Plan of Care Patient Chart IDG Summary <div>  </div> <p>Best Practice: Ensure all documentation is comprehensive to include all treatment plan areas required by CHAP.</p>

PCAC.8		
Standard Content	Tips for Compliance	Axxess Solution
Psychosocial assessment is included as part of the Interdisciplinary Team Assessment.	<ul style="list-style-type: none">Ensure team education on IDG approach to care.	<div><div><div>Environmental Safety Concerns</div><div><div><input type="checkbox"/> No Problems Identified</div><div><input type="checkbox"/> Alone During the Day</div><div><input type="checkbox"/> Cluttered/Soiled Living Conditions</div><div><input type="checkbox"/> Difficulty Buying Necessities</div><div><input type="checkbox"/> High Crime Area</div><div><input type="checkbox"/> Inadequate Cooling/Heating</div><div><input type="checkbox"/> Inadequate Refrigeration</div><div><input type="checkbox"/> Lack of Fire Safety Devices</div><div><input type="checkbox"/> Limited Social Contact</div><div><input type="checkbox"/> Low/No Income</div><div><input type="checkbox"/> Narrow or Obstructed Walkway</div><div><input type="checkbox"/> No Running Water/Plumbing</div><div><input type="checkbox"/> Pest/Rodents Present</div><div><input type="checkbox"/> Structural Barriers</div><div><input type="checkbox"/> Unsafe Floor Coverings</div><div><input type="checkbox"/> Inadequate Access to Nutrition/Food</div><div><input type="checkbox"/> Other:</div></div><div><div>Incident Report</div><div>Emergency Preparedness</div></div></div><div><div>Social/Emotional Assessment</div><div><div><div><input type="checkbox"/> No Problems Identified<input type="checkbox"/> Accepting<input type="checkbox"/> Anxious<input type="checkbox"/> Despair<input type="checkbox"/> Depressed<input type="checkbox"/> Flat Affect<input type="checkbox"/> Sad<input type="checkbox"/> Decreased Physical Intimacy<input type="checkbox"/> Alcohol Use:<input type="checkbox"/> Drug Use:<input type="checkbox"/> Other:</div><div><input type="checkbox"/> Angry<input type="checkbox"/> Denial<input type="checkbox"/> Discouraged<input type="checkbox"/> Fearful<input type="checkbox"/> Guilty<input type="checkbox"/> Social Isolation<input type="checkbox"/> Suicidal</div></div><div><div>Comments</div><div>Enter Comments</div></div><div><div>Suicide Assessment</div></div></div></div></div> <div>Psychosocial assessment in initial and comprehensive, and ongoing visit tasks.</div> <div>Best Practice: Capture psychosocial needs upon initial and comprehensive and engage social work or navigators as needed to support patient goals and outcomes.</div>

PCAC.9		
Standard Content	Tips for Compliance	Axxess Solution
Spiritual assessment is included as part of the interdisciplinary team assessment.	<ul style="list-style-type: none">Ensure team education on IDG approach to care.	<div><div><div>Spiritual Preference</div><div><div><input type="checkbox"/> Not Religious</div><div>Enter Spiritual Preference</div></div><div><div>Importance of Religion/Spirituality</div><div><div><input type="radio"/> Important<input type="radio"/> Somewhat Important<input type="radio"/> Unimportant<input type="radio"/> Unknown</div></div></div></div></div> <div>Spiritual assessment in initial and comprehensive.</div> <div>Best Practice: Capture spiritual needs upon initial and comprehensive and engage community spiritual support or chaplain care as needed to support patient goals and outcomes.</div>

PCMG.9														
Standard Content	Tips for Compliance	Axxess Solution												
Job descriptions include all required elements.	<ul style="list-style-type: none">Review CHAP standards to ensure your job descriptions contain all required elements.	<div><div><div>Documents</div><div><div>Active: Inactive</div><div>Search by document name or document type</div><div>Add Documents</div></div><div><table><tr><th>Document Name</th><th>Document Type</th><th>Effective Date</th><th>Expiration Date</th><th>Upload Date</th><th>Actions</th></tr><tr><td>4f89aac6-2832-44f7-9265-3301ee38bc9e.pdf</td><td>Job Description</td><td>04/25/2022</td><td>04/25/2023</td><td>04/25/2022</td><td><div><div></div><div></div><div></div></div></td></tr></table><div>1 total results</div><div>Show 10 entries</div></div></div></div> <div>People Center > Documents</div> <div><ul style="list-style-type: none">Allows for operators to keep all HR documents in one place.</div> <div>Best Practice: Personnel records can have a signed job description uploaded into the Employee documents. Personnel notes can be used to review a job description, then can be sent to the employee. Employee comments can be captured on the Personnel note.</div>	Document Name	Document Type	Effective Date	Expiration Date	Upload Date	Actions	4f89aac6-2832-44f7-9265-3301ee38bc9e.pdf	Job Description	04/25/2022	04/25/2023	04/25/2022	<div><div></div><div></div><div></div></div>
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4f89aac6-2832-44f7-9265-3301ee38bc9e.pdf	Job Description	04/25/2022	04/25/2023	04/25/2022	<div><div></div><div></div><div></div></div>									

PCPI.1														
Standard Content	Tips for Compliance	Axxess Solution												
Quality Assessment and Performance Improvement (QAPI) Program.	<ul style="list-style-type: none">Ensure that your QAPI program includes palliative care activities.	<p>There are multiple avenues to support QAPI activities in palliative care.</p> <ul style="list-style-type: none">ReportsPatient DashboardSchedule DashboardAdmin DashboardBI solution <div><div>Census by Status<div>View Report</div><table><thead><tr><th></th><th></th><th>Overnight Changes</th></tr></thead><tbody><tr><td>Active</td><td>14</td><td>1 ↑</td></tr><tr><td>Discharged</td><td>4</td><td>0 ↓</td></tr><tr><td>Pending</td><td>2</td><td>2 ↓</td></tr></tbody></table></div><div>Patients by Service Location<div>View Report</div></div><div>Advance Directives<div>View Report</div></div></div> <p>Best Practice: Identify several improvement activities that affect palliative patient outcomes and utilize these within the QAPI program structure.</p>			Overnight Changes	Active	14	1 ↑	Discharged	4	0 ↓	Pending	2	2 ↓
		Overnight Changes												
Active	14	1 ↑												
Discharged	4	0 ↓												
Pending	2	2 ↓												

PCPI.2																				
Standard Content	Tips for Compliance	Axxess Solution																		
PI activities address palliative care outcomes and improvements in processes.	<ul style="list-style-type: none">Ensure that your QAPI program includes palliative care activities.	<p>There are multiple areas of documentation that support outcome and improvements for processes.</p> <ul style="list-style-type: none">System supports some MIPS quality measuresSeveral evidence-based tools including ESAS, FAST, PPS, KPS, NYHA and othersIncident/Accident ReportsInfection TrendingHospitalization Reports <div><div><div>Fall Risk Assessment</div><div><div>Fall Assessment</div><div><div><input type="checkbox"/> Age 65+</div><div><input type="checkbox"/> Diagnosis (1 or more co-existing) - Includes only documented medical diagnosis</div><div><input type="checkbox"/> Prior history of falls within 3 months - An unintentional change in position resulting in coming to rest on the ground or at a lower level.</div><div><input type="checkbox"/> Incontinence - Inability to make it to the bathroom or commode in timely manner. Includes frequency, urgency and/or nocturia.</div><div><input type="checkbox"/> Visual Impairment - Includes but not limited to, macular degeneration, diabetic retinopathies, visual field loss, age related changes, decline in visual acuity, accommodation, glare tolerance, depth perception, and night vision or not wearing prescribed glasses or having the correct prescription.</div><div><input type="checkbox"/> Impaired functional mobility - May include patients who need help with IADL's or ADL's or have gait or transfer problems, arthritis, pain, fear of falling, foot problems, impaired sensation, impaired coordination or improper use of assistive devices.</div><div><input type="checkbox"/> Environmental hazards - May include but not limited to, poor illumination, equipment tubing, inappropriate footwear, pets, hard to reach items, floor surfaces that are uneven or cluttered, or outdoor entry and exits.</div><div><input type="checkbox"/> Poly Pharmacy (4 or more prescriptions - any type) - All PRESCRIPTIONS including prescriptions for OTC meds. Drugs highly associated with fall risk include but are not limited to, sedatives, anti-depressants, tranquilizers, narcotics, antihypertensives, cardiac meds, corticosteroids, anti-anxiety drugs, anticholinergic drugs, and hypoglycemic drugs.</div><div><input type="checkbox"/> Pain affecting level of function - Pain often affects an individual's desire or ability to move or pain can be a factor in depression or compliance with safety recommendations.</div><div><input type="checkbox"/> Cognitive impairment - Could include patients with dementia, Alzheimer's or stroke patients or patients who are confused, use poor judgment, have decreased comprehension, impulsivity, memory deficits. Consider patient's ability to adhere to the plan of care.</div></div><div><div>Select above options to calculate Score</div><div><div>Risk for falling: 4 - 10</div><div>No Risk: 0 - 3</div></div></div></div></div><div><div>Additional Measurements</div><div><div>Mid-Arm Circumference (cm)</div><div>cm</div><div>Arm</div><div>Select Arm</div><div>Weight</div><div>lbs/kg</div><div>Scale</div><div>lbs/kg</div><div>Height</div><div>in/cm</div><div>Scale</div><div>in/cm</div><div>BMI</div><div>Enter BMI</div></div><div><div>Abdominal Girth (cm)</div><div>cm</div><div>FAST</div><div>Select Score</div><div>NYHA</div><div>Enter Class</div><div>PPS Score</div><div>Select Score</div><div>KPS Score</div><div>Select Score</div></div></div><div><div>Infection Log</div><div><div>Type to Search Patient...</div><div>Q</div><div>Branch: All</div><div>Team: All</div><div>Type of Infection: All</div><div>05/01/2022 - 05/03/2022</div><div>Status: All</div><div>Export</div><div>Add Infection Report</div></div><table><tr><th>Patient</th><th>Branch</th><th>Team</th><th>Type of Infection</th><th>Infection Date</th><th>Created By</th><th>Created Date</th><th>Status</th><th>Actions</th></tr><tr><td>Doodle, Magna</td><td>Houston</td><td>Palliative Team</td><td>Respiratory</td><td>05/02/2022</td><td>Lori Welsh</td><td>05/02/2022</td><td>Submitted With Signature</td><td></td></tr></table></div><div><div>Clinical Reports</div><div>Hospitalized Patients Report</div><div>Learn More</div></div></div> <p>Best Practice: Identify several improvement activities that affect palliative patient outcomes and utilize these within the QAPI program structure.</p>	Patient	Branch	Team	Type of Infection	Infection Date	Created By	Created Date	Status	Actions	Doodle, Magna	Houston	Palliative Team	Respiratory	05/02/2022	Lori Welsh	05/02/2022	Submitted With Signature	
Patient	Branch	Team	Type of Infection	Infection Date	Created By	Created Date	Status	Actions												
Doodle, Magna	Houston	Palliative Team	Respiratory	05/02/2022	Lori Welsh	05/02/2022	Submitted With Signature													

PCTT.18		
Standard Content	Tips for Compliance	Axxess Solution
Continuity of care during transfer and discharges.	<ul style="list-style-type: none">Ensure policy and procedures are in place and clear for transfer and discharge criteria and expectations.	<div><div><div><div><div>Discharge Reason</div><div>Select Reason for Discharge +</div><div><div><div><input type="checkbox"/> Discharged for cause</div><div><input type="checkbox"/> Discharged to non-company hospital</div><div><input type="checkbox"/> Homebound</div><div><input type="checkbox"/> Moved out of service area</div><div><input type="checkbox"/> Moved to non-credentialed facility</div><div><input type="checkbox"/> No longer accepting of services</div><div><input type="checkbox"/> No longer eligible</div><div><input type="checkbox"/> No longer need services & identified goals met</div><div><input type="checkbox"/> Patient expired</div><div><input type="checkbox"/> Patient transfer/transfer of records</div><div><input type="checkbox"/> Transfer</div></div></div><div><div>Date of Last Visit +</div><div><input type="text" value="11/20/2019"/></div></div><div><div>Date of Discharge +</div><div><input type="text" value="11/20/2019"/></div></div></div></div><div><div><div>Coordination of Care</div><div>Discharge Notifications</div><div><div><input type="checkbox"/> Physician in Agreement with Plan to Discharge for Stated Reason</div><div><input type="checkbox"/> Patient/Consigner in Agreement with Plan to Discharge for Stated Reason</div><div><input type="checkbox"/> Patient/Consigner Representative in Agreement with Plan to Discharge for Stated Reason</div><div><input type="checkbox"/> Patient/Consigner Legal Representative Not in Agreement with Plan to Discharge for Stated Reason</div><div><input type="checkbox"/> Notified Patient/Consigner Representative</div><div><input type="checkbox"/> Notified Notified</div><div><input type="checkbox"/> Notified Pharmacy/Pharmacy Benefits Manager</div><div><input type="checkbox"/> Notified DME Company</div><div><input type="checkbox"/> Notified Insurance Case Manager</div><div><input type="checkbox"/> Notified Family Unit</div><div><input type="checkbox"/> Notified Other</div></div><div>Copy of Discharge Summary Sent to</div><div><div><input type="checkbox"/> Receiving Breathing Facility</div><div><input type="checkbox"/> Receiving Physician</div><div><input type="checkbox"/> Receiving Physician</div><div><input type="checkbox"/> Other</div></div></div><div>Comments</div></div><div><div>Discharge Interventions</div><div>Discharge Interventions Since 10</div><div><div><input type="checkbox"/> Patient</div><div><input type="checkbox"/> Consigner</div><div><input type="checkbox"/> Legal Representative</div><div><input type="checkbox"/> Family Member</div><div><input type="checkbox"/> Other</div></div><div>Discharge Readiness +</div><div><div><input type="checkbox"/> Patient/Consigner is Adequately Informed</div><div><input type="checkbox"/> Patient/Consigner Can Identify and Manage Symptoms</div><div><input type="checkbox"/> Patient/Consigner Can Initiate when to Follow up with Post Discharge</div><div><input type="checkbox"/> Patient/Consigner Can Initiate Emergency Preparedness Response</div><div><input type="checkbox"/> Discharge Order Received</div><div><input type="checkbox"/> Accepting Provider Agreed to Assume Primary Care of Patient</div><div><input type="checkbox"/> Medication Refills Provided in an Adequate Supply Until Patient Can Follow Up With Attending Physician</div><div><input type="checkbox"/> DME Order for Patient</div><div><input type="checkbox"/> Medication List Provided to Patient/Consigner</div><div><input type="checkbox"/> Patient/Consigner Representative Received Medication Notice of Non-Coverage</div><div><input type="checkbox"/> Patient/Consigner Legal Representative Received Medication Advance Beneficiary Notice</div><div><input type="checkbox"/> Other</div></div></div></div></div> <div>Care Coordination and Discharge notes support collaborative documentation that highlights continuity of care outlining:<ul style="list-style-type: none">Discharge reasonDischarge notificationDischarge interventionsDischarge ReadinessBest Practice: Utilize discharge notes to document continuity of care in live discharge and transfer situations.</div>