

Difficult Transitions From Hospital Back To Home

by Diane Walker, RN, MS

Calls by experts for an overhaul of the healthcare system may actually get some serious attention by the new Administration. Nowhere is the breakdown more evident than the transitions people make from acute care hospitals to rehabilitation or home. And it isn't just the "patient" that has to make this hazardous trip—family caregivers who will be assigned responsibility for the person's care must somehow *intuit* what they need to know and get prepared without the guidance they require.

Once the role of nurses, preparing the family for their new care responsibilities is often moved down the list of priorities because of staffing shortages or reassigned to a "team" that includes social workers, discharge planners, and physicians who function independently. Many times the expectations of the healthcare providers cannot be fulfilled by family members alone because of employment and childcare responsibilities.

The major initiative identified by the new Administration—computerized healthcare records—will not adequately address this chasm. For family members who can access the internet, a new website may provide some needed assistance. Launched by the United Hospital Fund, "The Next Step In Care" website (<http://www.nextstepincare.org/>) provides family members (and providers) with FREE tools and information to make the transition back home easier. In particular, family members will find the following guides helpful:

- ◆ The Next Step in Care: What Do I Need as a Family Caregiver?
- ◆ Hospital-to-home Discharge Guide
- ◆ Going Home: What You Need to Know
- ◆ A Guide to the ER
- ◆ When the Next Step in Home Care: A Family Caregiver's Guide
- ◆ When the Next Step is Rehab: A Family Caregiver's Guide¹

What the guides lack is information about how to best select a non-medical home care agency when a loved one's needs are no longer skilled and/or medical insurance will not pay for the necessary assistance with activities of daily living (ADLs). Many individuals do not realize that Medicare, Medicaid², and private health insurance will not pay for services involving bathing, dressing, meal preparation, companionship, and transportation. Here are some important points³ to consider in selecting a home care agency if a family member needs assistance with these tasks:

- ◆ Does the agency have a consumer-driven approach—are the dates and times of service at *your* convenience, can you request that a caregiver be removed, do they have a large pool of workers, and is the agency responsive to after-hour requests?
- ◆ Are the fees affordable—make comparisons between agencies, find out what percentage of the fee goes to the professional Caregiver vs. the "office fee," and watch for hidden fees (upfront deposits, evening and weekend differentials, guaranteed minimums of care)
- ◆ Are fees discounted for 24 hour and overnight care?
- ◆ What is the agencies screening process—do they conduct in-person interviews, how many/what kind of references (vs. dates of hire) do they require, do they do federal and/or state Criminal Background Checks, do they refer individuals with a record, and do they require health clearances?
- ◆ Does the agency make regular visits to the home—do they come to your home to ensure the services are appropriate?
- ◆ Does the agency regularly ensure that you are satisfied with the services they are providing—what if you aren't satisfied?
- ◆ Does the agency have a known reputation in the community—do you know anyone who used their services, check with the Area Office on Aging, do they offer references?

¹ United Hospital Fund. (2009) Retrieved January 21, 2009 from <http://www.nextstepincare.org/>

² Some states have consumer-directed home and community based services programs that will pay for ADLs.

³ Middleton, F. (2005) "The Important Issues in Homecare—12 Tips to Help." Available at www.CaringTimes.org.