

## Grant Outcome Report

# Improving Medication Management for Elderly Home Care Patients in New York

### The Problem

Poor medication management poses one of the greatest risks to elderly home care patients. Factors that can contribute to poor medication management include weak clinical supervision by frontline nurse managers; inadequate training and development opportunities for home care staff; and high turnover rates among home care staff.

Developed in 2004 by the Center for Home Care Policy and Research at the Visiting Nurse Service of New York (VNSNY), the Collaboration for Homecare Advances in Management and Practice (CHAMP) training program is a national initiative dedicated to improving the quality of geriatric home care services. CHAMP offers a variety of tools to advance home care clinical practice and improve quality, including for geriatric medication management. An evaluation of this program in 48 home care agencies across the nation showed significant improvements in medication assessments at the start of care; identification of signs and symptoms of potential medication-related complications; and communication with physicians about possible medication issues.

To improve medication management for elderly home care patients in New York, the New York State Health Foundation (NYHealth) awarded a grant to VNSNY to offer the CHAMP geriatric medication management training to home care agencies across New York State.

### Grant Activities and Outcomes

VNSNY targeted 128 home care agencies with greater than 10 registered nurse staff members in New York, as these agencies account for the majority of home care patients. Training was specifically targeted to frontline nurse managers, who often face increasing demands to intensify their clinical oversight and achieve improvements in care provided by the clinicians they supervise. VNSNY expected to reach 80% of these agencies, which would in turn reach 300 frontline nurse managers, 3,060 field nurses, and 137,000 patients during the grant period.

The CHAMP geriatric medication management training initially was designed as a 10-month course comprising online curriculum, an in-person workshop, group coaching calls, and a Web-based measurement system. Each agency was required to register a team of at least three to five frontline nurse managers.

### KEY INFORMATION:

**GRANTEE**

Visiting Nurse Service of New York

**GRANT TITLE**

Improving Medication Management for Elderly Home Care Patients in New York

**DATES**

March 2009 – February 2012

**GRANT AMOUNT**

\$232,715

**FUNDING**

Special Projects Fund

Agencies measured the clinical impact of the intervention through chart reviews of 10 patients per participant at the beginning and end of the training program. Other evaluation measures included pre- and post-satisfaction surveys from managers and nine quality measurement indicators in the areas of documentation, management, and communication of patients' medication.

The first training was offered in March 2009; however, the 2008–2009 economic crisis heavily affected home care agencies and ultimately led to modifications in the design of the program. Amid concerns about budget cuts in Medicaid and Medicare home health payments, agencies froze most discretionary expenditures, including those for conferences, training, professional development, and travel. Therefore, enrollment in the CHAMP training program was lower than expected.

To overcome these challenges, VNSNY revised the training to be completely online and modified the schedule. Workshops were replaced with webinars to save on time and travel expenses. Other changes included reducing the length of the training; shortening the chart review process and the number quality improvement indicators; adding audio narration to the online courses; and transitioning the course registration and log-in to a newly revamped CHAMP website. Modifying the program to be entirely online reduced fees from \$1,000 per team to \$149 per participant, and the training was offered quarterly instead of annually.

These changes allowed each agency to have greater flexibility in registering individual staff members and frontline nurse managers to complete the training at their own pace within a shorter time period. Participants could still contact the course facilitator if additional assistance was needed. The first offering of the online training began in October 2009, with subsequent offerings every three months. The target reach of the program was revised to 150 frontline nurses from 50 home health agencies.

In addition, with resources from NYSHealth and other funders, VNSNY responded to the challenges of extending program reach by providing and publicizing additional CHAMP resources to help all home care professionals (managers and frontline clinical staff) in New York State make improvements in the quality of geriatric medication management.

During the course of the grant, a total of 212 frontline nurses from 33 distinct New York-based agencies enrolled in the training. However, despite the variety of outreach and assistance to enrollees, only 56 nurses completed the training over the grant period.



Several reasons were posited for the low completion rates. Despite the reduced fees, home care agencies were still struggling to stay afloat during the economic crisis, which made staff training and continuing education less of a priority for home care senior leadership over the short term. Revamping the marketing strategies for the new all-online model also took considerable time. Other obstacles to completion included work time constraints; changes in agency leadership or ownership; and staff member turnover.

Nevertheless, participants who completed the training reported significant improvements in quality measures, including:

- Documenting all medications at the start of care;
- Identifying signs of potential medicine-related complications;
- Communicating with a patient's doctor about potential medicine-related complications, interactions, or duplications, as well as medications that have risks for elderly patients;
- Decreasing the use of multiple medications; and
- Managing oral medications.

Overall, the CHAMP medication management training generated high satisfaction among its participants. For example, 85% of participants who completed the course agreed that their own medication management skills for older patients had improved, 62% felt that their staff's clinical skills had improved, and 75% would recommend the training to a colleague. Based on VNSNY's calculations, the 56 nurses who completed the training reached approximately 358 field nurses and helped improve the quality of care for approximately 23,296 recipients of home health services.

## The Future

The Affordable Care Act provided many opportunities for quality improvements in the care of the elderly. These opportunities include the Independent at Home Demonstration, Community-based Care Transitions Program, and Initiative to Reduce Avoidable Hospitalizations Among Nursing Facility Residents.<sup>1</sup> These initiatives and demonstrations correspond to existing evidence-based CHAMP tools and exemplify the national recognition that CHAMP received from organizations such as the Joint Commission and the Home Health Quality Improvement National Campaign. Although the CHAMP online training is currently on hold because of funding changes, it offers online evidence-based tools, toolkits, and presentations that can be accessed on its website.<sup>2</sup>

<sup>1</sup> For additional information on these federal demonstrations, visit <http://www.innovations.cms.gov/initiatives/index.html>.

<sup>2</sup> Learn more at <http://www.champ-program.org/>.

## BACKGROUND INFORMATION:

### ABOUT THE GRANTEE

The Center for Home Care Policy and Research was established in 1993 by the Visiting Nurse Service of New York (VNSNY) to conduct scientifically rigorous, practice- and policy-relevant research and to support informed decision-making by providers, policymakers, purchasers, and consumers. The mission of VNSNY is to promote the health and wellbeing of patients and families by providing high-quality, cost-effective health care in the home and community; be a leader in the development of innovative services that enable people to function as independently as possible in their communities; and help shape health care policies that support beneficial home- and community-based services. As the largest nonprofit home care organization in the country, VNSNY provides services in the New York City metropolitan area and serves approximately 120,000 patients annually.

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