

# Transformation of a Home Health-based Palliative Care Program

Gwen Bondi, MS Bioethics; Theresa Carter, BS; Stephanie Hisgen, MPH, DNP, RN, NEA-BC, COS-C; and Brian Frasier, MS, CHFP, CHCA  
Visiting Nurse Service of Northeastern NY

## Introduction

Established five years ago within a century-old, well-established certified home health agency (CHHA), this palliative care program was in need of reassessment to address inefficiencies, strengthen quality, improve productivity, and align with a palliative care model that emphasized the home health benefit potential for patients. It drained resources at a concerning rate and made little contribution to the overall fiscal wellbeing of the agency.

Upon scrutiny and close analysis, a major transformation was needed to keep the palliative care program viable.

## Objectives

- To **transform** the PC program from hospice-model to palliative-focus within the CHHA
- To **plan strategically**, and **act tactically** to redirect inefficiencies and address sustainability
- To **meet** required Conditions of Participation for Home Health Agencies with respect to Centers for Medicare & Medicaid Services (CMS)
- To **achieve** operational excellence in the agency

## Methods

- Reviewed evidence-based palliative care models
- Restructured staffing hierarchy; accountability was key to “right people in the right jobs”
- Improved quality of care provided by skilled staff, addressing opportunities for enrichment and growth
- Leveraged administrative infrastructure to best advantage; established strategic and tactical regimens
- Reinforced our services with staff & physicians
  - Developed resources including “What Clinicians Need to Know” card for their ease and consistency in making referrals
  - Emphasized the admission criteria for referred patients – useful for patient intake & referring physicians, alike
  - Provided communication expectations & protocol
  - Defined our inter-professional team and resources; encouraged greater collaboration across departments
  - Established Grand Rounds with guest physicians
  - Conducted in-services and trainings on Advance Care Planning, Advance Directives, MOLST within & outside the agency
- Built and re-established liaison relationships with the medical community, systematically and purposefully
- Upgraded our website and integrated LinkedIn resources
- Encouraged staff development, professionally and personally



Key drivers of our strategic plan

## Results

A new and improved program structure was pivotal to success.

The palliative care contribution margin in the agency went from **-30% to +18%** in less than 6 months ... restoring the program’s value to the CHHA

Staffing and productivity was assessed and managed better to be in line with our revenue. Overall agency fiscal gains showed a **\$1.2 million turnaround in 9 months**, due in part to the palliative care transformation.

### EXTRAORDINARY PATIENT-CENTERED CARE INTEGRAL ELEMENTS OF THE OPERATING CYCLE

Strategic Pillars	Living the Values
Quality	Stewardship
People	Integrity
Productivity	Compassion
Growth	Excellence

## Discussion

New program gained strength in many ways:

- Quality of our services improved
- Higher patient satisfaction realized
- Recognition & confidence from associated hospitals and medical practices increased
- Number of qualified referrals increased
- Better efficiency led to better reimbursement, thus better financial viability
- Overall agency momentum/growth increased
- Community reputation as a provider of excellent services strengthened

## Conclusion

The transformation is an astonishing product of new vision with a home health-focus that leveraged scale with administration and staff.

The resultant viability of the palliative care program is proof of transformative success.

<http://vnshomecare.org/>



## Disclosure

Gwendolyn E. Bondi, MS Bioethics  
Program Manager of Care Choices Palliative Care  
Theresa Carter, BS  
Project Manager  
Stephanie Hisgen, MPH, DNP, RN, NEA-BC, COS-C  
Senior Director  
Brian Frasier, MS, CHFP, CHCA  
Director of Finance