

Preparing for the CARE Act

Facing New Care-Giver Education Requirements:
What hospitals NEED to know

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introduction

Over 40 million Americans are caregivers and most of them are scared because they aren't sure how to properly care for their loved one, especially when taking them home from the hospital. Fear of not knowing how to provide medical care for oneself or one's loved one is prevalent in our country.

Colleen Sweeney, a speaker for the Beryl Institute, says fear is a No. 1 issue among patients.¹ Teaching a caregiver how to care for the loved one at home can alleviate fears, result in improved HCAHPS scores, lower readmissions and increase reimbursements from Medicare and Medicaid. Educating and training increase the likelihood of improved outcomes and reduce the chance for readmission because now there are at least two people who are involved in getting - and keeping - the patient well: the patient and the caregiver.

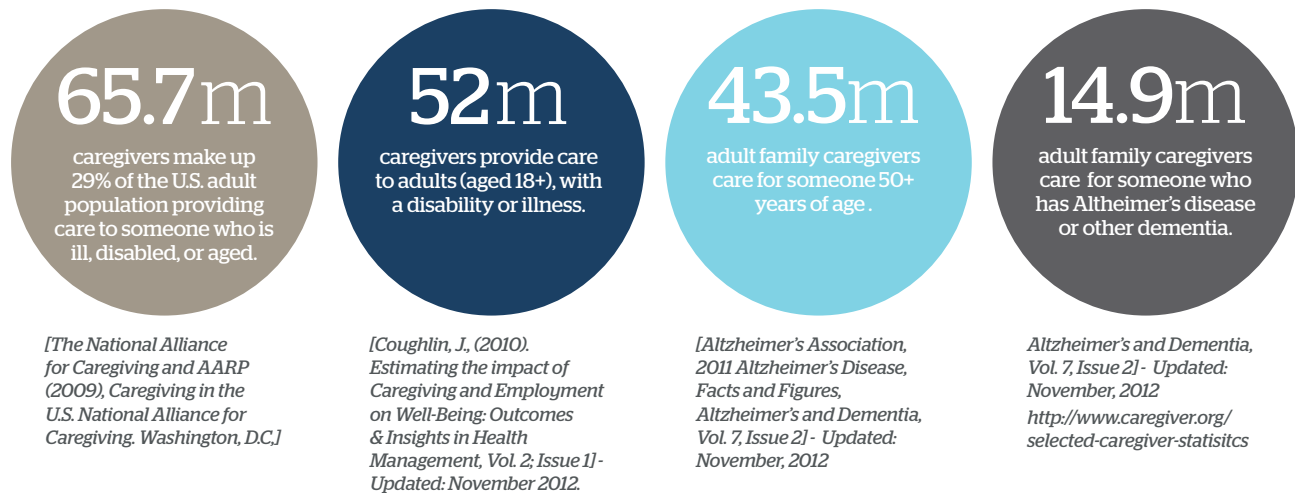
Innovatient fully supports the CARE Act and has published this white paper to educate and promote the act. "We are passionate about patient education and improving the overall care of patients," said Jolinda Lambert, founder and CEO of Innovatient. "The CARE Act promotes training caregivers so that they truly understand how to take care of their loved ones when they leave the hospital. The premise behind the CARE Act parallels our concern for patients and their caregivers and the fact that when people know how to take care of someone once they are home, patients are more likely to be able to stay home."

hospital readmissions

According to a National Health Statistics Report, “Hospitalization, Readmission, and Death Experience of Noninstitutionalized Medicare Fee-for-service Beneficiaries Aged 65 and Over” by Yelena Gorina M.S., M.P.H.; Laura A. Pratt, Ph.D.; Ellen A. Kramarow, Ph.D.; and Nazik Elgaddal, M.S., published by the Centers for Disease Control and Prevention in September 2015: “Older persons discharged from acute care hospitals are at risk of 30-day hospital readmission and death. In 2012, nearly every fifth hospitalization among Medicare fee-for-service (FFS) beneficiaries who were discharged from the hospital alive resulted in a subsequent readmission within 30 days.”²

magnitude of caring

According to a brief from the Family Caregiver Alliance, many people in the U.S. are impacted by providing care to a loved one.



Proper care at home may reduce the rate of readmissions.

the CARE Act

The Caregiver Advise, Record, Enable (CARE) Act is a law being enacted at the state level to protect patients and caregivers alike, to ensure that patients have someone to care for them when they leave a hospital. This law requires hospitals to name a caregiver in writing on the patient's medical record and train that caregiver on the medical tasks needed at home.

¹ <http://theberylinstitute.site-ym.com/?page=SpeakerSweeney>
² <http://www.cdc.gov/nchs/data/nhsr/nhsr084.pdf>

hospitals will be responsible for:

- Documenting caregiver designation in the patient's medical record including the person's address, phone number and relationship to the patient (and, if a patient declines to designate a caregiver, documenting that also)
- Consulting with the caregiver and issuing a discharge plan that describes a patient's after-care assistance needs at the patient's residence.
- Furnishing the caregiver with the contact information for any health care, community resources, and long-term services and support necessary to carry out the patient's discharge plan
- Providing the caregiver with instructions in all after-care assistance tasks described in the discharge plan; training and instructions in nontechnical language may be conducted in person or through video technology
- Demonstrating the tasks the caregiver must perform and answering the caregiver's questions in a culturally-competent manner; documenting details of the various training events

improved post-discharge training

On May 12, 2014, Oklahoma became the first state in the nation to pass the CARE Act.³ To date, 16 states have adopted some form of this act. Lawmakers who sponsor the bill understand that education and training for caregivers is a real issue.

Some lawmakers, such as Connecticut senator, Mae Flexer, have experienced firsthand the hardships of being caregivers to family members. Senator Flexer co-sponsored the CARE Act in Connecticut. An article written by Natalie Missakian on AARP.org, recounts Senator Flexer's experience with the perplexities felt by caregivers. Her father lost his leg in a motorcycle accident 10 years ago and was hospitalized frequently. Flexer's mother was in charge of her father's care at home and Flexer and her sister helped. Follow-up instructions from the hospital were clear some of the time, and other times the family went home feeling overwhelmed and confused. "Once, he was given instructions to care for a wound that he couldn't physically reach," recalled Flexer, 34. "My mother and sister and I weren't in the room."⁴

The CARE Act is designed to prevent these situations from happening. For patients like Flexer's father, the law would require the hospital to give wound care instructions to her mother as the primary caregiver and deliver the instructions in person or via video and provide an opportunity to ask questions. Flexer said all of those measures would have alleviated her mother's anxiety. "She's trying to do everything she can to take care of my dad," Flexer said. "But she's not a trained medical professional."⁵

³ <http://www.aarp.org/about-aarp/press-center/info-05-2014/oklahoma-passes-national-care-act.html>

⁴ <http://states.aarp.org/ct-care>

From a State Representative's Perspective

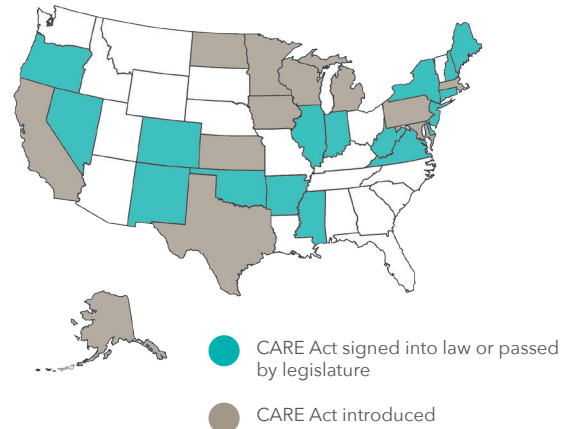
State representative Dennis Zent authored the CARE Act in Indiana as House Bill 1265. The bill was signed into law July 1, 2015. Representative Edward Clere, Representative Karlee Macer and Representative Charlie Brown co-authored the bill.

As a practicing endodontist and a member of Indiana's public health committee, Representative Dennis Zent has had a passion for patients and their caregivers for years. "One of my biggest concerns is when patients are discharged from the hospital and are not sure what they are supposed to do when they get home even though they shake their heads yes when asked if they understand. I started my career in a hospital emergency room with patients constantly coming to and fro," said Dr. Zent. "We tried to explain to patients and the at home caregivers how to take care of the illness or wounds, unfortunately within several days, many of them were back for readmission with the same diagnosis. Typically when that happened, it was obvious the caregiver really didn't understand their role in aftercare. The focus of the CARE Act is to provide the caregiver with an improved basic understanding of how to care for patients in the home."

"Annually in Indiana we have well over 1 million people who are in the hospital. Add to that the million who take care of them, you are talking about at least 2 million people being affected in Indiana every year by a hospital visit and a subsequent discharge. If just 5 percent don't understand what to do when they get home, that is 100,000 people. Obviously, the Care Act has the potential to help a lot of people."

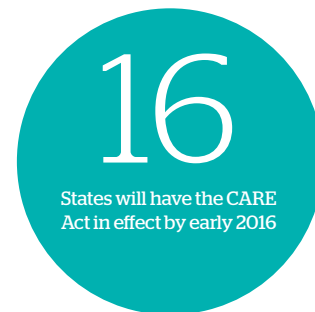
In addition to not understanding how to care for a loved one, Representative Zent mentions two other areas that can affect adequate post-discharge care. First, not every person who takes a patient home is the actual caregiver. Second, not every patient has a family member who will be with them at home. "Some people have to rely on the neighbor across the street," he said. "By appointing a caregiver in writing and offering that caregiver training in post-discharge care, we are ensuring that someone has a basic understanding about care once outside the hospital. This bill is about getting all hospitals to at least a minimum standard in developing improved aftercare presentations and then make an effort to ensure that the information is understood by the at home caregivers. It's not about pointing the finger. It's about getting everybody on the same page as the hospitals who are doing everything right." Dr. Zent added that technology such as training videos for caregivers could have a positive impact in helping hospitals achieve standards. "Reading instructions and seeing a video that 'shows' you how to do something are two very different things," said Dr. Zent. "As they say, a picture is worth a thousand words."

Dr. Denny Zent
Indiana State Representative
District 51



The Caregiver Advise, Record, Enable, (CARE) Act

The CARE Act is a commonsense solution that supports family caregivers when their loved ones go into the hospital and provides for instruction on the medical tasks they will need to perform when their loved one returns home.



are you ready?

Whether your state has adopted, or is in the process of adopting the CARE Act, there are steps you can take to comply.

identify gaps

In addition to updating your patient records system for adding caregiver information and alerts about the patient's discharge, you will need to ensure that you have a training system in place for the medical tasks required once the patient goes home.

adopt a reliable training system

Part of the reason the CARE Act exists is many caregivers complain that they don't know how to help their loved ones when they are discharged from the hospital. To ensure your patients' caregivers are properly trained, and to help with lower readmissions, it is important to put in place a reliable, duplicable system that ensures caregivers receive the training they need and that you can easily document in the medical record. You may have a few outstanding staff members who are excellent at training caregivers, but what if they leave?

engage patients and caregivers at the point of care

An interactive patient system can support your caregiver education efforts through video training with interactive Q & A right in the patient room via TV. The patient can even designate his or her caregiver from the hospital room. During the hospital stay, both patient and caregiver have access to an extensive library of educational materials available in multiple languages so they can learn and understand post-discharge care tasks. You receive documentation if they have achieved competency using online comprehension assessments. Educational materials can be accessed over the internet via PC, tablet or smartphone after the patient has gone home.

about Innovatient

Innovatient is a national leader in patient engagement solutions that encourage patients and caregivers to participate in getting - and staying - well. Innovatient offers an interactive patient care system designed to transform the traditional patient experience into a lasting patient relationship. Hospitals using Innovatient's system report improved outcomes in patient satisfaction scores and HCAHPS, reduced readmission rates resulting in higher reimbursements from Medicare/Medicaid, as well as increases in staff efficiencies such as rounding and discharge training. The technology uses the TV in the patient's room as an electronic whiteboard to communicate and educate in real-time with patients and family members. Information can also be accessed over the Internet via PC, tablet or smartphone after the patient has gone home to facilitate healing after discharge.

For more information visit innovatient.com

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sources:

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