

10 Week Clinical Experience Home Health Progression

Week 1

Orientation to general home health logistics

Orientation to electronic medical record

Orientation to financial aspects of home health including certification periods, episodes, LUPA thresholds, insurance impacts.

Day 1 = observe CI

Day 2 = Perform 1 routine visit with pre-planning with CI

Day 3 = Perform 2 routine visits with pre-planning with CI

Day 4+5 = Perform 3 routine visits with pre-planning with CI

Week 2

Continue 3 patients per day (initial evaluation/re-evaluation/discipline discharge)

Perform at least 1 initial evaluation during the week with pre-planning with CI

Perform at least 1 re-evaluation during the week with pre-planning with CI

Perform at least 1 discipline discharge during the week with pre-planning with CI

Perform at least 1 discipline discharge during the week with pre-planning with CI

On remainder of patient interactions, CI will take lead, however student may play an active part.

Week 3

Continue 3 patients per day (initial evaluation/re-evaluation/discipline discharge/agency discharge)

Perform at least 1 agency discharge (OASIS form) with pre-planning with CI

Week 4

Continue 3 patients per day (initial evaluation/re-evaluation/discipline discharge/agency discharge/agency start of care)

Perform at least 1 agency start of care visit (OASIS form) with pre-planning with CI

Begin to assist with phone calls to MD when appropriate

Begin to assist with phone calls to patient power of attorney (POA) or family when appropriate

Week 5

Continue 3 patients per day (all visit types)

Begin to assist with scheduling of patient appointments with focus on area efficiency to reduce travel time.

Week 6

4 patients per day (all visit types)

Week 7

4 patients per day (all visit types)

Week 8

5 patients per day (all visit types)

Weeks 9 and 10

6 patients per day (all visit types)

Perform in the home health environment as expected for a new graduate who is newly employed

General Guidelines

All documentation should be completed same day as visit

As patient visit count increases, visit type is taken into consideration. For example, 3 Start of Care OASIS appointments would not be appropriate during week 5.

Principle – see one, team one, do one

- See one – watch your CI complete/document this visit type in entirety
- Team one – work together with CI to complete/document this visit type in entirety
- Do One – take lead role in completing/documenting this visit type in entirety

Complexity should be simple in week 1, then progress through week 10.

Documentation should be 75-100% CI guidance in week 1, and 0-10% guidance in weeks 8-10

Observation of RN/OT/ST on days when possible to broaden patient perspective and know when to obtain MD orders for another discipline.