LOCATION: Video: Microsoft Office Teams
ATTENDANCE:
Present: Amy Gonzalez, Tiffany Eder, Pam Bacon, Linda Sheffield, Jennifer Spezza
Absent: Erika Stardig
Management: Absent

SRDF
- Plan quarterly meeting September 5th with management (entire meeting to address SRDF)

Caseloads/Staffing
- Nursing covering huge area with caseloads in 30s
- Care plans not up to date
- Lack of continuity resulting lengthy home health episodes
- Unsafe
- Back log of admission due to lack of staff

Case management
- LPN Concerns
  - Case managers not consistently making visit & majority visits being made by LPN
    - (Review of guidelines for appropriateness of LPN visits)
  - LPN making visits before case manager has met with patient
  - Schedulers are making decision if LPN is appropriate
  - LPN visiting complex patients
    - Complex and unstable patients are not LPN appropriate
    - Lack education of what is an appropriate LPN visit
      - LPNs need to speak up
    - Frequently occurring
      - Reasons: Case manager not given productivity points for non-visit time and are giving time consuming visits to LPN to help the case manager meet daily productivity points
  - When case manager is on PTO/LOA
    - Who does LPN report to?
    - Who is making sure goals are being addressed?
    - Who makes sure POC is getting updated?
- Patient goals not met in a timely manner due to continuity of care (case managers need to make regular visits to make sure patient is making progress towards goals).
Missed Visits
- Routine triaging of patients and no longer initiated due to extenuating circumstances.
- Visits being missed by RN's due to lack of staffing to cover all the visit needs of patients.
- Missed visits when case manager is on PTO
- Missed visits to accommodate admissions
- Need to hire more RNs

Coverage of Case Manager (while on LOA/PTO)
- Who is responsible for answering messages sent to the RNCM mailbox RN is out sick or on vacation? This is causing crucial messages to be missed and delayed patient care.
- Case manager needs to be reassigned when RN is on LOA, so we are not abandoning our patients.
- Managers are not able to keep up with the policy and flow of the census; (ability to check that visits are made by the appropriate clinician)
- RN Managers case managing without making physical visit
  - Need clarification regarding policy of case managing and need for in person visits

- Weekends Coverage and Equity (Home Health)
- No response from home health

Management
- There are no RN clinical managers in Home Health, this is a big concern.
- During TEAMS meetings it is unclear manager's discipline
- Letter to Emily Bennett & Shawn Mattson

- Next meeting-
  - July 11, 2023- 2:30-4:30 TEAMS
LOCATION: Video: Microsoft Office Teams

ATTENDANCE:
Present: Lori Curtis, Amy Gonzalez, Tiffany Eder, Pam Bacon, Linda Sheffield, Jennifer Spezza
Guest: Ashley Bromley (ONA)
Management: Kristen O’Halloran, Tia Hansen, Corrine Schaefer, Teresa Looper, Shephanie Ortiz-Grabe

New Supply Order Process
- Goes live May 1, 2023
- Requires- Internet connection, log in, search supply list
- Time consuming 10-30min per order

Safety
- Review of previous recommendations
- Starting to see safety script in patient's directions screen

Territory
- New mapping
- Nurses may lose territory and would need to bid

Caseload
- Reports of caseloads 38-45
- Case managers inability to safely manage
  - Story of LPN making majority of follow up visits for complex wounds, compromised patient after 6 weeks case manager has not made any visits and will not for few more weeks
- Communication between SOC and case manager
  - No clear process. Varies: Report via Teams, email or case communication no report
  - Risk case manager could be unaware- missed visits, continuity of care
  - Time consuming has no productivity point value
- Additional driving
- Alternate assignment

LPN Roles and Responsibility
- Policy Nursing Service HS 303-18
  - 9 (B) A supervisory visit every 60 days when the patient’s condition is stable and predictable, and at least every two weeks when the patient’s condition is critical and fluctuating

PNCC Business
- Consistently email management with PNCC recommendations
• Assure response within 14 days
• Escalate if needed
• Discuss outcomes during next PNCC meeting

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Management Joined Meeting 1600
Safety
• Safety Update Handout presented by Stephanie Ortiz-Grabe

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Next meeting-
• Discussions
  o Territory, caseload, case managing and LPN
• May 2, 2023- Invite sent