



VISITING NURSE
HEALTH SYSTEM

2015 Iss.01

LOOK HOMEWARD

*A publication for the supporters of
Visiting Nurse Health System*

Investing in the Health of our Community

Today, and for the Future



LETTER FROM THE PRESIDENT



Dear Friends –

As the healthcare system increasingly focuses on reining in spending, one of the most cost-effective solutions for ensuring strong patient outcomes is delivery of healthcare at home. Unfortunately, current Medicare reimbursement policies do not reflect this priority. Home healthcare has recently suffered significant payment cuts by Medicare and commercial insurance. Concurrently, a growing senior population, a shortage of experienced nurses, and greater incentives to reduce hospital stays are exerting pressure on the existing clinical workforce. These factors jeopardize both access and the quality of service to the increasingly high-risk and medically complex patient population that can benefit from healthcare at home.

To address these challenges, we have launched a three-year, \$8 million campaign that will fund key investments to sustain and build our capacity to provide the best in home healthcare and hospice services. This campaign will create cumulative benefits to the community over the next four years, benefiting a projected 130,000 patients through 2019, and generating a projected \$8 million in savings for Visiting Nurse through improved retention, productivity and collections; patient growth; and hospice sustainability.

Without your critical investments in Visiting Nurse and its capacity to care for the underinsured, our community will see increasing patient reliance on hospital emergency rooms, surging hospital readmissions and growing costs for the entire healthcare system. Our current campaign is helping to ensure Visiting Nurse remains the healthier alternative for Atlanta.

With gratitude,

A handwritten signature in black ink that reads "Mark Oshnock". The signature is written in a cursive, flowing style.

Mark Oshnock
President and CEO
Visiting Nurse Health System

Providing Care Coordination Solutions For High-Risk Patients

REDUCING HOSPITAL READMISSIONS

Patients are now discharged from hospitals after their treatment much sooner than before, and with more complex, acute-care needs. Yet, the Affordable Care Act (ACA) calls for financial penalties to hospitals for patient readmissions within 30 days of their release. As such, hospitals must work with home healthcare partners that demonstrate excellence in patient satisfaction and clinical outcomes.

While our readmission rate is lower than alternative providers, Visiting Nurse Health System remains committed to further reduce costly hospital readmissions by developing and implementing a continuing education program that provides our nurses with annual hands-on skills training in post-acute care.

Visiting Nurse serves more high-risk patients with more severe health issues, and more cost effectively, than any other similar healthcare provider in Atlanta—for-profit or not-for-profit. When your clinical education program is more comprehensive than any home health organization in Georgia—\$1.6 million invested annually—it demonstrates you've been defining the healthcare curve for a long time. Yet, given the increased demands on Visiting Nurse, driven by dramatic changes in the healthcare landscape, we need to do even more. Our \$8 million expansion campaign will provide critical funding for the growth and enhancement of our already industry-leading clinical training.



DID YOU KNOW:

The two leading causes of hospital readmissions are:

- medication mismanagement
- nutritional deficiencies

FEATURE

ADVANCED CLINICAL TRAINING

Andrea Stevenson, RN, BSN, MPH, Visiting Nurse's Executive Director, Clinical Practice and Corporate Compliance, explains why advanced clinical training is so important. "Unlike a traditional home healthcare company—whose referrals come mainly from doctor's offices, where the patient complexity is lower—we're getting our referrals mostly from hospital systems so the complexity of the patient is far higher. Our clinicians need to be highly skilled to care for patients whose needs are more complicated and often acute."

Adds Dorothy Davis, LPE, Visiting Nurse's Executive Director of Long-Term Care, "Our goal is to keep people in their homes and communities as long as possible. To make that a reality requires a more sophisticated and more complex workforce, which, in turn, requires more advanced training."

Additionally, advanced training supports our interdisciplinary team approach to patient care. Andrea Stevenson explains, "We call it cross-training. Nurses and physical therapists are each taught to assess conditions



DID YOU KNOW:

30% of our more than 28,000 patients served annually are uninsured or low income, which creates obstacles that lead to unnecessary hospital readmissions.

in different ways. Promoting a collaborative approach between the disciplines will allow us to be more accurate in our assessments, so we know what the best plan of care should be for each one of our patients."

Recent graduates with a Bachelor of Science in Nursing (BSN) will be able to take advantage of Visiting Nurse's robust training as they transition to full-time employment. Following a commitment to work for Visiting Nurse for three years, these graduates will enroll in a one-year program that consists of real-time hands-on training as well as online and classroom sessions. The new Nurse Resident is paired with a carefully-selected senior home healthcare RN who provides support in our patients' homes. The senior RN provides support to promote professional development and helps newly-hired staff build relationships as they are introduced to the Visiting Nurse approach of family-centered care. Upon graduation, our Nurse Residents will join the ranks of our growing team of skilled home healthcare practitioners who provide the best clinical outcomes and highest patient satisfaction.

Hospice Clinical Educator Kathryn H. trains new nurses.



Visiting Nurse recognizes the commitment our staff makes every day, and answers by making our own pledge to pay for any additional state-required training a clinician must take (often paid for by clinicians). “We’re committed to being a learning organization,” says Stevenson. “New hires constantly compliment us on the amount of time for orientation and continuing education they get from Visiting Nurse compared to similar organizations. They get both the clinical know-how along with the knowledge of the business of home healthcare.”

“Unlike a traditional home healthcare company—whose referrals come mainly from doctor’s offices, where the patient complexity is lower—we’re getting our referrals mostly from hospital systems so the complexity of the patient is far higher.”

Andrea Stevenson, RN, BSN, MPH
Executive Director, Clinical Practice
and Corporate Compliance

HEALTH COACHES

Visiting Nurse health coaches are individuals dedicated to specific senior living communities as a free resource, consultant and coach (we’re the only Atlanta-based provider offering this Healthy Transitions program). Health coaches guide high-risk patients in monitoring “danger zone” symptoms, offer reminders for medications and appointments, and in some cases, offer a more holistic approach—linking our most at-risk patients to social work or mental health services.

The demand for the types of services these coaches offer only promises to grow, thanks to an aging population—one less connected to family than it once was—and the reality that medical advances have allowed us to live longer with our afflictions.

FEATURE

EXPANDED PATIENT EDUCATION

Knowledge of one's condition and how to manage it is key to avoiding medical crises that drive readmissions. In recent years, Visiting Nurse created educational materials for patients (and their caregivers) to help them navigate the everyday challenges and demands of their conditions. With readmission rates climbing for additional high-risk scenarios, it is imperative that new patient and caregiver materials be developed to provide vital information that patients and families need to know to manage their care at home.

Andrea Stevenson offers some context, "A new diabetic has to learn about diet, how to inject insulin, how to use a blood-sugar monitor, etc. It can be overwhelming. The customized materials we provide give them all they'll need to manage their conditions moving forward. Most importantly, these materials offer knowledge to help keep them out of the hospital, because they'll know if any given 'crisis' requires 911, the ER or a doctor's visit."

The same need for information applies to end-of-life scenarios as well, as Nancy Mauldin, RN, Visiting Nurse's Executive Director of Hospice Services, observes: "The more we can educate the patient and their caregivers, the more prepared they'll be to handle what's coming, and the better their experience will be." Mauldin highlights Visiting Nurse's distinctive philosophy around caregiving

with a story: "We had a patient whose caregivers were concerned that she might pass while we were not present. We educated and prepared the family, and when she did pass the family was completely ready, so they were calm. Our job is to make the family the center of the story—to educate them so they, not us, can be the heroes of the experience and the care."

NUTRITIONAL ASSESSMENTS

One high-sodium meal for a congestive heart failure patient, or one too high in sugar for a diabetic, can spell a quick return to the hospital. Patients and caregivers need nutritional education and guidance to know how to prepare "condition-appropriate" meals. While Medicare doesn't pay for a dietician, Visiting Nurse has learned that providing high-risk patients and their caregivers with the comprehensive nutritional assessments and dietary consultation (that a dietician can offer) helps us reduce the cost of healthcare at home, while enhancing its quality.



DID YOU KNOW:

18% of our patients live alone and depend on Visiting Nurse to manage their daily medical needs.



Sarah W., Clinical Manager, listens to high-risk patient Ann M.'s lungs.

Delivering Superior Care Using Secure, Efficient Technology

SOFTWARE SOLUTIONS TO MODERNIZE CARE DELIVERY

Rapid advances in technology allow us to deliver superior healthcare to patients at home. In some cases, multiple clinicians may visit one patient, which can mean less continuity of care for the patient, as well as being logistically taxing for the clinician. The expansion campaign will allow us to invest in a cutting-edge, patient scheduling solution that considers multiple factors to automatically match patients with the most geographically appropriate clinician. This tool will not only foster closer working relationships between a patient and a clinician, but also improve those clinicians' quality of life by reducing excess travel time. Notes Andrea Stevenson, "Because we operate in 26 greater Atlanta counties, given all the travel involved, we're pursuing any technological advance that can help us do that more effectively." If Visiting Nurse can visit one more patient per day our population served can grow significantly.

INFORMATION SECURITY AND COMPLIANCE

As patient information is shared more and more among healthcare providers, information security becomes increasingly critical. Visiting Nurse will be making additional investments in network security tools to protect private patient information, and in technology improvements to ensure we meet evolving compliance standards in the areas of communication, billing and documentation.

Christy Brice, Visiting Nurse's Chief Information Officer, shared today's operational reality: "HIPAA has mandated 54 in-depth requirements on patient information security. These rules, along with regular audits, are challenging companies to redesign how they communicate—even internally. We've made investments in new people and new technology to keep us in compliance, and we plan to make even more."

DID YOU KNOW:

In 2014, our clinicians traveled more than 2.6 million miles making 240,000 patient visits.



In the end, it all comes down to continuity and quality of care, and that starts with good communication. Says Dorothy Davis, "As consumers, we assume our doctors and other providers are coordinating our care—starting with being able to share our healthcare record. Often, that's not the case, and as a result, it impacts quality of care and effective decision-making. Visiting Nurse is spending a lot of time and resources making sure that happens."

Though we're setting the standard in our field for cutting-edge technology, we never forget the "human touch" factor, and the primacy of the patient-clinician relationship. Whether by employing less-intrusive smartphone apps, smaller laptops, or increased use of tablets to reduce typing and streamline the crucial documentation process, we keep the patient first.



Darrell O., IT Operations Manager & HIPAA Security Officer, oversees the server room.

FEATURE

Keeping Hospice Atlanta Center A Vital Part Of Our Community

CONSISTENCY OF CARE

Our hospice services motto is: Creating a high-quality patient experience—every patient, every family, every time. The expansion campaign will help cover the necessary training to have all our nurses CHPN-certified (Certified Hospice Palliative Nurse), so we can deliver that uniform, seamless, high-quality care even more superior than our current care.

Says Nancy Mauldin, “Nurses providing care in patients’ homes are the lead decision-makers, so every nurse needs to be competent and confident in handling ANY situation. Five years ago, we rarely managed IVs in the home. When a patient left the hospital for hospice, they would discontinue all their lines and tubes and just go to oral medication. Now, home-based IVs and far more complex equipment and medication regimens are routine, but they’re expensive. And they require far more extensive training for our nursing staff.”

Ongoing, in-depth training is meant for both the patient during their end-of-life journey as well as their families. We’ve built a simulated home environment in the Center where every hospice clinician who has patient contact will receive additional training, focused on delivering uniformly superior care to every patient, on every visit, in any home we visit or in the Center.

DID YOU KNOW:

We provide Bereavement Support to caregivers for:

- 13 months after an adult patient dies
- 24 months after a pediatric patient dies

NEW FINANCIAL CHALLENGES

While the ACA has driven reductions in Medicare reimbursements, we’re dealing with more complex patients requiring more involved and expensive medications, treatments and staff training. That training goes beyond just the medical to the “psychosocial” as well: Preparing families mentally for a loved one’s passing, as well as empowering the family to proactively take care of their loved one at home or at the Center. That means significant, ongoing investments to run the Center—in excess of \$15,000 a day. Why the high costs?

- More complex patients with expensive diagnoses require higher levels of care;
- An inpatient stay is cost-intensive as the highest costs are incurred in the 2-3 days at both the front and back ends;
- As one of the few not-for-profit hospice facilities, we’re the “go-to” provider for those unable to cover costs.

The expansion campaign will allow Visiting Nurse to meet these challenges over the next three years while we build up our annual fundraising capacity. In the meantime, we’re exploring new revenue-enhancing directions that don’t rely on donors. One important piece of our strategy for sustainability is the expansion of our residential self-pay program.

DID YOU KNOW:

The average patient stay in Hospice Atlanta Center is 4 days.

Residential patient room at Hospice Atlanta Center.



RESIDENTIAL SELF-PAY PROGRAM

Medicare benefits for end-of-life patients are changing, resulting in less patients qualifying for inpatient hospice support. As a result, we have been growing our private pay hospice residential program.

For patients with neither local family support nor a hospice-friendly home, but with the wherewithal to pay for inpatient hospice, the Center offers an innovative self-pay option. Because they're paying for their stay, clients can come in far earlier in the course of their final journey. The only criteria: a life-expectancy of less than six months.

Says Mauldin, "The self-pay program not only provides this unique group—who wouldn't qualify otherwise—a place to have a peaceful, dignified passing, but offers an innovative way to enhance the financial viability of the Center. In the process, it's reinventing the original intent of the Center: A place for patients to spend the last months—not days—of their lives."

"Five years ago, we rarely managed IVs in the home. When a patient left the hospital for hospice, they would discontinue all their lines and tubes and just go to oral medication. Now, home-based IVs and far more complex equipment and medication regimens are routine, but they're expensive. And they require far more extensive training for our nursing staff."

*Nancy Mauldin, RN
Executive Director of Hospice Services*

DID YOU KNOW:

We are the largest provider of pediatric hospice care in Atlanta.



PROGRAMS

Annual Giving

Ensuring Our Care, Now and in the Future

Annual giving is the key driver of overall fundraising success. It differs from a capital campaign or expansion campaign because these gifts—from generous individuals, foundations and corporations—are donated every year and form the base of support that allows us to deliver our mission.

At Visiting Nurse Health System, we reach out to a broad segment of the donor population to engage not only those who have been touched by our care, but also to the greater Atlanta community. To ensure we are here for the community, today and in the future, we must bring more donors into the Visiting Nurse family and continue to build relationships with them year after year.

Did you know that Visiting Nurse:

- Is a nonprofit organization caring for patients regardless of their ability to pay?
- Provides care to the sickest patients—those who other providers may turn away?
- Introduced the first hospice program in Georgia?
- Operates the extraordinary Hospice Atlanta Center in Buckhead?
- Delivers pediatric hospice care through a specialized program?

You can help us continue the critical work delivered by our 700 nurses, clinicians and physical therapists by joining our donor family today! Whether your preference is through a monthly giving program, supporting an annual event, or bestowing a year-end gift, we can assure you that the funds you invest in Visiting Nurse will impact the lives of our patients and their families in profound and meaningful ways. And, your gift ensures that we will be here for you and your family in the future when YOU need us.

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To begin your annual donation today, please visit:
www.vnhs.org/annual

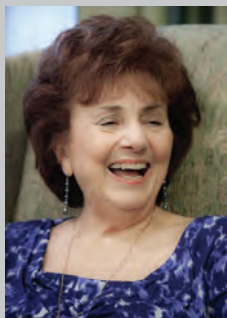


*Remember a Loved One
With An Engraved Paver
at Hospice Atlanta Center*

For more information or to make a memorial gift, please visit www.vnhs.org/pavers or call the Office of Advancement at 404-215-6010.

In Remembrance: Eula Carlos

Friend of Visiting Nurse and Namesake of Andrew and Eula Carlos Hospice Atlanta Center



Eula Caras Carlos passed away May 22, 2015 at the Andrew and Eula Carlos Hospice Atlanta Center. Eula served on the Visiting Nurse Health System board for 18 years and was instrumental in the planning and ultimate launch of the Center.

A long-time community philanthropist, volunteer, and member of several boards and societies, Eula was a devoted friend and supporter of Visiting Nurse who worked tirelessly for many years to establish an inpatient hospice facility in Atlanta. Her interest in and dedication to hospice

began during an office visit with her physician, Dr. Arthur Booth, when he described his vision of such a facility to Eula. When he told her the only facility of its kind in the south was located in Daphne, Alabama, Eula became inspired to bring a hospice inpatient unit to the residents of Atlanta. From that day on, Eula and Dr. Booth, together with their spouses Linda Booth and Andrew Carlos, began the journey to make their dream a reality. Eula became a founding member of the Visiting Nurse auxiliary which became the Hospice Atlanta Center in 1996.

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Those wishing to make a donation in Eula's memory to Visiting Nurse Health System and Hospice Atlanta Center please call 404-215-6010 or visit vnhs.org/DonateNow.

MEMORIAL AND HONORARY GIFTS

January 1 - August 31, 2015

The following people were thoughtfully remembered with a gift in their name:

In Honor of:

Mrs. A.A. Alterman
Mr. Earl Daniell
Heather Andrews and Rajesh Dave
Ms. Starr Moore
Mr. and Mrs. Brian Ranck
Mr. Kent Smith
Dr. and Mrs. Maxwell White, Jr.

In Memory of:

Ms. Joni Affatato
Ms. Melissa Affatato
Mr. Isiah Allen, Jr.
Mr. and Mrs. John Allen
Ms. Norma Josephine Allen
Mrs. Shirley Anderson
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gifts visit www.vnhs.org.



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Look Homeward

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Mark Oshnock
President

We welcome your comments and suggestions.
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404.215.6000
www.vnhs.org



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Stan and Bonnie Sharp

Master of Ceremonies
Bill Liss, 11Alive News

Our Fall Gala to Support Hospice Care

Benefits our end-of-life care at home and at The Andrew and Eula Carlos Hospice Atlanta Center, honoring the service and commitment of the Carlos Family

Wednesday, November 18, 2015

Cherokee Town Club

7:00pm – 10:00pm

Patron Reception 6:00pm – 7:00pm

Cocktail attire

We've redesigned our fall gala this year!

Instead of a seated dinner, this year guests will enjoy a selection of culinary favorites to choose from! And there will be a band and dance floor too—for those wanting to kick up their heels. Mix-and-mingle with friends old and new, bid on an array of experiential auction items, hear inspiring stories, and help us fund the amazing hospice care we provide—all while saluting an extraordinary family. Seating is limited so make plans to attend or sponsor today!

Tickets and Sponsorships Available Now! Visit
vnhs.org/InTheMoment or call 404-215-6013.