

Reasons for a home visit

- Missed appointments
- Patient safety concerns
 - Environment
 - Medications
 - Abuse
 - Mobility
- Evaluation of geriatric syndromes
 - Frailty
 - Falls
 - Cognitive Impairment
- Care coordination
 - Caregivers
 - Other professionals
 - Transitions
- Terminal Illness

The home visit

Before:

- Confirm appointment
- Bring essential equipment*

During:

- Assess environment
 - Neighborhood
 - Home*
- Medical Assessment
 - Geriatric ROS
 - Medication Review
 - Gait Assessment
 - Cognitive testing
- Functional Assessment
 - ADL/IADL review
 - Durable Medical Equipment*
 - Assistive devices
 - Emergency equipment
- Social Assessment:
 - Caregivers*
 - Advanced Directives

After:

- Next appointment
- Refer to home care
 - if *skilled* need*
- Community referrals
 - Food resources
 - Transportation
 - Med management
 - Day programs
 - Case management
- Family follow-up

**see reverse*

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Equipment Needed for visit

Medical:

- stethoscope
- blood pressure cuff
- pulse ox
- otoscope
- cerumen curette
- thermometer
- reflex hammer
- gloves
- alcohol swabs
- alcohol based soap

Optional:

- venipuncture supplies
- specimen cups
- catheters
- wound supplies
- pocket talker

Forms:

- lab slips
- radiology forms
- MOCA
- PHQ-9, GDS
- POLST
- DMV FORMS

Home Assessment

Outside

- Neighborhood safe? Clean?
- Easy to enter house or bldg? Are there stairs or locks?
- Handicap Accessible?

Inside

- clutter, clean, other residents, fall risks (carpets)
- Kitchen: adequate/fresh food? clean? safety issues (ex. burned pots, poor lighting)
- Bathroom: bars for shower/toilet? raised toilet seat? shower bench?
- Bedroom: clutter? safety? ease of transfers? hospital bed?
- Other: lighting? smoke alarms? electrical cords? other fall hazards? is phone accessible and working?
- Safety concerns: is phone working/accessible?

Medication Review:

- Ask to see bottles, medi-set, etc. Include PRNs, OTCs, supplements
- Record each medication, reconcile any discrepancies
- Discuss medication indications and side effects

ADL/IADL Review:

- *determine if independent or dependent and *who* assists
- ADL: bathing, dressing, toileting, feeding, transferring
- IADL: telephone, shopping, traveling, finances, cleaning, med management

Caregiver assessment

- Are they paid? Family members?
- Agency or Private
- Hours worked. Back-up plan
- Caregiver Stress, burnout risk
- Caregiver skill level

Durable Medical Equipment

- Mobility: cane, walkers, wheelchair, -home safety: hospital bed, mattress, bathroom equipment, grab bars
- Assess if patient has other emergency equipment: lifeline, visible POLST or pre-hospital DNR, working phone, contact numbers

Determining if there is a skilled need

- must need RN, PT, OT or speech
- Must be homebound*
 - considerable and taxing effort to leave the home
 - need help to leave home (assistive device)
 - may leave home for medical treatment or short, infrequent non-medical reasons, ie religious services
- Reasons for referral:
 - recent discharge
 - new unstable diagnosis
 - new medications or medication concerns
 - need for lab tests
 - safety concerns
 - falls