

# RMC Home Care Caregiver's Manual



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Home care is covered by Medicare, Medicaid, Veterans benefits, long-term care insurance, private insurance, sliding fee scale, and private pay.

# Our Staff

Case Management Nurses coordinate benefits and provide cost effective care to meet your needs.

**Registered Nurses** provide physical assessments, injections, wound care, catheter care, IV therapy, and patient and family care instruction 24/7 as directed by a healthcare provider.

**Home Care Aides** help with personal care, shampooing hair, bathing, dressing, walking, prescribed exercises, and respite care so that assisting family members care can shop, run errands, or rest.

**Occupational Therapists** evaluate, develop, and teach patient how to maintain the ability to perform daily activities like bathing, dressing, and meal preparation.

**Physical Therapists** provide rehabilitation following an illness, surgery, or injury through exercise programs, posture, balancing training, daily living assessments, and home safety recommendations.

**Speech Therapists** evaluate and treat speech and swallowing problems including producing speech sounds, language comprehension and expression, swallowing techniques, and diet recommendations.

**Medical Social Workers** assist with social, emotional, and financial factors affecting health; use of community resources; and financial healthcare planning.

# Questions or Concerns for Our Staff

To help our staff provide you with the best care possible, we ask that you please do the following:

- Notify us of all doctor appointments, tests, and procedures
- Know where your calendar of scheduled visits is and anticipate a phone call those mornings to arrange a visit time
- Provide a private area for your visit so that we can maintain your privacy and focus on you
- Keep pets in a separate room or outside during a visit
- Provide a place to sit and table space for your nurse to setup her computer and equipment
- Children should be in a separate area of the home and are not allowed to touch or play with

staff equipment or computers

In order to provide you with the best care possible, we would like to hear your questions and/or concerns when we are here for our next visit. It may be hard to remember all your questions when we see you, so please use the following space to write down anything you would like to discuss with us the next time we are here. <u>\*\*\* REMEMBER</u> - You can ALWAYS call us with questions before your next visit. <u>563-927-7303</u>

# Speak Out: Tips to Help Prevent Errors in Your Care

Healthcare organizations around the country are working to make healthcare safety a priority. You play a vital role in making your care safe by becoming an active part of the team. These tips provide simple advice on how you can make your care a positive experience. After all, research shows that patients who take part in decisions about their healthcare are more likely to have better outcomes.

#### Speak up if you have questions or concerns. It's your body and you have a right to ask.

- If you are having surgery, ask the provider to mark the area that is to be operated on.
- Ask about medicines you are receiving.

#### Know the medications and treatments you're receiving. Are they correct? Don't assume anything.

- Tell your nurse if something doesn't seem right.
- Notice if your caregiver washed their hands or used the alcohol hand rinse.
- Know what time you normally receive your medicine ask if you don't receive it.

#### Learn about your diagnosis, your medical tests, and common treatments.

- Read about your condition ask questions.
- Read all medical forms and make sure you understand them before you sign them.
- Write down information your provider gives you.

#### Ask a trusted person to be your medical helper. Your helper should:

- Ask questions when you don't feel up to it.
- Plan to stay with you for several hours after a procedure or surgery (maybe even overnight).
- Review consents that you may not understand.
- Understand the care you will need once you go home.
- Know what to look for if your condition is getting worse and whom to call for help.

#### Know your medicines ... why you take them and what you take.

- Ask about your medicines, the purpose, and side effects.
- If you don't recognize a medicine, verify it is for you.
- If you are given an IV, tell the nurse if the area is painful, reddened, or swollen.
- Tell your provider which medicines you take even non-prescription vitamins and other supplements.

### Be part of your healthcare decisions - It is your body.

- You should discuss your treatments during each step of your care.
- Ask your provider what the test will achieve, or if there is an alternate or better test or treatment.
- Keep a written copy of your medicines. Add the medical diagnosis to this copy.

# REMEMBER - <u>YOU</u> ARE THE CENTER OF YOUR HEALTHCARE TEAM



# Get Test Results Online

# CernerHealth

Patients 13+ years of age-- View your lab, microbiology and radiology test results, medications, allergies and immunizations with our simple and secure portal (HealtheLife). Provide your email address at registration to sign up for HealtheLife. Membership is invitation only. Patients will receive an email invitation shortly after completing the registration process. HealtheLife app also available.

Please note:

- Information prior to 09/21/20 will not be available in HealtheLife.
- The updates you make in HealtheLife do NOT update your content in RMC's system.
- Children <u>under 13</u> can be added to their legal guardian's account.
- All questions regarding test results should be directed to your primary care provider.

### Need help? Call Regional Medical Center Health Information Services at 563-927-7433 (option 4).

# Home Safety Guidelines

| Some safety hazards are obvious, such as a toy on the stairs. Others are not, such as a stair rail that is loose.   |   |  |  |  |  |
|---|---|--|--|--|--|
| General   | Kitchen   |  |  |  |  |
| <ul> <li>Turn appliances off when not in use</li> <li>Link ceiling fans and lights to wall switch</li> <li>Remove all clutter</li> <li>Place items used often waist high in cupboards<br/>or drawers</li> <li>Put electrical cords along walls, out of walkways</li> <li>Sweep floors often and wipe liquids immediately</li> <li>Ensure furniture is sturdy, secure, and arranged<br/>into a straight walking path</li> <li>Install grab bars in halls</li> <li>Place night lights throughout home</li> <li>Consider personal emergency response device</li> <li>Use step stool with bar when reaching up</li> <li>Place smoke detectors throughout house</li> </ul> | <ul> <li>Keep hazardous cleaners and chemicals in a well ventilated area</li> <li>Keep knives in a knife rack or drawer</li> <li>Don't microwave empty dishes or metal objects</li> <li>Ensure well lit</li> <li>Keep loose sleeves and curtains away from open flames</li> <li>Ensure exhaust fans on and discharge outside and pan handles are turned away from burners and stove edge</li> </ul> |  |  |  |  |
|   | <ul> <li>Bathroom</li> <li>Install grab bars in bath/shower and by toilet</li> <li>Place shampoos, clothes, etc. where you can reach them without turning</li> <li>Use non-slip bath mat</li> </ul>   |  |  |  |  |
| <ul> <li>Remove or adhere rugs to floor</li> <li>Keep cordless phone and eyeglasses within<br/>reach when going to sleep</li> <li>Oxygen Equipment</li> </ul>   | Stairwells (in/outdoor)<br>• Place tape and non-skid strips on stair edge<br>• Keep stair and handrails in good condition   |  |  |  |  |

#### Oxygen Equipment

• See instructions provided by oxygen equipment company. If you don't have them tell your nurse.

- Keep away from open flame (candles/gas stove/do not smoke).
- Practice changing from concentrator to portable tank until comfortable.
- Register electrically powered equipment with utility company to ensure you have a full oxygen tank.

If you need help and aren't able to contact the agency in crisis or have an emergency situation, call 911. If it is not an emergency, but you need assistance, contact your closest neighbor or relative.





# **Drug Interactions & Guidelines**

- 1. Locate the name of your medication in Section A to find the drug caution number(s) next to it.
- 2. Locate that drug caution number(s) in Section B to learn the best way to take your medications.

# **General Guidelines**

Certain foods or alcohol may interact with medications by interfering with their absorption or metabolism. This may cause side effects or reduce the effectiveness of the medication.

- Take medications at the same time every day.
- Do not crush or chew medications without consulting a pharmacist or healthcare provider.
- Take medications with a full glass of water.
- Do not drink alcohol or products containing alcohol while taking medications for allergies, anxiety/depression, convulsions, pain, or any medication that makes you drowsy.

Other medications you take that may be affected by food:

| Medication          | Drug<br>Caution # |
|---------------------|-------------------|
|                     |                   |
|                     |                   |
| Prescription Medica |                   |
|                     |                   |
|                     |                   |

# Section B

|     | Section B   |
|-----|---|
| Use | e guidelines to minimize drug interactions.         |
| 1.  | Take with food or milk.                             |
| 2.  | Take on an empty stomach, 1 hour before or 2        |
|     | hours after meals.                                  |
| 3.  | Avoid alcohol and alcohol products.                 |
| 4.  | Limit intake or avoid caffeine such as coffee, tea, |
|     | cola soft drinks, and chocolate.                    |
| 5.  | Do not alter salt intake or begin to use a salt     |
|     | substitute before contacting your provider.         |
| 6.  | Drink 2-3 quarts (8-12 cups) of water per day.      |
| 7.  | Have consistent intake of potassium rich foods such |
|     | as bananas, citrus fruits , and juices.             |
| 8.  | Take consistently with food or without to avoid     |
|     | changes in drug absorption.                         |
| 9.  | Take 1 hour before meals.                           |
| 10. | Avoid dairy food, eggs, cereal, and grains within 1 |
| 11  | hour of taking drug.                                |
|     | Avoid a diet high in protein and Vitamin 86.        |
|     | Take 30 minutes before breakfast.                   |
|     | Do not drink grapefruit juice.                      |
|     | Take 30 minutes before meals.                       |
| 15. | Avoid additional iron supplements, dairy products,  |
|     | and antacids within 3 hours.                        |
|     | Take after meals.                                   |
|     | Take 1-3 hours after meals.                         |
|     | Take at mealtime.                                   |
| 19. | Avoid extremes of dietary protein, fat, and         |
|     | carbohydrates. Limit charcoal-broiled foods.        |
|     | Avoid natural licorice.                             |
| 21. | Take with food.                                     |
| 22. | Avoid taking with food high in fat.                 |
| 23. | Take with meal at same time each day.               |
| 24. | Take at suppertime.                                 |
| 25. | Avoid sudden changes in Vitamin K intake such as    |
|     | dark green vegetables and green tea.                |
|     |   |

26. Ask your provider or pharmacist.

If you have questions or problems concerning drug cautions, consult your pharmacist or healthcare provider. If you take medications not on this list, check with your healthcare provider or pharmacist about possible food/drug interactions.

| Section A                           |     |      |       |   |    |    |  |     |       |        |     |
|-------------------------------------|-----|------|-------|---|----|----|--|-----|-------|--------|-----|
| Generic (Brand Name)                | Dru | q Ca | ution | # |    |    | Generic (Brand Name)                   | Dru | uq Ca | autior | า # |
| Acetaminophen (Tylenol)             | 3   |      |       |   |    |    | Ketorolac (Toradol)                    | 1   | 3     |        |     |
| Alendronate (Fosamax)               | 12  |      |       |   |    |    | Lansoprazole (Prevacid)                | 2   | 3     |        |     |
| Allopurinol (Zyloprim)              | 3   | 6    |       |   |    |    | Levofloxacin (Levaquin)                | 2   | 15    |        |     |
| Alprazolam (Xanax)                  | 3   |      |       |   |    |    | Levodopa/Carbidopa (Sinemet)           | 2   | 8     | 11     |     |
| Amlodipine (Norvasc)                | 13  |      |       |   |    |    | Lisinopril (Zestril, Prinivil)         | 3   | 4     | 5      | 7   |
| Ampicillin                          | 2   |      |       |   |    |    | Lithium carbonate                      | 5   | 6     | 16     |     |
| Anti-depressants (Amitriptyline,    | _   | ~~   |       |   |    |    | Lorazepam (Ativan)                     | 3   |       |        |     |
| Imipramine, Desipramine)            | 3   | 26   |       |   |    |    | Lovastatin (Mevacor)                   | 13  | 24    |        |     |
| Aspirin and other Salicylates       | 1   | 3    | 26    |   |    |    | Metformin (Glucophage)                 | 3   |       |        |     |
| Atenolol (Tenormin)                 | 8   |      |       |   |    |    | Methotrexate                           | 2   | 3     |        |     |
| Atorvastatin (Lipitor)              | 13  |      |       |   |    |    | Metoprolol (Lopressor)                 | 8   |       |        |     |
| Azithromycin (Zithromax)            | 15  |      |       |   |    |    | Metronidazole (Flagyl)                 | 3   |       |        |     |
| Baclofen (Lioresal)                 | 3   |      |       |   |    |    | Nifedipine Adalat CC                   | 2   | 13    |        |     |
| Bumetanide (Bumex)                  | 5   | 7    |       |   |    |    | Nifedipine Procardia XL                | 13  |       |        |     |
| Bupropion (Wellbutrin, Zyban)       | 8   | 3    |       |   |    |    | Nisoldipine (Sular)                    | 13  |       |        |     |
| (may increase seizure risk)         | 0   | 3    |       |   |    |    | Nitrofurantoin (Macrodantin, Macrobid) | 3   |       |        |     |
| Calcium Supplements                 | 10  | 15   | 18    |   |    |    | Non-Steroidal Anti-Inflammatories      |     |       |        |     |
| Captopril (Capoten)                 | 3   | 5    | 7     | 9 | 15 | 20 | (Etodolac, Ibuprofen, Sulindac,        | 1   | 3     | 26     |     |
| Carbamazepine (Tegretol)            | 3   | 13   | 18    |   |    |    | Naproxen, Celecoxib/Celebrex)          |     |       |        |     |
| Cefaclor (Ceclor)                   | 2   |      |       |   |    |    | Olanzapine (Zyprexa)                   | 3   |       |        |     |
| Cefuroxime (Ceftin)                 | 21  |      |       |   |    |    | Omeprazole (Prilosec)                  |     |       |        |     |
| Clarithromycin (Biaxin)             | 2   |      |       |   |    |    | OxyContin (Oxycodone)                  |     |       |        |     |
| Coreg (Carvedilol)                  | 1   |      |       |   |    |    | Paroxetine (Paxil)                     |     |       |        |     |
| Dexamethasone (Decadron)            | 1   | 3    | 5     |   |    |    | Penicillin 2                           |     |       |        |     |
| Digoxin (Lanoxin)                   | 8   |      |       |   |    |    | Phenytoin (Dilantin)                   |     | 8     |        |     |
| Diltiazem (Cardizem)                | 2   |      |       |   |    |    | Potassium (K-Dur, Micro-K)             | 1   | 5     | 7      |     |
| Divalproex (Depakote)               | 1   | 3    | 8     |   |    |    | Prednisone                             | 1   | 3     | 5      |     |
| Doxycycline (Vibramycin)            | 3   | 15   |       |   |    |    | Procainamide (Pronestyl, Procanbid)    | 1   | 3     | 8      |     |
| Enalapril (Vasotec)                 | 3   | 4    | 5     | 7 | 20 |    | Propranolol (Inderal)                  | 8   |       |        |     |
| Erythromycin                        | 1   |      |       |   |    |    | Protonix (Pantoprazole)                | 2   |       |        |     |
| Felodipine (Plendil)                | 5   | 13   |       |   |    |    | Sertraline (Zoloft)                    | 2   | 3     |        |     |
| Ferrous sulfate                     | 2   | 10   | 15    |   |    |    | Simvastatin (Zocor)                    | 13  |       |        |     |
| Fexofenadine (Allegra)              | 2   |      |       |   |    |    | Spironolactone (Aldactone)             | 5   | 7     |        |     |
| Flomax (Tamsulosin)                 | 23  |      |       |   |    |    | Sucralfate (Carafate)                  | 9   |       |        |     |
| Fluoxetine (Prozac)                 | 3   | 13   |       |   |    |    | Sulfamethoxazole/Trimethoprim          | 3   | 6     |        |     |
| Furosemide(Lasix)                   | 2   | 3    | 5     | 7 |    |    | (Bactrim, Septra, Cotrim)              |     | 0     |        |     |
| Gabapentin (Neurontin)              | 18  |      |       |   |    |    | Terbinafine (Lamisil)                  | 3   |       |        |     |
| Gemfibrozil (Lopid)                 | 14  |      |       |   |    |    | Tetracycline                           | 2   | 15    |        |     |
| Glimepiride (Amaryl)                | 3   | 23   |       |   |    |    | Theophylline (Theodur, Slo Bid)        | 4   | 8     | 19     |     |
| Glipizide (Glucotrol)               | 3   | 14   |       |   |    |    | Trazodone (Desyrel)                    | 16  |       |        |     |
| Glyburide (Diabeta, Micronase)      | 3   | 23   |       |   |    |    | Triazolam (Halcion)                    | 13  |       |        |     |
| Hydralazine (Apresoline)            | 8   |      |       |   |    |    | Verapamil (Calan)                      | 4   | 13    |        |     |
| Hydrochlorothiazide(HydroDiuril)    | 5   | 7    | 8     |   |    |    | Verapamil SR (Calan SR)                | 4   | 13    | 21     |     |
| Hydrocodone (Norco)                 | 3   |      |       |   |    |    | Warfarin (Coumadin)                    | 3   | 8     | 25     |     |
| Isosorbide Monoitrate (Imdur, Ismo) | 2   | 3    |       |   |    |    | Zolpidem (Ambien)                      | 3   |       |        |     |

5

# **Medication Safety**

#### Minimize your risk for drug interactions, mix-ups, and side effects.

- Do not crush or chew without consulting a pharmacist or healthcare provider.
- Take with a full glass of water.
- Do not drink alcohol while taking medications that make you drowsy.
- Store in a cool, dry place (heat and humidity cause it to lose effectiveness).
- Keep in original container or in "medication box" with childproof cap.
- Take in a well-lit room.
- Read label and follow healthcare provider and pharmacist instructions.
- Before taking non-prescribed medication with prescribed medication, consult with your provider.
- Update Emergency Medical Record/MedCard if medications or dosages change.
- Discard if discontinued or outdated.



Participating pharmacies can only accept non-controlled substances. The chart below details what can be collected in an EcoReturns unit.

| ACCEPTABLE   | NOT ACCEPTABLE  |
|--|---|
| <ul> <li>Unused or expired medication, prescription (Rx) or</li> <li>Over-The-Counter (OTC), including: <ul> <li>Pills, tablets, capsules</li> <li>Ointments, creams, lotions, and powders</li> <li>Inhalers, nebulizer solutions</li> <li>Liquid medicines <ul> <li>Solutions, suspensions</li> <li>Liquids must be wrapped in a paper towel and placed in a sealed plastic bag before being placed in a EcoReturns container.</li> </ul> </li> </ul></li></ul> | Controlled Substances* including Adderall, Vicodin,<br>Demerol, Hydrocodone, MS Contin, Ambien<br>Any sharps (syringes, lancets, etc.)<br>Home Based Care (HBC) or Durable Medical<br>Equipment (DME) supplies, such as rubbing<br>alcohol. |

\*Controlled substances cannot be collected in the EcoReturns container.

\*\* Contact local solid waste agency for disposal options.

EcoReturns can only accept unused medication from patients or patients' caregivers. Inventory from a pharmacy or other healthcare center is NOT acceptable.

#### Questions? Check with a participating pharmacy or visit iarx.org/ecoreturns

#### Dyersville

Hartig Drug: 563-875-2552 Mercy Family Pharmacy: 563-875-2947 Nightingale Drug: 563-875-7455

Elkader Clayton Drug: 563-245-2530

Independence Hartig Drug: 319-334-7155 Manchester

Brehme Drug: 563-927-3509 Widner Drug: 563-927-4755

Monticello Hartig Drug: 319-465-4906 Nightingale Drug: 319-465-4404

**Strawberry Point** Clayton Drug: 563-933-4762

# **Communicate Your Pain**

Everyone experiences pain. You may have pain due to disease, injury, surgery, or a medical procedure. Most pain can be controlled. Unrelieved pain can lead to problems such as loss of function, sleep problems, and depression. Everyone has the right to have their pain assessed and treated.

Talk with your healthcare provider, nurse, or pharmacist honestly and openly about your pain. Talking about it will help you receive the care you need. They are here for you. Working together to find the best treatment plan for your pain. They will ask you questions to rate your pain on a regular basis, sometimes as often as every hour. Questions may include:

- Where does it hurt?
- When did it start?
- Is it constant or intermittent?
- Is it localized or radiating?
- · What makes it better or worse?
- Does it affect your daily routine? (sleep, concentration, mood)

# Pain Assessment Scale

Each face shows a different amount of pain. Point to the face that shows how much you hurt. This scale helps your healthcare provider, nurse, and pharmacist measure how well the treatments you are receiving for pain are working.

Many people think they should "tough it out". Research shows that unrelieved pain can be harmful to you. Pain can make it hard to do things like get out of bed, walk, get a good night's sleep, or go to work.

### No Pain

O

2

3

4

5

7

8

9

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06

Very minor annoyance; like how a bruise feels

- Minor annoyance
- Annoying enough to be distracted but still able to work, play video games, talk on the phone, go to school, or be with friends
- Can be ignored if you are really involved in work, but still distracting; can still be with friends or talk but you know the pain is there
- Pain cannot be ignored for more than 30 minutes
- 6 Pain cannot be ignored for any length of time. You have the pain all the time.
  - Hard to concentrate, but can still function with some effort. Difficult to talk or watch TV.
  - Activity is severely limited; Can't talk or do anything except think about the pain.
  - Activity is halted. You are unable to perform activities of daily living; unable to concentrate. Cannot talk or shower or watch TV.
- **O** Totally nonfunctional. Pain compares to a broken bone or kidney stone.

# Pain Management Log

| Pain Medication  |  |
|------------------|--|
| Frequency        |  |
| Other Medication |  |

Frequency \_\_\_\_\_

| Date | Time | Pain Location (arm, leg, etc.) | What Makes Pain Worse |
|------|------|--------------------------------|-----------------------|
|      |      |                                |                       |
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|      |      |                                |                       |
|      |      |                                |                       |

# When patient begins to feel pain:

1. Rate pain before medication is given. Give pain medication as directed by provider. Log it.

2. Have patient rate pain using scale one hour after giving medication (to ensure it was effective). Log it.

3. If pain isn't relieved to satisfaction, and medicine is ordered for every hour, give another dose. Log it.

4. If pain is not relieved by second dose it is not to be given again for several hours.

5. Log bowel movements (pain medication can cause constipation).

If medication is not effective or if side effects are distressing, log it and call home care. Quick release pain medication usually works in 30-60 minutes.

| Pain Rate<br>Before Meds | Medication Name | # of<br>Tablets | Pain rate 30<br>mins after meds | Bowel<br>movement |
|--------------------------|-----------------|-----------------|---------------------------------|-------------------|
|                          |                 |                 |                                 |                   |
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|                          |                 |                 |                                 |                   |

# **Infection Prevention**

Infections can spread to anyone. Even common infections can cause serious problems or death. Older adults have a higher risk for infection because their immune system doesn't work as well. Risks may also be higher if you have a chronic illness, poor nutrition, or use certain medications.

### HAND WASHING

- 1. Wet hands with clean, running warm water.
- Lather hands with soap.
   If soap and water aren't available and hands aren't visibly dirty, use alcohol-based (at least 60% alcohol) hand sanitizer.
- Scrub all surfaces of hands for 20 seconds. Rinse well with running water.
- 4. Dry with a paper towel or an air dryer.
- 5. If possible, use paper towel to turn off faucet.

## WASH HANDS

- If visibly dirty.
- After coughing, sneezing, or blowing nose.
- After using bathroom.
- Before and after contact with anyone who is sick, or has a cut or wound.
- After touching animal or animal waste.

# CALL YOUR HEALTHCARE PROVIDER IF YOU EXPERIENCE

- Changes in appetite, mental clarity, energy levels
- Fever or chills
- Frequent, painful urination
- Green/yellow fluid coming from wound
- Nausea, vomiting, or diarrhea
- Rash or red, hot or swollen skin
- Sore throat or cough

### **COUGHS AND SNEEZES**

- Use a tissue to cover cover coughs and sneezes. If you don't have a tissue, use your upper sleeve, not hands. Throw the tissue away, wash your hands well.
- Stay at least 6 feet away from others if you or they are coughing or sneezing.

## **BARRIER PRECAUTIONS**

Wear gloves if likely to touch body substances or mucous membranes (mouth care, bathing, wound care); gown or apron if clothing is likely to be soiled; mask/goggles if likely to be splashed.

### BODY SUBSTANCES (blood, mucus, urine, feces)

- Clean Immediately!
- Treat all body substances as if they could be infected.
- Wear gloves.
- Wipe spills with paper towels, dispose in plastic bag.
- Use more paper towels to clean surface with hot water and soap or detergent, then rinse well.
- Apply a disinfectant. Leave on for 10 minutes or as indicated on bottle then wipe dry.
- Dispose of medical gloves in the plastic bag, seal bag, place in another plastic bag, and dispose.

# FOOD SAFETY

- Wash fruits and vegetables with running water before use.
- Thaw foods in the refrigerator or microwave.
- Cook eggs until yolks and whites are firm.
- Cook fish/whole cuts of meat (not poultry) to 145°F; let rest at least 3 minutes before carving/eating.
- Cook ground meats (except poultry) and egg dishes to 160°F.
- Cook all poultry, casseroles, and leftovers to 165°F.
- Use separate plates and utensils for raw and cooked foods.
- Refrigerate leftovers right away.

### **CONTAMINATED WASTE**

- Dispose of according to local law.
- Wear gloves.
- Flush liquid and semi-liquid body substances (blood, vomit, urine), disinfect toilet.
- Place other contaminated waste (bandages, gloves, and incontinence pads) in a plastic bag.
- Close bag tightly, and place in another bag for disposal.

### **KITCHEN**

- Clean surfaces, stove, and counters after each use.
- Disinfect surfaces touched by raw meat.
- Vacuum or sweep the floor daily; wash it once a week.
- Clean the inside of the refrigerator weekly.
- Use a dishwasher if possible for dishes and utensils. If not, wash in hot, soapy water. Air dry.

### BATHROOM

- Change towels and washcloths daily. Hang if damp to dry before putting with other laundry.
- Use a different sponge to clean tubs, showers and sinks. Start with the cleanest areas, then move to the dirtier ones. If someone in the home is sick, scrub after each use.
- Flush toilets after each use. Disinfect them often. Don't forget to disinfect the handle too.
- Rinse toothbrushes and holder after each use. Store them upright in clean place.
- Clean and/or replace personal items regularly. Never share items that can spread germs (toothbrushes, razors, water glasses, combs, hairbrushes, towels, washcloths).

## **SURFACES**

- Use a disinfectant to clean surfaces.
- You can make your own disinfectant solution by mixing 1 part bleach with 9 parts water. Mix a new solution after 24 hours (it loses strength quickly).
- Wear gloves when using a disinfectant.
- Never mix bleach with other cleaning products, as dangerous fumes may result.
- Store disinfectants/cleaning supplies in a safe place, out of reach of children.

# **Delaware County Provider List**

#### Assisted Living Facilities

| Edgewood Convalescent Home       | 563-928-6461 |
|----------------------------------|--------------|
| Good Neighbor Home+ (Manchester) | 563-927-3907 |
| Lincolnwood (Edgewood)           | 563-928-7173 |
| The Meadows (Manchester)         | 563-927-6467 |

#### Assistive Devices/Durable Medical Equipment

|                                     | •            |
|-------------------------------------|--------------|
| Advantage Home Medical              | 319-465-1003 |
| Activstyle                          | 800-651-6223 |
| American Home Patient (Dubuque)     | 563-556-8118 |
| Cedar Valley Mobility               | 319-291-7210 |
| Critical Signal Technologies, Inc   | 888-557-4462 |
| Finley-Hartig Home Care Store       | 563-588-8707 |
| Iowa Compass                        | 800-779-2001 |
| Iowa Department for the Blind       | 800-362-2587 |
| Long Term Medical Supply            | 563-927-3836 |
| Mercy Home Care Store               | 563-589-8118 |
| Nucara Home Medical                 | 319-287-8087 |
| Tri-State Independent Blind Society | 563-556-8746 |
| Widner Drug Store                   | 563-927-4764 |
|                                     |              |

#### **Caregiver Support**

Family Caregiver Support Program......319-874-6840

#### **Case Management**

Northeast Iowa Area Agency on Aging ...... 319-874-6840

#### **Chore Services**

| ABCM Healthy Living Home Care | 641-456-5636 |
|-------------------------------|--------------|
| Faith & Family Care Inc       | 855-970-6296 |
| Home Instead Senior Care      | 563-585-1409 |

### **Consumer Directed Attendant Care**

#### Individual Providers Iowa Medicaid

| Enterprises             | . 800-338-7909 |
|-------------------------|----------------|
| Faith & Family Care Inc | .855-970-6296  |

## **Department of Human Services**

| Food Assistance - SNAP | 855-944-3663 |
|------------------------|--------------|
| Medicaid Black Hawk Co | 319-291-2441 |

## Dependent Adult Abuse Reporting/Advocacy

Elder Abuse Intervention Program/NEI3A.. 319-874-6840 Iowa Department of Human Services......800-362-2178

### **Financial Counseling**

| CCCS of NE Iowa | L |
|-----------------|---|
|-----------------|---|

#### Home & Vehicle Modification

| Cedar Valley Mobility           | 319-291-7210 |
|---------------------------------|--------------|
| Faith & Family Care Inc         | 855-970-6296 |
| Nucara Home Medical             | 319-287-8087 |
| USDA Rural Development (Tipton) | 563-886-6008 |
| Widner Drug Store               | 563-927-4764 |

#### Home Health Aide: Bathing and Personal Cares

| Above & Beyond Home Health Care   | . 319-465-3059 |
|-----------------------------------|----------------|
| Comfort Care Medicare, Inc        | 319-277-1936   |
| Home Instead Senior Care          | .563-585-1409  |
| Mercy Home Care                   | .563-589-8118  |
| Regional Medical Center Home Care | . 563-927-7303 |
| UnityPoint @ Home                 | .563-583-5833  |

#### Home Delivered Meals

| Mom's Meals                 | 866-204-6111 |
|-----------------------------|--------------|
| NEI3A                       | 800-779-8707 |
| Sister's Home Style Entrees | 515-332-1928 |
| Sun Meadow/GA Food Service  | 866-575-2772 |

#### Homemaker: Light Housekeeping and Errands

| ABCM Healthy Living Home Care     | 641-456-5636   |
|-----------------------------------|----------------|
| Above & Beyond Home Health Care   | . 319-465-3059 |
| Comfort Care Medicare, Inc        | 319-277-1936   |
| Eastern Iowa VNA (Monticello)     | 319-465-6299   |
| Faith & Family Care Inc           | .855-970-6296  |
| Home Instead Senior Care          | .563-585-1409  |
| Regional Medical Center Home Care | . 563-927-7303 |
|                                   |                |

#### **Hospice Services**

| Above & Beyond Hospice   | 319-465-4637 |
|--------------------------|--------------|
| Care Initiatives Hospice | 563-363-8000 |
| Cedar Valley Hospice     | 319-334-6960 |
| Hospice of Dubuque       | 563-582-1220 |
| St. Croix Hospice        | 563-933-2070 |

#### Legal Assistance

| Legal Hotline for Older Iowans800-992-8161 |  |
|--|--|
|--|--|

LifeLong Links<sup>™</sup> is lowa's network of Aging and Disability Resource Centers, whose purpose is to expand and enhance the state's information and referral resources for older adults, adults with disabilities, veterans, and caregivers as they begin to think about and plan for long-term independent living.

| Medicaid Managed C | Care/Iowa Medicaid | Enterprises |
|--------------------|--------------------|-------------|
|--------------------|--------------------|-------------|

| Amerigroup Iowa                | .800-600-4441 |
|--------------------------------|---------------|
| Managed Care Ombudsman Program | .866-236-1430 |
| Member Services                | .800-338-8366 |

#### **Medication Dispensing Machines**

| Philips Lifeline                    | 800-543-3546 |
|-------------------------------------|--------------|
| Senior Health Insurance Information |              |
| Program                             | 800-351-4664 |
| Senior Medicare Patrol              | 800-423-2449 |
| Social Security Administration      |              |
| (Waterloo)                          | 888-456-9554 |

#### Nursing

| ABCM Healthy Living Home Care     | 641-456-5636   |
|-----------------------------------|----------------|
| Above and Beyond Home Health Care | 319-465-3059   |
| Comfort Care Medicare, Inc (CF)   | 319-277-1936   |
| Eastern Iowa VNA (Monticello)     | 319-465-6299   |
| Mercy Home Care+                  | 563-589-8899   |
| Regional Medical Center Home Care | . 563-927-7303 |
| Unity Point at Home+              | 563-583-5833   |

#### **Nursing Facilities**

| Edgewood Convalescent | 563-928-6461 |
|-----------------------|--------------|
| Good Neighbor Home    | 563-927-3907 |

#### **Nutritional Supplements**

| ABCM Healthy Living Home Care | 641-456-5636 |
|-------------------------------|--------------|
| Activstyle                    | 800-651-6223 |
| American Home Patient         | 563-556-8118 |
| Mercy Home Care Store         | 563-589-8118 |
| New Style Medical (Nebraska)  | 888-293-6148 |
| Widner Drug Store             | 563-927-4764 |

#### Personal Emergency Response

| Connect America              | 800-215-4208 |
|------------------------------|--------------|
| Critical Signal Technologies | 888-557-4462 |
| Faith & Family Care, Inc     | 855-970-6296 |
| Philips Lifeline             | 800-543-3546 |

#### Respite

| ABCM Healthy Living Home Care   | 641-456-5636 |
|---------------------------------|--------------|
| Above & Beyond Home Health Care | 319-465-3059 |
| Comfort Care, Inc               | 319-277-1936 |
| Comfort Care Medicare, Inc      | 319-277-1936 |
| Faith & Family Care, Inc        | 855-970-6296 |
|                                 |              |

| Home Instead Senior Care           | 563-585-1409 |
|------------------------------------|--------------|
| Regional Medical Center Home Care. | 563-927-7303 |

#### Transportation

| AmeriHealth Caritas Access2Care | 855-346-9760 |
|---------------------------------|--------------|
| Amerigroup Logisticare          | 844-544-1389 |
| Cozy Van (Waterloo)             | 866-322-9826 |
| United Health Care MTM          | 888-513-1613 |
| RTA                             | 563-588-4592 |
| TMS-Medicaid Traditional        | 866-572-7662 |

#### **Veterans Benefits**

| Veterans Affairs (Waterloo)       | 319-291-2512 |
|-----------------------------------|--------------|
| Veterans Health Clinic (Waterloo) | 319-235-1230 |

Material provided about service providers is intended for information purposes only. Agency staff does not license service providers nor guarantee the quality of service they will provide.



### Lifelong Links 866-468-7887 lifelonglinks.org

Updated 8/2022

# Nondiscrimination Statement

RMC Home Care complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex and does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex. RMC Home Care provides free aids and services to people with disabilities to communicate effectively with us, such as qualified sign language interpreters and written information in other format and free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact Agency Director at 563-927-7303.

If you believe that RMC Home Care has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance in person or by mail, fax, or email to the Agency Director. If you need help filing a grievance, Agency Director is available to help. You can file a civil rights complaint with the US Department of Health and Human Services (HHS), Office for Civil Rights.

| <b>Regional Medical Center</b> | <u>Phone</u>         | Fax          | Email              |
|--------------------------------|----------------------|--------------|--------------------|
| Home Care Director             | 563-927-7303         | 563-927-7444 | RMHC@regmedctr.org |
| PO Box 359                     | TTY 563-927-7326     |              |                    |
| Manchester, IA 52057           | TRS 711/800-735-2943 |              |                    |

| US Department of HHS     | Phone            | Online Complaint Form or Portal                    |
|--------------------------|------------------|--|
| 200 Independence Ave, SW | 800-368-1019     | www.hhs.gov/ocr/office/file/index.html             |
| Rm 509F, HHH Bldg        | TDD 800-537-7697 | https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf |
| Washington, DC 20201     |                  |  |

# **Statement of Patient Privacy Rights**

Home Health Agency Outcome and Assessment Information Set (OASIS). As a home health patient, you have the privacy rights listed below.

- You have the right to know why we need to ask you questions.
  - We are required by law to collect health information to make sure:
    - 1) you get quality healthcare, and
    - 2) payment for Medicare and Medicaid patients is correct.
- You have the right to have your personal healthcare information kept confidential.
- You may be asked to tell us information about yourself so that we will know which home health services will be best for you.
- We keep anything we learn about you confidential. This means, only those who are legally authorized to know, or who have a medical need to know, will see your personal health information.
- You have the right to refuse to answer questions.
- We may need your help in collecting your health information.
- If you choose not to answer, we will fill in the information as best we can.
- You do not have to answer every question to get services.
- You have the right to look at your personal health information.
- We know how important it is that the information we collect about you is correct. If you think we made a mistake, ask us to correct it.
- If you are not satisfied with our response, you can ask the Centers for Medicare & Medicaid Services, the federal Medicare and Medicaid agency, to correct your information.

You can ask the Centers for Medicare & Medicaid Services to see, review, copy, or correct your personal health information which that Federal agency maintains in its HHA OASIS System of Records. See the next page of this Notice for CONTACT INFORMATION. If you want a more detailed description of your privacy rights, see the back of this Notice: PRIVACY ACT STATEMENT - HEALTH CARE RECORDS. This is a Medicaid & Medicare Approved notice.



# **Advanced Directives**

Federal law requires certain healthcare providers, including providers of home health care, to establish policies and procedures for informing clients of their rights to direct their own medical care and to execute advance directives such as Living Wills and Durable Powers of Attorney for Health Care Decisions. Home healthcare providers are required to give written information to each client about state laws concerning the rights of clients to make decisions concerning their medical care, as well as summary of the home care provider's policies respecting the implementation of those rights.

Each client coming under the care of RMC Home Care will be given a copy of the brochure entitled, "Advance Directives for Health Care: Deciding Today About Your Care in the Future." The brochure explains the client's rights under Iowa law to make medical care decisions and to execute a Living Will and Durable Power of Attorney for Health Care Decisions. The policies and procedures of RMC Home Care respecting the implementation of those rights are described below.

### OUR POLICY ON CLIENT SELF-DETERMINATION

RMC Home Care recognizes that every competent adult has the right to control decisions relating to their own medical care, including decisions to have life-prolonging medical or surgical procedures provided, withheld or withdrawn. This right is protected by the United States Constitution and the laws of Iowa. While it is our mission to provide all medically appropriate treatment to our clients, we also recognize that no client should be obligated to endure unwanted or unduly burdensome medical interventions.

lowa law permits competent adults to execute a Living Will and/or Durable Power of Attorney for Health Care Decisions that clearly expresses their wishes pertaining to life-prolonging medical treatment. Each client will be asked in advance of coming under the care of RMC Home Care whether he or she has executed an advance directive, and the client's response will be documented in the client's record. Competent clients, who request, in consultation with their physicians, that life-prolonging medical procedures will be withheld or withdrawn, will have their wishes respected within the limits of the law and the philosophy and policies of RMC Home Care.

When a client is incompetent to make decisions regarding medical treatment, others must do so, but those judgments must be made in accordance with state law and the client's wishes, if they are known. The execution of a Durable Power of Attorney for Health Care Decisions by a client who is still competent will enable the client to select the individual who will make medical decisions in his or her behalf when the client is no longer competent to do so.

# Privacy Act Statement - Healthcare Records

THIS STATEMENT GIVES YOU ADVICE REQUIRED BY LAW (the Privacy Act of 1974). THIS STATEMENT IS NOT A CONSENT FORM. IT WILL NOT BE USED TO RELEASE OR TO USE YOUR HEALTH CARE INFORMATION.

# I. AUTHORITY FOR COLLECTION OF YOUR INFORMATION, INCLUDING YOUR SOCIAL SECURITY NUMBER, AND WHETHER OR NOT YOU ARE REQUIRED TO PROVIDE INFORMATION FOR THIS ASSESSMENT. Sections 1102(a), 1154, 1861(o), 1861(z), 1863, 1864, 1865, 1866, 1871, 1891(b) of the Social Security Act.

Medicare and Medicaid participating home health agencies must do a complete assessment that accurately reflects your current health and includes information that can be used to show your progress toward your health goals. The home health agency must use the ^Outcome and Assessment Information Set] (OASIS) when evaluating your health. To do this, the agency must get information from every patient. This information is used by the Centers for Medicare & Medicaid Services (CMS, the federal Medicare & Medicaid agency) to be sure that the home health agency meets quality standards and gives appropriate health care to its patients. You have the right to refuse to provide information for the assessment to the home health agency. If your information is included in an assessment, it is protected under the federal Privacy Act of 1974 and the ^Home Health Agency Outcome and Assessment Information Set] (HHA OASIS) System of Records. You have the right to see, copy, review, and request correction of your information in the HHA OASIS System of Records.

#### II. PRINCIPAL PURPOSES FOR WHICH YOUR INFORMATION IS INTENDED TO BE USED

The information collected will be entered into the Home Health Agency Outcome and Assessment Information Set (HHA OASIS) System No. 09-70-9002. Your health care information in the HHA OASIS System of Records will be used for the following purposes:

- support litigation involving the Centers for Medicare & Medicaid Services;
- support regulatory, reimbursement, and policy functions performed within the Centers for Medicare & Medicaid Services or by a contractor or consultant;
- study the effectiveness and quality of care provided by those home health agencies;
- survey and certification of Medicare and Medicaid home health agencies;
- provide for development, validation, and refinement of a Medicare prospective payment system;
- enable regulators to provide home health agencies with data for their internal quality improvement activities;
- support research, evaluation, or epidemiological projects related to the prevention of disease or disability, or the restoration or maintenance of health, and for health care payment related projects; and
- support constituent requests made to a Congressional representative.

#### **III. ROUTINE USES**

These "routine uses" specify the circumstances when the Centers for Medicare & Medicaid Services may release your information from the HHA OASIS System of Records without your consent. Each prospective recipient must agree in writing to ensure the continuing confidentiality and security of your information. Disclosures of the information may be to:

- 1. the federal Department of Justice for litigation involving the Centers for Medicare & Medicaid Services;
- 2. contractors or consultants working for the Centers for Medicare & Medicaid Services to assist in the performance of a service related to this system of records and who need to access these records to perform the activity;
- 3. an agency of a State government for purposes of determining, evaluating, and/or assessing cost, effectiveness, and/or quality of health care services provided in the State; for developing and operating Medicaid reimbursement systems; or for the administration of Federal/State home health agency programs within the State;
- another Federal or State agency to contribute to the accuracy of the Centers for Medicare & Medicaid Services' health insurance operations (payment, treatment and coverage) and/or to support State agencies in the evaluations and monitoring of care provided by HHAs;
- 5. Quality improvements Improvement Organizations, to perform Title XI or Title XVIII functions relating to assessing and improving home health agency quality of care;
- 6. an individual or organization for a research, evaluation, or epidemiological project related to the prevention of disease or disability, the restoration or maintenance of health, or payment related projects;
- 7. a congressional office in response to a constituent inquiry made at the written request of the constituent about whom the record is maintained.

#### IV. EFFECT ON YOU, IF YOU DO NOT PROVIDE INFORMATION

The home health agency needs the information contained in the Outcome and Assessment Information Set in order to give you quality care. It is important that the information be correct. Incorrect information could result in payment errors. Incorrect information also could make it hard to be sure that the agency is giving you quality services. If you choose not to provide information, there is no federal requirement for the home health agency to refuse you services.

#### NOTE

This statement may be included in the admission packet for all new home health agency admissions. Home health agencies may request you or your representative to sign this statement to document that this statement was given to you. Your signature is NOT required. If you or your representative sign the statement, the signature merely indicates that you received this statement. You or your representative must be supplied with a copy of this statement.

#### **CONTACT INFORMATION**

If you want to ask the Centers for Medicare & Medicaid Services to see, review, copy, or correct your personal health information that the Federal agency maintains in its HHA OASIS System of Records: Call 800-MEDICARE, toll free, for assistance in contacting the HHA OASIS System Manager. TTY for the hearing/speech impaired: 877-486-2048.

# Service Area

RMC Home Care brings the knowledge and skills of our staff to you, in the comfort of your home.



613 W. Main St. PO Box 359 Manchester, IA 52057

563-927-7303 regmedctr.org/homecare



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