



Qualifying for Home Health:

No, we don't need to wait for an injury or illness to assist. In fact, being proactive can often reduce this risk.



We are often asked, which of our patients would qualify for home health?

1. **Recent fall, or new fear of instability:** we call any *unintended loss of elevation* a fall
2. **Recent hospitalization or ER visit:** could be a sign of deteriorating health or function
3. **Noticeable change in behavior:** could be medication underdosing/overdosing, limited hydration/nutrition, etc
4. **More difficulty with walking or transfers:** important not to wait until the fall/injury--much can be done at this stage
5. **Participating less in activities:** can be even subconscious as the brain is concerned about safety and may limit activities

What is meant by being considered homebound?

1. It needs to be unsafe or a taxing effort to leave home.
2. They ARE allowed to leave for short and infrequent periods (visiting family, church, hairdresser, etc.).
3. Driving status is not a factor--only the safety and effort to leave home.

Check out our weekly podcast hosted by Brian Harmon, PT, MBA and Jo Alch, RN with Joy Care Management.



A show on all things Senior Care with important topics and guests to help improve the health and quality of life of seniors.

Available on YouTube, Facebook and iTunes.

Contact us to inquire about our results and/or how our approach helps meet the needs of your patients and families.