

# Strategies for Efficiency and Burnout Reduction

*For the Home Health Clinician*

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# Scheduling



# Objectives

Learn..

- 1) the very best efficiency strategies for in-home care and charting - with goal of coming home with charting completed
- 1) Best patient care practice - so they'll ask for you back over and over
- 1) Strategies to prevent burnout, maintain a healthy work-life balance

# Scheduling



**your  
HOMECARE  
PATIENT  
cancels**

# Scheduling

- Plan ahead when able
  - Provide availability the Friday prior to the coming week so that the back office can begin filling you up with visits
- Call ahead / place visits on calendar
- To remind patients or NOT to remind patients...
- Stay in control of the conversation
  - Avoid presenting open-ended questions like 'When can I come see you?' or 'Are you a morning person or an afternoon person?'
  - Instead present times you have available, 'I service multiple areas, and am in your area in the morning, would 9 work?'
- [Scheduling 9AM](#)
- Provide a range when scheduling (30 min to 1 hour range)
- Show our schedulers some love and appreciation



# Visit efficiency factors

- Visit length - (the things we can control, and the things we cannot)
  - Routine visits, evals, SOC's
- Chatty and slower-moving patients
  - [Chatty Rose](#)
- Our sweet personalities
- Body position
- Tell them what to expect on DAY 1 - set the precedent
  - Visit length average
  - Our schedules, (i.e that we schedule patients each hour



# Efficiency in charting


- The NUMBER 1 predictor of those get home with charting completed
- Teach your patient on DAY 1 that documentation is a flowing part of the visit.
- Every rest break, while catching up on patient history; Keep it personal
  - Avoid charting for 2 or 3 minutes without communicating with the patient
  - Intermittent eye contact is extremely important especially with electronic charting
- Complete your routine visits either in home, or in car, before heading to next patient
  - Discuss sample charting times per visit type
- Tell them what to expect on DAY 1 - set the precedent




## The Forgetting Curve: Why We Forget So Fast

In the 1880s, psychologist **Hermann Ebbinghaus** discovered something fascinating (and a little scary): our brains forget *most* of what we learn—shockingly fast.

Here's what his research found 📌


 **Within 1 hour:**  
We forget about **50%** of new information.

 **Within 24 hours:**  
More than **70%** is gone—unless we review it.

# Emails / phone calls / ordering equipment

- Do whatever you can in the home, where the info is fresh, and it IS the most pertinent part of the visit
- The evolution of emails, chats
- Get verbal orders while documenting
- Before the day, between or after patients, tie up loose ends



A person wearing a pink winter coat, a blue hat, and black gloves is using a blue sled with metal runners to travel through deep snow in a wooded area. The sled is carrying a patterned bag. The person is standing on the sled, and the snow is piled up around the runners. The background shows bare trees and a clear blue sky.

what your patients are really doing  
when you can't get ahold of them

# Curveballs...

## And how to deal with them

- Last minute cancellations, hospitalizations, etc...
  - Frontload schedule
  - Attempt to pull visits from other days (cross your fingers)
  
- Handle these curveballs on a case to case basis
  - Discuss with supervisor



# Patient care best practice

- Show we care (even on first phone call)
- Respect the environment
- Avoid complaining
- Eye contact
- Be prepared (read chart, etc)
- Don't give 10 exercises at once



# Burnout

The terrible, awful B word



- Definition: a prolonged and negative response to work stress that leaves you feeling physically, mentally and/or emotionally tapped out
- Why are healthcare professionals at greater risk?
- The different chapters of work / life
- My story - redundancy, negativity, boredom took over
  - The gradual onset
  - Am I being a big baby?



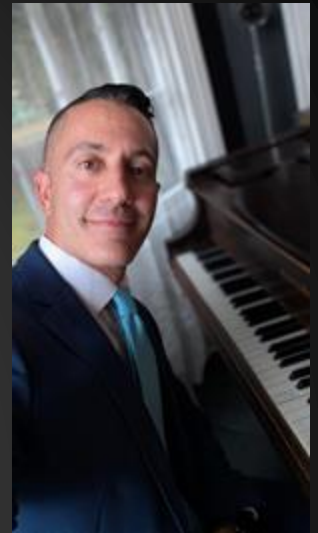
# Burnout

The terrible, awful B word

Steps I took to get through it and thrive again

- education, changed it up
- Side gigs and beyond
- Mindset shift
  - Burnout does not go away on its own

\* We truly need to master strategies for making this job work well NOT ONLY for our patients, but for ourselves!



# Burnout Reduction Strategies

- Mindset Shift -
  - Work perspective compared to other jobs
  - How can this job work well for both my patients and myself?
  - Work on the negativity - it's contagious
- Chart in the home
- Celebrate and utilize the good fruit of home health
  - The very best attributes (the reasons you're still here at this exact moment)



# Burnout Reduction Strategies

- Always keep something to look forward to on the horizon
  - PTO, or smaller day-to-day things
- Slow down for 5-10 minutes! Take a lunch
- Take a walk / exercise / chill
- Set boundaries
- The Value of an admin check-in and a courageous conversation



\*\*\* We can't pour from an empty cup! Let's keep filling ours daily!\*\*\*

Thank You for your time!  
Any questions? Ask me anything!

