

**Home Health Quality Initiative Quality Measures:  
Consumer Language  
(March 20, 2003)**

**This language will be used on the Home Health Compare website on [www.medicare.gov](http://www.medicare.gov).**

## Percentage of patients who get better at getting dressed.

**OASIS Outcome Measure:** Improvement in upper body dressing

WHAT DO THESE GRAPHS TELL YOU?

The percentage of patients who get better at getting dressed.

Higher percentages are better.

WHY IS THIS INFORMATION IMPORTANT?

You need certain physical abilities (motor skills) to get dressed. Your physical abilities can be developed or maintained by managing your symptoms or through physical or occupational therapy. Getting better at dressing yourself may be a sign that you are making progress or meeting the goals of your **care plan**. (link to glossary)

Most people value being able to take care of themselves. In some cases, it may take more time for you to dress yourself than to have someone dress you. But it is important that home health staff and informal caregivers encourage you to do as much as you can for yourself. Your home health staff will evaluate your need for, and teach you how to use any special devices or equipment that you may need to help you increase your ability to perform some activities without the assistance of another person.

If you can get dressed with little help, you may be more independent, feel better about yourself, and stay more active. This can affect your health in a good way. Your ability to dress yourself may help you live independently as long as possible in your own home.

If you stop taking care of yourself, it may mean that your health has gotten worse. In addition, your health and quality of life may get worse in the future. Some patients will lose function in their basic daily activities even though the home health care agency provides good care.

## **Percentage of patients who get better at bathing.**

**OASIS Outcome Measure:** Improvement in bathing

### **WHAT DO THESE GRAPHS TELL YOU?**

The percentage of patients who get better at bathing.

Higher percentages are better.

### **WHY IS THIS INFORMATION IMPORTANT?**

You need certain physical abilities (motor skills) to take a bath (or shower). You may need help from a person or special equipment. Your physical abilities can be developed or maintained by managing your symptoms or through physical or occupational therapy. Getting better at bathing yourself means you may need less assistance or equipment to bathe. This may be a sign that you are making progress or meeting the goals of your **care plan**. (link to glossary)

Being able to bathe yourself is important so you can be more independent, stay clean, feel better about yourself, and stay healthy. It is especially important if you don't have informal caregivers who can help you when your home health caregiver is not there or your home health care ends.

Most people value being able to take care of themselves. In some cases, it may take more time for you to bathe yourself than to have someone bathe you. But, it is important that home health care staff and informal caregivers encourage you to do as much as you can for yourself. Your home health staff will evaluate your need for, and teach you how to use any special devices or equipment that you may need to help you increase your ability to perform some activities without the assistance of another person.

If you can take a bath with little help, you may be more independent, feel better about yourself, and stay more active. This can affect your health in a good way. Your ability to bathe yourself may help you live independently as long as possible in your own home.

If you stop taking care of yourself, it may mean that your health has gotten worse. In addition, your health and quality of life may get worse in the future. Some patients will lose function in their basic daily activities even though the home health care agency provides good care.

**More information is available on the percentage of patients who stay the same (don't get worse) at bathing.** (Link to other bathing measure)

## Percentage of patients who are confused less often.

**OASIS Outcome Measure:** Improvement in confusion frequency

### What do these graphs tell you?

The percentage of patients who are reported to be confused less often.

Higher percentages are better.

### WHAT IS CONFUSION?

Confusion is a loss of understanding of time, place, or person. Some signs of confusion may be problems with your memory, difficulty sleeping, or anxiety. In some cases, confusion may be avoided, improved, or cured. It is not necessarily due to a disease like Alzheimer's. In cases such as Alzheimer's, there may be little the home health agency can do to reduce the confusion the patient is experiencing.

Many temporary conditions can also cause confusion. These can include depression, not eating a healthy diet, infection, a lack of sleep, and some medicines (or combination of medicines). Confusion may also be an early sign of a stroke or other disease affecting the brain (such as dementia or Alzheimer's disease).

### WHY IS THIS INFORMATION IMPORTANT?

If you are confused, you may not be able to take care of yourself. Confusion that goes untreated could affect your health, safety, and ability to stay at home. Being less confused may be a sign that you are making progress or meeting the goals of your **care plan**. (link to glossary)

Home health staff will check you at each visit for signs of confusion. Confusion could mean you are having a reaction to a medicine or further medical problems. If you are confused, your safety may be at risk since there is more of a chance that you will take your medicines incorrectly or fall. It is important to find the cause early and treat it in the right way. If you do get confused, staff should teach you and your informal caregivers how to deal with confusion to limit its effect on the quality of your life. Usually, if you are less confused, you are better able to help take care of yourself. It is also easier for home health staff and informal caregivers to provide care to you if you are less confused.

Some patients will remain confused or experience worsening confusion due to their medical conditions even though the home health care agency provides good care.

## **Percentage of patients who get better at taking their medicines correctly (by mouth).**

**OASIS Outcome Measure:** Improvement in management of oral medications

### **WHAT DO THESE GRAPHS TELL YOU?**

The percentage of patients who get better at taking their medicines correctly. The measure includes only medicines the patient takes by mouth.

Higher percentages are better.

### **Why is this information important?**

Some patients take medicines (by mouth) to control different diseases or conditions. It is important that you take the right medicines, at the right times, and in the right amounts. Medicines include those prescribed by a doctor, and over-the-counter medicines like pain relievers, vitamins, laxatives, and antacids that don't need a prescription.

For medicines to work properly, they need to be taken correctly. Taking too much or too little medicine can keep it from helping you feel better and, in some cases, can make you sicker, make you confused (which could affect your safety), or even cause death. Home health staff can help teach you ways to organize your medicines and take them properly. Getting better at taking your medicines correctly means the home health agency is doing a good job teaching you how to take your medicines.

If you can take your medicines correctly with little help, you may be more independent, feel better about yourself, and stay more active. This can affect your health in a good way. Your ability to take your medicines correctly may help you live independently as long as possible in your own home.

Tell your doctor and home health care staff :

- all the medicines you take, including over-the counter medicines.
- if you are allergic to or have had a bad reaction (like rashes or dizziness) to any medicine in the past.

Some patients will lose function in their basic daily activities even though the home health care agency provides good care.

## **Percentage of patients who get better at walking or moving around.**

**OASIS Outcome Measure:** Improvement in ambulation/locomotion  
WHAT DO THESE GRAPHS TELL YOU?

**Percentage of patients who get better at walking or moving around in a wheelchair safely.**

**Higher percentages are better**

WHY IS THIS INFORMATION IMPORTANT?

Many patients who get home health care are recovering from an injury or illness. They may need help from a person or equipment (like a cane) to walk safely. If they use a wheelchair, they may have difficulty moving around safely. Getting better at walking or moving around in your wheelchair may be a sign that you are making progress or meeting the goals of your **care plan**. (link to glossary)

Most people value being able to take care of themselves. In some cases, it may take more time for you to walk and move around yourself than to have someone do things for you. But, it is important that home health care staff and informal caregivers encourage you to do as much as you can for yourself. Your home health staff will evaluate your need for, and teach you how to use any special devices or equipment that you may need to help you increase your ability to perform some activities without the assistance of another person.

If you can walk with little help, you can be more independent, may feel better about yourself, and may stay more active. This can affect your health in a good way. Your ability to walk and move around yourself may help you live independently as long as possible in your own home.

Some patients will lose function in their basic daily activities even though the home health care agency provides good care.

## **Percentage of patients who get better getting to and from the toilet.**

**OASIS Outcome Measure:** Improvement in toileting

### **WHAT DO THESE GRAPHS TELL YOU?**

The percentage of patients who get better getting to and from the toilet.

Higher percentages are better.

### **WHY IS THIS INFORMATION IMPORTANT?**

You need certain physical abilities (motor skills) to get to and from the toilet. Your physical abilities can be developed or maintained by managing your symptoms or through physical or occupational therapy. Getting better at getting to and from the toilet may be a sign that you are making progress or meeting the goals of your **care plan**. (link to glossary)

Continuing weakness or a new medical problem may make it difficult for you to get to the toilet and require changes to your care plan. For instance, you may need a commode chair or more assistance.

Being able to get to and from the toilet yourself is important so you stay clean, are comfortable, feel better about yourself, and stay healthy. It is especially important if you don't have informal caregivers who can help you when your home health caregiver is not there or your home health care ends.

Most people value being able to take care of themselves. It may take more time for you to get to the toilet by yourself. But, it is important that home health care staff and informal caregivers encourage you to do as much as you can for yourself. Your home health staff will evaluate your need for, and teach you how to use any special devices or equipment that you may need to help you increase your ability to perform some activities without the assistance of another person.

If you can get to and from the toilet with little help, you may be more independent, feel better about yourself, and stay more active. This can affect your health in a good way. Your ability to get to and from the toilet yourself may help you live independently as long as possible in your own home.

If you stop taking care of yourself, it may mean that your health has gotten worse. In addition, your health and quality of life may get worse in the future. Some patients will lose function in their basic daily activities even though the home health care agency provides good care.

## Percentage of patients who get better at getting in and out of bed.

**OASIS Outcome Measure:** Improvement in transferring

### WHAT DO THESE GRAPHS TELL YOU?

The percentage of patients who get better at getting in and out of bed.

Higher percentages are better.

### WHY IS THIS INFORMATION IMPORTANT?

You need certain physical abilities (motor skills) to get in and out of bed. Your physical abilities can be developed or maintained by managing your symptoms or through physical or occupational therapy. Getting better at getting in and out of bed may be a sign that you are making progress or meeting the goals of your **care plan**. (Link to glossary)

Continued weakness or a new medical problem that makes it difficult for you to get in and out of bed may require changes to your care plan. For instance, you may need extra services or assistance.

Being able to get in and out of bed by yourself may be necessary before you can do many other things to care for yourself, like getting dressed or getting to the toilet. It is especially important if you don't have informal caregivers who can help you when your home health caregiver is not there or your home health care ends.

Most people value being able to take care of themselves. It is important that home health care staff and informal caregivers encourage you to do as much as you can for yourself. If you can get in and out of bed with little help, you may be more independent, feel better about yourself, and stay more active. This can affect your health in a good way. Your home health staff will evaluate your need for, and teach you how to use any special devices or equipment that you may need to help you increase your ability to perform some activities without the assistance of another person. Your ability to get in and out of bed yourself may help you live independently as long as possible in your own home.

If you stop taking care of yourself, it may mean that your health has gotten worse. In addition, your health and quality of life may get worse in the future. Some patients will lose function in their basic daily activities even though the home health care agency provides good care.



## **Percentage of patients who have less pain when moving around.**

**OASIS Outcome Measure:** Improvement in pain interfering with activity

### **WHAT DO THESE GRAPHS TELL YOU?**

The percentage of patients who have less pain that affects their ability to perform daily activities, like walking, dressing, or bathing.

Higher percentages are better.

Comparing these percentages is different from the other measures because the percentages may mean different things. Generally, a higher percentage on this measure is better. However, this isn't always true. For example, two home health care agencies could provide the same quality of care and have the same number of patients with pain. However, if one of the home health agencies does a better job checking the patients for pain, that agency could have a lower percentage on this measure. Or, if for personal or cultural reasons, more patients of one of the home health care agencies refuse to take pain medication, that agency's percentage would be lower. In these examples, although the percentage for one home health agency is lower, it does not mean the agency is not providing good care.

This measure is shown to get you to talk to the home health care staff about how they check and manage pain, and to make you aware of how important it is. Pain can be caused by a variety of medical conditions. Checking for pain and pain management are very complex.

This percentage may include some patients who are getting or have been prescribed treatment for their pain, but who refuse pain medicines or choose to take less medicine. They choose to accept a certain level of pain so they can stay more alert.

### **Why is this information important?**

Home health staff should ask if you are having pain at each visit. If you are in pain, you (or someone on your behalf) should tell the staff. Efforts can then be made to find and treat the cause and make you more comfortable. If pain is not treated, you may not be able to perform daily routines, may become depressed, or have an overall poor quality of life. Pain may also be a sign of a new or worsening health problem.

If you have less pain, it may mean that the home health agency is doing a good job in asking about and treating your pain.

**More information is available about pain.** (link to FAQ on pain)

## **Percentage of patients who stay the same or don't get worse at bathing.**

**OASIS Outcome Measure:** Stabilization in bathing

WHAT DO THESE GRAPHS TELL YOU?

The percentage of patients who stay the same or don't get worse at bathing.

Higher percentages are better.

WHY IS THIS INFORMATION IMPORTANT?

You need certain physical abilities (motor skills) to be able to take a bath (or shower). You may need assistance from a person or special equipment, or you may need someone present to assure your safety. Some patients will always need some level of assistance to bathe. A goal for them may be to stay at that level and not increase their need for assistance. Your physical abilities can be developed or maintained by managing your symptoms or through physical or occupational therapy. Being able to still bathe yourself, or not need additional help, may be a sign that you are maintaining your level of ability, but are not progressing.

Being able to bathe yourself is important so you stay clean, feel better about yourself, and stay healthy. It is especially important if you don't have informal caregivers who can help you when your home health caregiver is not there or your home health care ends.

Most people value being able to take care of themselves. In some cases, it may take more time for you to bathe yourself than to have someone bathe you. But, it is important that home health care staff and informal caregivers encourage you to do as much as you can for yourself. Your home health staff will evaluate your need for, and teach you how to use any special devices or equipment that you may need to help you increase your ability to perform some activities without the assistance of another person.

If you can take a bath with little help, you may be more independent, feel better about yourself, and stay more active. This can affect your health in a good way. Your ability to bathe yourself may help you live independently as long as possible in your own home.

If you stop taking care of yourself, it may mean that your health has gotten worse. In addition, your health and quality of life may get worse in the future. Some patients will lose function in their basic daily activities even though the home health care agency provides good care.

**More information is available on the percentage of patients who get better at bathing. (Link to other bathing measure)**

## **Percentage of patients who need urgent, unplanned medical care.**

**OASIS Outcome Measure:** Any emergent care provided

WHAT DO THESE GRAPHS TELL YOU?

The percentage of patients who need urgent, unplanned medical care.

Lower percentages are better.

WHY IS THIS INFORMATION IMPORTANT?

Patients may need to have urgent, unplanned medical care while they are getting home health care because of a sudden downturn in their health or because of an injury. They may need to make an urgent trip to the doctor or emergency room, or a doctor may have to make an urgent house call.

In some instances, the need for unplanned urgent care may not be avoidable even with good home health care. A home health care provider may refer a patient to emergency care when this is the best way to treat the patient's current condition. However, some emergency care may be avoided if the home health staff is doing a good job at checking your health condition to detect problems early. They also need to check how well you are eating, drinking, and taking your medicines, and how safe your home is. Home health staff must coordinate your care. This involves communicating regularly with you, your informal caregivers, your doctor, and anyone else who provides care for you.

## **Percentage of patients who had to be admitted to the hospital.**

**OASIS Outcome Measure:** Acute care hospitalization

WHAT DO THESE GRAPHS TELL YOU?

The percentage of patients who had to be admitted to the hospital.

Lower percentages are better.

WHY IS THIS INFORMATION IMPORTANT?

Patients may need to go into the hospital while they are getting home health care. In some instances, this may not be avoidable even with good home health care. For instance, some illnesses are not curable and, over time, will make your health worse. For some patients, a readmission to the hospital may be a planned part of continuing treatment for their medical conditions.

However, some inpatient hospital care may be avoided if the home health staff is doing a good job at checking your health condition at each visit to detect problems early. They also need to check how well you are eating, drinking, and taking your medicines, and how safe your home is. Home health staff must coordinate your care. This involves communicating regularly with you, your informal caregivers, your doctor, and anyone else who provides care for you.