

Private Duty: Create Patient Care Partnerships to Boost Referrals and Fill Gaps

by: [Sarah Schock](#) (HHL), Jan 25, 2024

Home care companies and certified home health agencies can build partnerships to address patient monitoring to reduce hospitalization and preventable events and improve patient satisfaction.

There is a lot of room for improvement in the relationship between non-medical home care and home health agencies, says Sarah Barker, owner of Connect Forward Training in San Diego, Calif.

“More proactive referrals could be made from both types of agencies to the other,” she explains.

Because home health is a physician-ordered, insurance covered benefit, it only offers the patient intermittent, short visits. Patients often need more care than that, adds Gabrielle Pumpian, chief development officer at Cheer Home Care in San Diego, Calif.

This is where a partnership with a home care agency can be beneficial. Rather than leaving patients to figure out how to address their needs on their own, home health agencies can recommend their home care partner for tasks like making a healthy meal, doing some light housekeeping, running errands or going to appointments, Pumpian says.

Alternatively, home care companies can identify when a patient needs specialized care, and recommend home health.

“Taking a proactive approach to referring to one another not only would lend to crisis prevention, but it would also establish and strengthen business alignment,” Barker says.

This starts with finding the right agencies to connect with.

Connect with local agencies

Partnerships go both ways, so both home health and home care agencies can seek one another out to create a partnership. This not only benefits home care agencies, but home health agencies as well. By referring current patients to receive home care at the same time as home health, home health agencies have an extra eye on patients when they are not around, to identify any issues or decline in condition.

There are several steps home care and home health agencies should take to find the right fit for a partnership, Baker says:

Do your research. For home care agencies, you can identify and research two to three well-established Medicare home health agencies in your area. Look to the ones who have been open for a while, because this could indicate a larger census.

Start this research on CMS.gov and find the 5-star reviews for Medicare home health in the area to connect with, Pumpian recommends.

Create key contacts within the agency. Find the agencies on LinkedIn, follow their business page and look through the staff members who have connected with these accounts. Identify the key individuals and connect with them.

This can also be done by going to health care-focused events to network. Meet with other health care professionals at events, exchange information and schedule meetings with these individuals.

This is where conversations with agency liaisons can really take off.

“Inquire about how you can help them,” Barker recommends. Ask which referral source accounts they are receiving most of their business from and which they are struggling with.

“What we’re looking for here is how together you can leverage existing strong referral partner relationships for each other,” she explains.

Once your foot is in the door, it’s time to explain how each agency’s services can benefit the other.

Determine where gaps exist in your care

When it comes down to it, home health and home care are not competitors, but instead can perfectly complement one another.

Share how your services can align. Once a relationship has been forged, agencies can share with one another what their patients need help with that the other agency type is able to provide.

Sharing a case study can be beneficial here.

“Share stories showing how home care and home health work together serving their patients and your clients,” Baker recommends. This will help the agency to identify current patients they have that may need more care than the agency can offer, which could lead to quick referrals.

A patient can receive home health and home care at the same time. The clinician can alert the caregiver when they identify something the patient needs help with.

Likewise, caregivers can alert the clinician when they see a decline in condition.

Pay attention to activities of daily living. While home health agencies need to look for patient needs outside of healthcare that aren't being met, home care agencies need to look for signs of physical decline.

For example, caregivers can see if any patient's health has declined, or if any are beginning to have increased ambulatory issues. Are any of them hanging onto the sides of furniture or walls as they traverse their homes? Are any of them starting to struggle with swallowing?

“By taking this proactive approach we provide better support to our clients and their families,” Baker says.

By doing this, home care agencies are also uncovering opportunities to feed home health partners, which encourages them to keep the home care agency at the top of mind for home care referrals they need to make, Barker says.

“Home care can do a better job of actively referring to home health by getting out of the mindset that we have to wait for someone to go to the hospital and be discharged with home health,” Baker says.

For example, she says if a home care patient has a fall that doesn't warrant an ER visit, the home care aide can refer the patient to the agency to evaluate if the patient would benefit from physical therapy.