 3. What matters most to the patient?	DOB:
Pneumonia Vaccine: Flu: Pets: Confirmation of Address:	e Health Alliance
Confirmation of Address:	amily Interviews
Confirmation of Address:	Isolation
1. Hospital name: 2. Too 3. What matters most to the patient?	
 3. What matters most to the patient?	
 3. What matters most to the patient?	day's Date:
a. Services provided and not provided by the home health agency (HHA) b. Expect home health agency (HHA) c. Level of care provided by HHA d. Numb 3. Activity Assessment (circle Yes or No):* 1. 1. Is the patient homebound? Y N 2. Patient and caregiver primary language(s)?	
home health agency (HHA) HHA ser c. Level of care provided by HHA d. Numb 3. Activity Assessment (circle Yes or No):* 1. 1. Is the patient homebound? Y N Why?	
 c. Level of care provided by HHA d. Numb 3. Activity Assessment (circle Yes or No):* Is the patient homebound? Y N Why? Patient and caregiver primary language(s)? Caregiver status: Is the care needs understood by the patient and/or caregiver? Does the patient serve as a caregiver to someone Is this caregiver capable of performing the necessary elements of care. What is the availability of the caregiver's time? Caregiver Name: Phone: Transportation: Are there any concerns regarding the patient's ability to to 5. Medication Management: Focus on medication education between hospira. Who will pick up new medications? b. From which pharmacy?	ctations the patient and family have of
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 Is the patient homebound? Y N Why?	ber of visits and type of visits anticipated
 Patient and caregiver primary language(s)?	
 3. Caregiver status: a. Is the caregiver present while this assessment is being conducted? b. Are the care needs understood by the patient and/or caregiver? c. Does the patient serve as a caregiver to someone d. Is this caregiver capable of performing the necessary elements of ca e. What is the availability of the caregiver's time? f. Caregiver Name: Phone: 4. Transportation: Are there any concerns regarding the patient's ability to t 5. Medication Management: Focus on medication education between hospia a. Who will pick up new medications?	
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 f. Caregiver Name: Phone: 4. Transportation: Are there any concerns regarding the patient's ability to t 5. Medication Management: Focus on medication education between hospitalizations (a) Who will pick up new medications?	are? Y N
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3. Primary care physician name:	Ν
lospitalizations in past 12 months:	Ν
	Last MD visit:
ER visits in past 12 months:	Scheduled new MD visit:
AISON NAME:	MD to follow: