



Search this site

- home
- quality & patient safety
- human resources
- strategic initiatives
- organizational excellence
- departments

Health Quest Home Care: Changing Patients Lives One Home at a Time

When asked what prompted her decision to move from her role as Administrative Nursing Supervisor at VBMC to home care, Donna Fisher, RN, MBA, the new Director of Patient Services at Health Quest Home Care (HHC), replied in two words: “My mother”.

Three years ago, Donna learned that her mother, who suffered from dementia, could no longer care for herself at home. As a highly skilled nurse, she thought it would be easy to assume her mother’s care, particularly with a support system in place.

“I figured I’d be there for her on my days off, and when I worked a 12-hour shift, my kids would check in regularly with her during the day, make sure she took her meds and had her meals,” Donna said. “It quickly became clear, however, that my mother couldn’t be left alone even for a few minutes. I also found myself drowning in paperwork, dealing with Medicare, supplemental coverage, and the Office of the Aging to understand what other types of assistance was available. I realized a huge gap existed between what a family imagines caring for a loved one to be like and the reality of doing so.”

So when the opportunity to lead HHC arose, Donna leaped at the chance.

“In the hospital, we sometimes worried about a discharged patient, particularly if their primary caregiver was also elderly and suffered from health problems of their own. I knew what the outcomes were from the perspective of the hospital care we provided. Now I get to focus on the outcomes for patients receiving quality care at home,” said Donna.

Based on 2016 numbers, HHC’s 53 staff certainly does deliver extraordinary outcomes, conducting 32, 982 home visits for 2,025 patients throughout Dutchess County, including 18,700 nursing visits. The team includes 13 home nurses, four physical therapists, three occupational therapists, four home health aides, two case managers, a clinical educator, a finance manager and numerous

office staffers who handle intake calls, process insurance and help coordinate care when the nursing team is out in the field.

“It’s a completely different kind of nursing,” says Case Manager Beth Lamorgese, RN, a 40-year-nursing veteran who has worked at HHC for eight years. “Visiting a patient in their own environment allows you to identify issues that you’d never be able to in a hospital or office setting. The patient feels more relaxed and open, allowing you to directly observe the care challenges the patient faces and devise realistic solutions.”

Beth particularly enjoys handling wound care patients at home, because she can devote more time to them than she could in a clinical setting and help educate both patients and primary caregivers how best to deal with wounds between visits. She also spends lots of time during first visits sorting through patients’ various medications with them, making sure that the dosages they are taking match not only what’s on the bottle but also conform to the instructions left by their doctors.

“If a patient’s sodium intake is limited to 2000 mg a day, and you open the cupboard to find that the soup the patient planned to eat for lunch exceeds that allotment, you can really make a lasting impact,” Beth says.

Providing daily nursing and therapeutic support and teaching patients in a home setting how to manage their individual challenges makes all the difference between enabling patients to stay in their own homes or placement in assisted living or a nursing facility.