WHO WE ARE

Always Compassionate Home Care, a Licensed Home Care Service Agency (LHCSA), is changing the way we view and provide home-based care. Our progressive approach starts with an exceptional team of professionals who pride themselves on their compassion and dedication. We fully leverage state-of-the-art technology to dramatically improve our operations, employee training and communications capabilities, which enhance each patient's quality of life. Through that dual focus, we've become one of the most innovative agencies in New York State.

THE ACHC DIFFERENCE

Excellent patient care is always our primary mission. Led by clinicians with more than 35 years of experience in the home care field, our full continuum of care services - from private duty nursing through home health services duty – allows patients to stay secure and independent in the homes and communities they love. We believe in always providing the highest quality of care through commitment, support and compassion to our patients and their families.

FOCUS ON TECHNOLOGY

Our pursuit of innovation starts with our operating platform, which runs through virtual, secure, cloud-based programs, providing the ability for real-time communication with our care partners, patients and families. Our capabilities allow our caregivers to fully work digitally, enabling instant access to patient data by ALL stakeholders, instantly.

RESPIRATORY THERAPY SERVICES

The ACHC respiratory therapy services department is led by a Registered Respiratory Therapist with over 20 years of experience. All our nurses are provided in-person training sessions, support and follow up. The ACHC 12-hour training program distinguishes itself as one of the more comprehensive in the industry.

ACHC believes in the quality and outcomes of services, as such all cases are opened by the Department's Director and personally followed as the case moves along the spectrum of care.

Case Study - Respiratory Therapy from Nursing Home to Home Care

74-year-old female with comorbidity. Primary Diagnosis of Heart Failure, Atrial Fibrillation, COPD, Type II Diabetes and Ventilator dependence. Discharged from Nursing Home to home on LTV 900 vent. Path towards transitioning patient and services towards being safe in the community: At moment of discharge:

⇒ RN/LPN 20 hours/day x 8 weeks

After 8 weeks of discharge:

⇒ LPN 16 hrs/day x 3 weeks

The following 3 weeks:

- ⇒ LPN 10 hrs/day x 3 weeks weaned off ventilator during the day with guidance of RT
- ⇒ HHA 10 hrs/day x 5 weeks

Results -stabilized state:

- ⇒ RN/LPN 2 -3 visits per week
- \Rightarrow HHA 6 hrs/day
- ⇒ Patient was able to take care of themselves.

