



**Home  
Health**

# She Wants To Go Home

Ms. Salha suffers from a stroke & hemiplegia on the left side received hospitalization.

She has a complicated medical history (DM, CAD, 2 coronary stents placed, HTN, Dyslipidemia, Schizophrenia, Major depressive disorder, Neuropathic pain, COPD)

She takes over nine medications.

Despite the stability of the situation still **needing long term nursing help, medication management & physiotherapy**

## He Wants To Go Home

Mr. Ahmed 67 known DM , HTN with severe congestive heart failure for 10 years ago . Suddenly he developed sharp decline in his heart ejection fraction admitted it was decided that the situation is very advanced .. There is no possibility of cure ....

# OUTLINE

- ✓ **Why HMC is needed?**
- ✓ **Definition of HMC**
- ✓ **Goals & Objectives**
- ✓ **Procedures & treatments**
- ✓ **Types of Staff providing care**
- ✓ **Statistics in 2014**
- ✓ **How to measure outcomes of HHC ?**
- ✓ **New steps in HMC**
- ✓ **Next Step**

# WHY HHC IS NEEDED?

## Demographical Changes :

- More Elderly Population
- Diseases that occur more often in elderly patients
- Diseases increase concomitantly as the population ages
- Growing elderly population: aged over 65 projected to increase to 12% in 2030 according to

## Need More Home Health care

# WHY HHC IS NEEDED

## Epidemiological Changes:

- Less Acute/Infectious Diseases
- More Chronic Diseases
- Medical advances allow better management of chronic and incurable diseases.
- 30% of Disabled Need HHC

## Need More Home Health care

Sharon et al. Home Care JAMA 2003;290:1203--7

# WHY HHC IS NEEDED?

## Cost Effectiveness :

- Growing Demand for Higher Quality Life.
- More widespread availability of high-technology services has resulted in increased hospital cost.
- Earlier discharge of hospitalized patients, reducing the length of hospital stays & Need to free occupied beds

## Need More Home Health care

Sharon et al. Home Care JAMA 2003;290:1203--7

# WHY HHC IS NEEDED?

Patients Choose to Receive Care in Home

.....> **Need More Home Health care**



WHAT IS HOME CARE (HC)?

DOES IT DIFFER FROM HOME HEALTHCARE  
(HHC)?

**HOME CARE** refers to any type of care (medical or non--medical) that is provided for the client in their home (companionship/ homemaking services and personal care services)

**“Home Health care”** refers to the provision of skilled nursing care and other care such as speech, physical or respiratory therapy

## **WHAT DO WE MEAN BY “HOME HEALTH CARE”**

Any Therapeutic, Diagnostic or Social support service provided in at an individual's Home

Sharon et al. Home Care. JAMA 2003;290:1203--

# Home Health Care

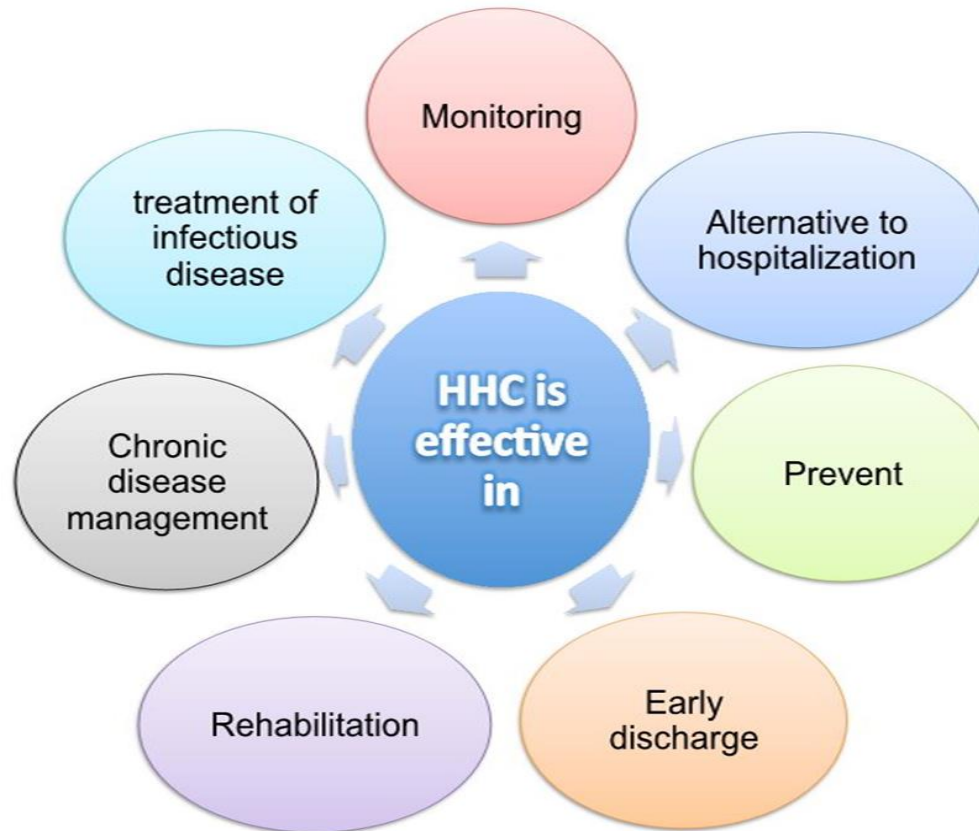
HHC Improve Health Care ; Is Their Any Evidence ?

# Home Health Care: Leads to Improve Medical Care

## Clinical outcome majors:

- Studies suggest that home visits can lead to improved medical care through the discovery of unmet health care needs.
- One study found that home assessment of elderly patients with relatively good health status and function resulted in the detection of an average of four new medical problems and up to eight new intervention recommendations per patient.
- Study showed that use of the specialist home care nurses lead to 65% reduction in hospitalization of patients .

Smigelski CW, Hungate B, Boling PA. Transitional model of care: Bridging inpatient to outpatient care [abstract P518]. J Am Geriatr Soc 2004;52:4(suppl):S194. Susan Louisa Montauk. Home Health Care. American Academy of Family Physicians 1998 Nov 1;58(7).



Wolter JM, Cagney RA, McCormack JG. A randomized trial of home vs hospital intravenous antibiotic therapy in adults with infectious diseases. *J Infect.* 2004;48:263-268.

Aeshah Alsagheir . 2016

# Home Health Care : Lead To Improve Medical Care

## Cost Effectiveness :

An Economic Evaluation of Home Care Results From RCT showed that Using home care to reduce hospital stays improved the health outcomes without significantly increasing social costs.

European study showed that HHC lead to 38% decrease in cost

Dougherty, Geoffrey E. MD, MSc, FRCP(C) \*; Soderstrom, Lee PhD +; Schiffrin, Alicia MD. Medical Care. 36(4): 586-598, April 1998.  
Hernandez C, Casas A, Escarrabill J, et al.

Dr. Al-Dahi study in 2007 showed 65% in secondary care & 56%in long stay rehabilitation care cost by using HHC.

Home hospitalisation of exacerbated chronic obstructive pulmonary disease patients. Eur Respir J 2003;21(1):58-67.

# HMC VISION

Provide HMC services for all regions & provinces in SA according to the international quality standards



# HMC MISSION

Provide the best types of constant & comprehensive health care for the patient at his home, within the framework of Islamic values & traditions of the society using the latest technologies

# HOME MEDICAL CARE



## **GOALS and OBJECTIVES**

- Enhance patient's quality of life
- ↓the need for unnecessary & prolonged hospitalization
- Prevent readmission to the hospital & ER visits.
- Support patient to be more independent at home.
- Provide equipment & consumables to patient family

## GOALS AND OBJECTIVES

- Promote healthy lifestyle & provide health education to patients & families.
- Ensure safety while taking medication at home.
- Improve patient compliance to their medications.
- Check appropriateness of chronic medications

# STEPS TO HOME MEDICAL CARE

## Referral

- From the Primary physician in the hospital

## Assessment team

- Patient Assessment before discharge
- Assessment of patient home environment

## Acceptance

- Providing patient with needed equipment
- Training the care giver

## Care Plan

- Patient care plan
- Schedule 1<sup>st</sup> visit

# CONDITIONS WHICH BENEFITED FROM HHC

- BED SORES
- IMMOBILITY
- NASOGASTRIC TUBE RELATED COMPLICATIONS
- CHEST SECRETIONS RELATED COMPLICATIONS
- FOLEYS CATHETER RELATED COMPLICATIONS
- GASTROSTOMY TUBE CARE
- SUPRAPUBIC CATHETER CARE

<b>Type of diseases &amp; medical conditions benefiting from the HMC service in 4<sup>th</sup> quarter 2015</b>		<b>%</b>
<b>Aging accompanied by organic disease</b>		<b>74%</b>
<b>Chronic diseases (Hypertension &amp; heart diseases) &amp; its complications</b>		<b>19%</b>
<b>Diabetes and its complications</b>		<b>15%</b>
<b>Stroke and paralysis</b>		<b>11%</b>
<b>Wounds - ulcers and diabetic foot</b>		<b>8%</b>
<b>Chronic respiratory disease</b>		<b>7%</b>
<b>Muscular and Skeletal diseases</b>		<b>5%</b>
<b>Urology</b>		<b>3%</b>
<b>Psychological diseases</b>		<b>3%</b>
<b>Neurological diseases</b>		<b>3%</b>
<b>Cancer</b>		<b>2%</b>
<b>Gastroenterology</b>		<b>1%</b>
<b>Diseases of the blood and immune system</b>		<b>1%</b>
<b>Infectious diseases</b>		<b>0.20%</b>
<b>Other diseases</b>		<b>3%</b>



# KSUMC-HHC Program





# KSUMC-HHC

3 years in the service.

HHC Unit location – 2<sup>nd</sup>  
floor, OPD building

Reports to Medical  
Admin. office



# HHC Unit

- Head of the Unit/administration
- Office development/case manager
- Physicians
- Nursing staff
- Physiotherapists
- Other supporting services: SW, Dietician

# HHC statistics 2016

- Total of enrolled patients: > 220
- Number of HHC visit/2016: > 2000
- Died, denied service, and discharged: 48
- Number of urgent visits : 70

# HHC Services

- HHC serves all KSU staff and their dependents in Riyadh City.
- Received referrals from Inpatient, OPD and from the community.
- Integrated with eSiHi system



# Home Health Care

## Assessment Care Team:

A- Physician ( Team leader )

B- Nurse

C- Social worker

# OTHER TEAM MEMBERS

- Physiotherapy
- Dietician
- Respiratory therapist
- Family caregiver

# Two HHC Teams going daily to the field.







# Services provided by HHC

- **Medical:** Chronic Disease Management: DM,HTN,DLD, BPSD, Ostop.,PD, Fragility
- **Pain** management
- **Wound Care:** Debridement, dressing, wound treatment.
- **Procedures:** NGT, Foleys cath, pot-op care
- **Polypharmacy** management



# HHC services

- **ED admission.**
- **Laboratory investigations:** Sampling and transfer
- **Medication delivery**
- **Equipments & Personal supply:** Chairs, beds, mattress, CPAP, O2 nebs, personal care materials

# How frequent

- Depends on the patient's condition.
- Routine Average of 5 patients per round (Am/pm)
- Urgent call visit.
- Physician phone consultations.



# Eligible patients for HHC

- Post Cerebral Vascular Accident condition care
- Chronic Neurological Disorders (Parkinson, Alzheimer, Multiple Sclerosis and Amyotrophic lateral sclerosis etc.)
- Geriatric patients -
- Chronic Wound monitoring (bed sores, leg ulcers and diabetic foot)
- Post-accident Rehabilitation
- Diabetes Mellitus care
- Enteral tube feeding
- Foley catheter insertion and removal
- Super-pubic Catheter Care and management.
- Stoma (Tracheostomy, colostomy and any stoma) care.
- Oxygen Therapy and Nebulizer.

# PATIENT & ASSESSMENT

- ✓ In the hospital upon referral Patient is done
- ✓ Medical assessment
- ✓ Socio-economic assessment
- ✓ Caregiver assessment
- ✓ Environmental assessment

# How to access the HHC service

- Esihi Referral
- Submitting KSU staff evidence
- Medial report
- Consent signature
- Nursing acuity level submission
- NOK contacts/Home location

# **HMC Services started from hospitals**

## **Criteria for acceptance**

1. Referral from the physician in the hospital
2. Coverage area ??
3. Stable medical condition
4. Approval of home owner
5. Appropriate home environment
6. Capable care giver



# Home Health Care

## Patient Assessment

Patient evaluation in the hospital prior to discharge to ascertain that HHC can offer the services & medical equipment needed by the patient in the home situation.

Have a patient management plan in place, ensuring continuation of medical services



# Home Health Care

## Patient Assessment

- Patient assessment is a **comprehensive** process which is an **integral part** of managing patient care
- Patient assessment is an ongoing process and is **vital** to monitor **progress** in the various aspects of patient care



# Home Health Care

## Patient Assessment

- Current health condition & patient medical Hx
- **Professional services** needed for **Optimal Outcome** for the care in a home environment
- Determine if the **medical equipment** available will be adequate for the **Safe & Effective Rx**

# Home Health Care

## Hospital Assessment:

- State of consciousness
- **Medication** in use is noted.
- Diet/feeding requirements
- Ulcers/surgical incisions and proposed care
- Skin status



# Home Health Care

## Hospital Assessment:

- After physical assessment of the patient, may decide to incorporate other medical services in the patient's care plan such as:
  - Physiotherapy
  - Respiratory therapy
  - Dietician



# Home Health Care

## Hospital Assessment:

- Determining the discharge date
- Scheduled specialty **clinic appointments**
- Discuss procedures to follow upon discharge of patient **until first home visit**



# Home Health Care

## Assessment: Activities of Daily Living (ADL's)

- Assessment tool used to determine patient's ability to perform activities of daily living



# Home Health Care

## Basic ADLS: Self Care

- Personal Hygiene
- Dressing and undressing
- Eating
- Transferring from bed to chair





# Home Health Care

## ➤ **Assessment: Instrument ADL's**

Not necessary for fundamentals functioning it allows the individual to live independently in a community



# Home Health Care

## ADLS: Instrument

- Doing light housework
- Preparing meals
- Taking medication
- Shopping
- Use of telephone
- Management of money



# Home Health Care

## Assessment: Socio-Economic

- Total number of family members sharing the home
- Total rooms in the home
- Equipment available to ensure good patient care
- Financial Status (is the family head employed)

## Assessment of: Care Giver

- Educational status
- The relationship between the patient & caregiver - relative or contract
- Time available for patient care
- Previous experience in patient care

**Assessment of caregivers needs for education**



# Home Health Care

## Home Assessment

# Home Health Care

## Assessment: Home

- Area of patient's room
- Is patient's room shared
- Type of care given to the patient
- Safe storage of medication

## Assessment: Home

- Physical environment must be evaluated for **Safety** and suitability:
  - ✓ Free of fire
  - ✓ Health, and safety hazards
  - ✓ Adequate heating cooling, and ventilation
  - ✓ Adequate electrical service
  - ✓ Provide patient access and mobility & storage facilities.

## Assessment: Home & Environment

### ➤ Infection Control:

- General hygiene and hand washing
- Correct disposal of sharps
- Correct handling of supplements for feeding regime





# Home Health Care

## Assessment: Home & Environment

### ➤ Infection Control:

- Correct disposal of disposable supplies
- Correct handling of Catheter/ NGT/Peg tube
- Correct of suction apparatus
- Use of suction catheters



# Home Health Care

## Assessment: Constructing Care Plan

- Provides a written means of planning patient care based upon the diagnosis of the patient
- Enables provision of a holistic approach
- It serves as a means to document change of the patient's condition

# Home Medical Care

**What are the Services Provided By Home Medical Care ?**

# PROCEDURES & TREATMENTS

Including but not limited to

- Wound Care and Dressing
- Nursing CARE
- Chest Physiotherapy
- Medication management
- Indwelling urinary catheter insertion & care
- Ostomy And Ileostomy care
- Insertion of nasogastric tube , care and feeding
- PEG care, feeding



# Home Health Care

## Outcomes

4 major outcomes measurement in which HHC agencies must demonstrate ability to document success:

- 😊 Cost
- 😊 Clinical
- 😊 Functional status
- 😊 Patient satisfaction

**Moran NY. Malone MP . Utilizing patient satisfaction to meet the challenges of managed health care . Home health outcomes and resource utilization : integrating today's critical priorities.1997.p.1---19.**

## **Comparison between home health care and hospital services in elder population: cost-effectiveness.**

**Abdulaziz A. Alodhayani\***

Department of Family and Community Medicine, College of Medicine, King Saud University, Riyadh, Saudi Arabia

### **Abstract**

The services available in the home for the elderly patients suffering from the injured or diseases are defined as Home Health Care (HHC). This service is more convenient and less expensive to the elder population. Most of the subjects who were >65 years are not supportive towards the hospital based services. However, in the hospital care, the complete information of the care taken towards the patients will be documented. Therefore, the main concept of this literature was to compare between HHC services with the hospital care services for the coziness in the elderly population. The elder population in Saudi Arabia has been increasing rapidly and there are no special, private or personal services. Only the hospital based services are provided for care taking in elder population. This review recommends the HHC services in the Saudi Arabia region in both the private and non-private sector (government/public).

**Keywords:** Home health care, Hospital care, Patient satisfaction, Quality care.

*Accepted on October 7, 2016*

 **Study shows that the client reported high level of satisfaction for the element of:**

- Respect
- Attention to concerns
- Consistency
- Helpfulness
- Dependability of staff
- Feeling safe
- Staff knowledge of health problem

Hamadi AL Refai. Client's Characteristics and Satisfaction Towards Services Provided by The Home health Care Center In AL  
Madina AL Munwra.2008

# HOME MEDICAL CARE

## Future direction of HMC

### The face of HHC will change

- Telemedicine- RAHA@KSU
- Electronic Medical Records-Remote access.
- Respiratory Home Care and Home hemodialysis
- Specialized HHC: Palliative and Post-OP patients





**Thank You**