

Home Medical Care Decreases Patient Hospitalization Rate and Emergency Department Rate, Experience of Yonghe Cardinal Tien Hospital

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Historical Development



1959, A group of ICM sisters from Belgium set up a dispensary in Taipei City.



1961, The Saint Joseph Hospital was inaugurated.



1981, The Saint Joseph Hospital became the Cardinal Tien Hospital Yonghe Branch.



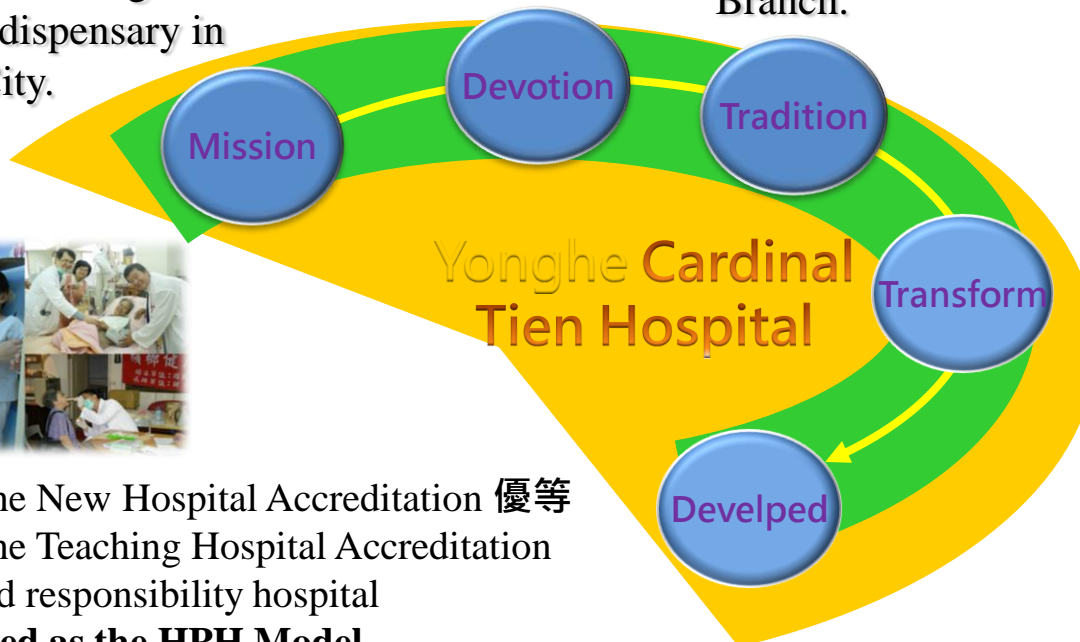
- 1996, Taipei County Ai-Der Care Center was open
- More than 6 long term care centers were established and became a network since 1998



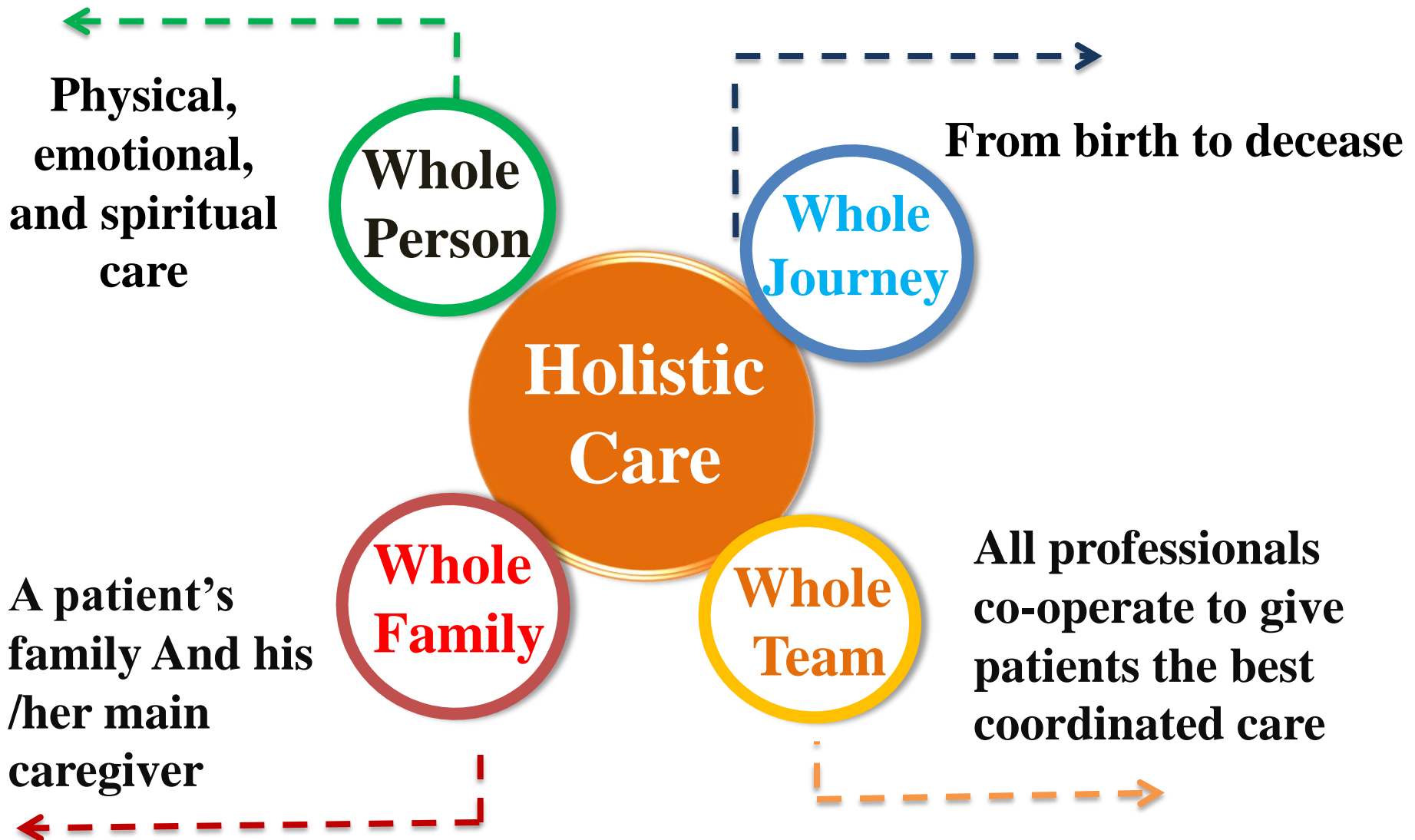
- 2007, the new inpatient building was inaugurated
- 2011, preschool and day care center were opened
- 2012, cancer committee started to work for better cancer treatment
- 2013, health promotion center was opened
- 2016, Cardiac catheterization center was opened



- Pass The New Hospital Accreditation 優等
- Pass The Teaching Hospital Accreditation
- First aid responsibility hospital
- Awarded as the HPH Model



Four Principles of Holistic Care



Our System

*** Include 5 long-term care institutions**



1998 New Taipei City
Ai-Wei Mercy home
for disabled



2001 Catholic St.
Joseph Dementia Old
Man Conservation
Center



Yonghe Cardinal
Tien Hospital



2013 Taipei city
Da-long Senior
Home



Taipei City, the old
man care center



Taipei City Zhu
Lun elderly
apartment

Participation in Health Promotion

2006



Membership of WHO Health Promotion Hospitals

2012



Obtained Model Award in the 5th Health Promoting Hospital Model Selection held by Taiwan Society of Health Promoting Hospitals, 2012.

2014



In 2014 we got the international greatest award –ENSH-GLOBAL GOLD FORUM in Barcelona, Spain.

2014



Contribution Award of Health Promotion Hospitals by HPA, 2014.

2015



Participation in the 2013-2015 Taiwan WHO HPH Recognition Project, Control Group, and obtained an award of 『Gold level』

2017



Award of Health Hospitals 『Excellent level』 by HPA, 2017.

Outline

Introduction

Purpose

Methods

Results

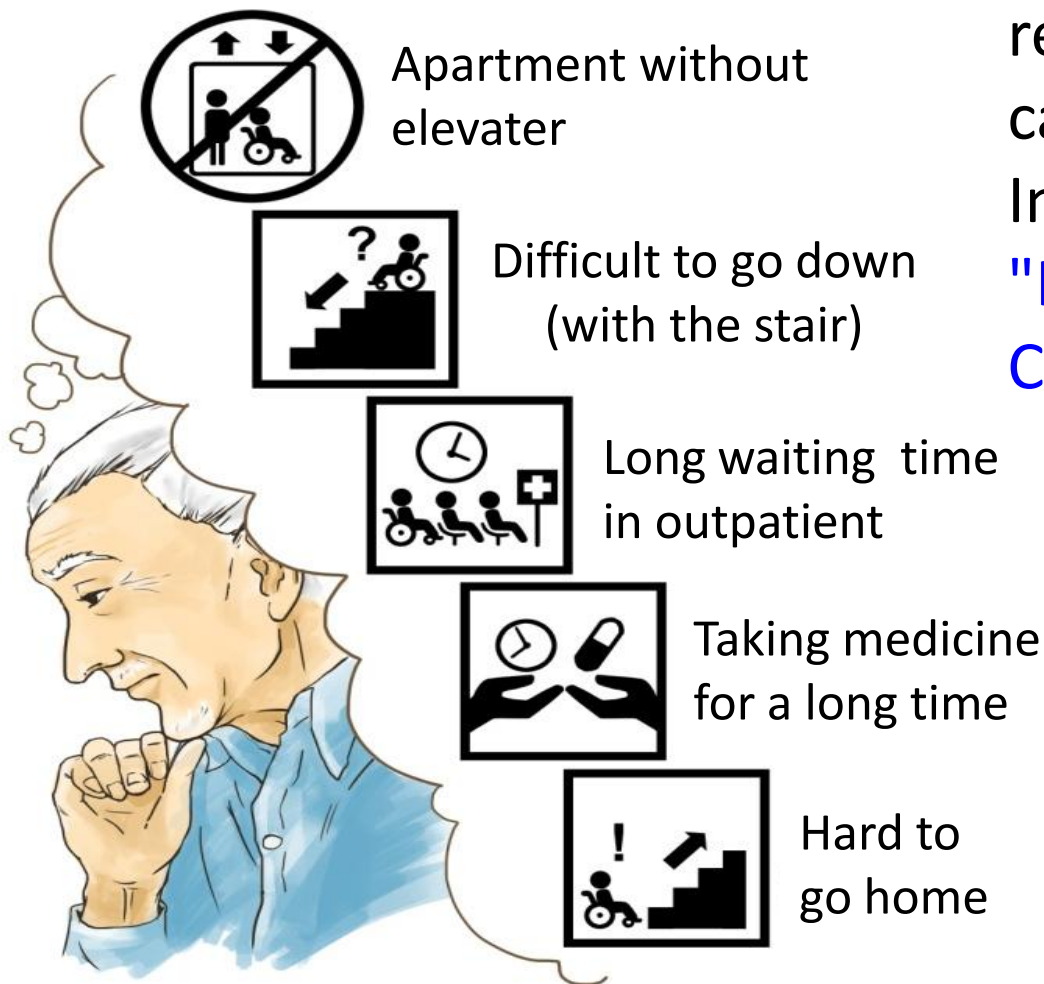
Conclusion

Introduction

- At the end of March in 2018, the rate of Taiwan's population aged 65 had reached 14.05%, Taiwan officially entered the "Aged Society".
- A home nursing care statistical report in January 2017 revealed that among its 228 cases, 65.7% lived in apartment units higher than the second floor, which imposes difficulties such as being carried down the stairs, scheduling difficulties with the disabled shuttle services, or simply unable to leave their homes for outpatient care etc.

Purpose

In order to help patient receive necessary medical care, we participated Health Insurance Department's **"Integrated Home Medical Care Program"**.



Integrated Home Medical Care Program

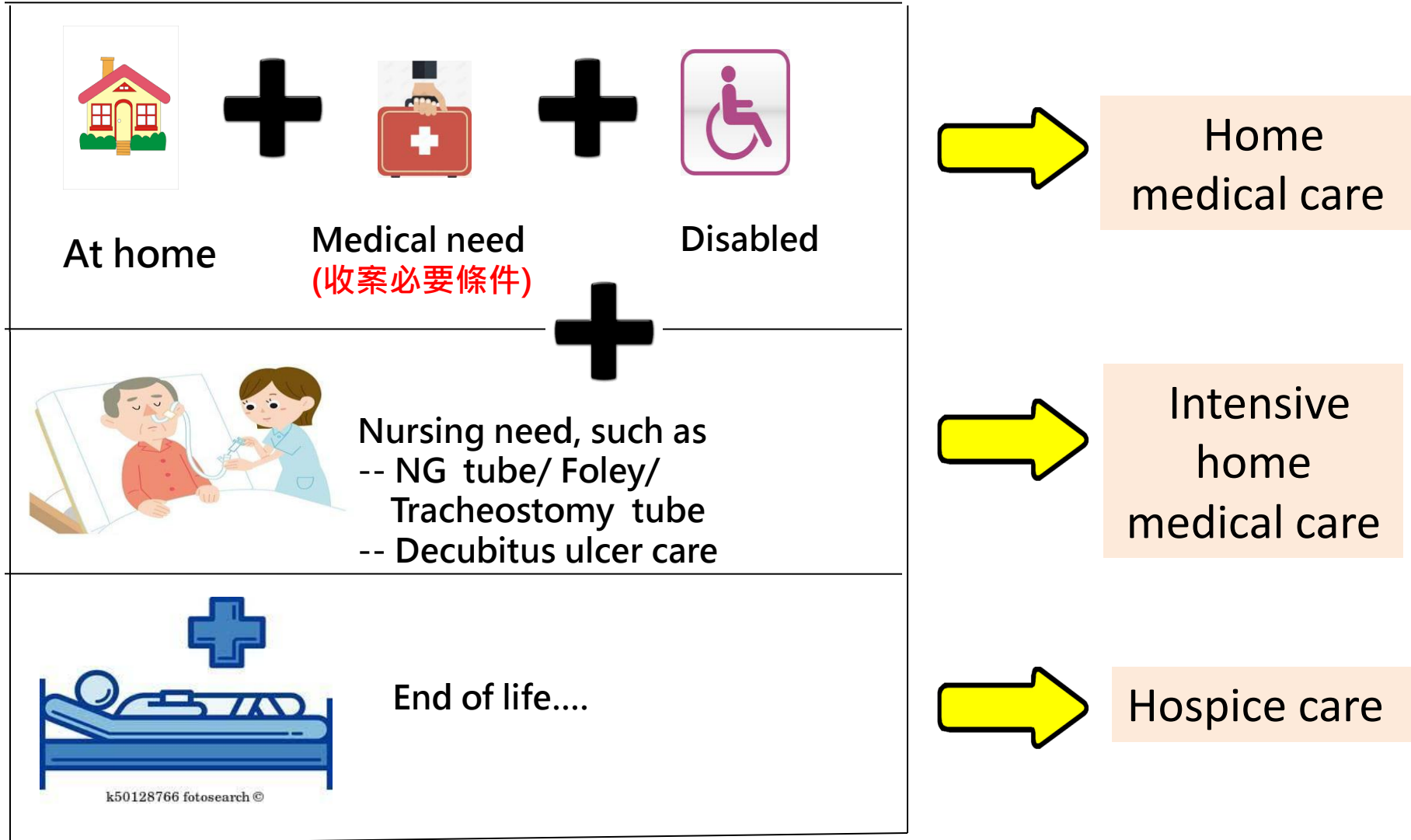


Methods

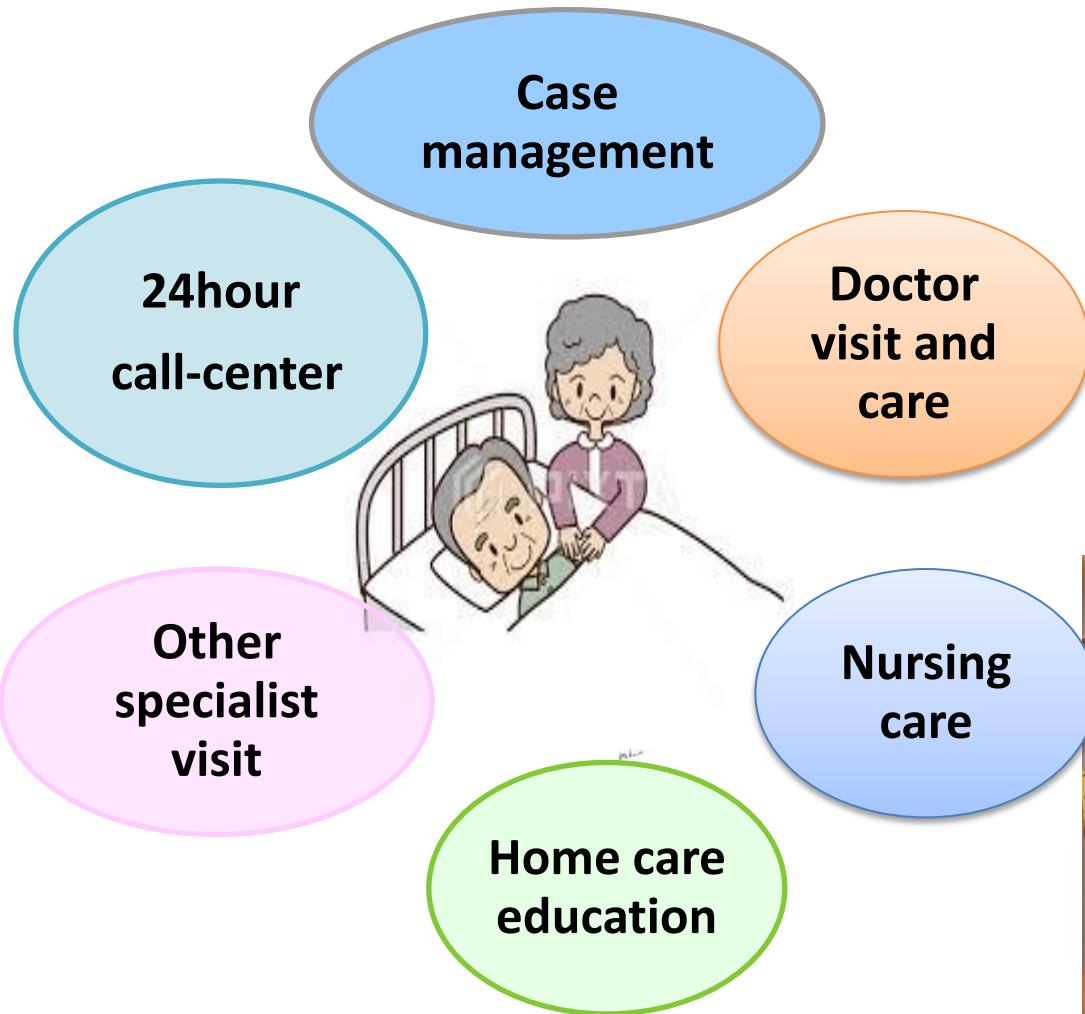
- We started "Integrated Home Medical Care Program" since 2017, for the **disable cases with clear medical care demand** and provided a series of continuous and whole-person medical care including
 - Home medical care
 - Intensive home medical care
 - Hospice care



Methods



Methods



Patient-centered Home Medical Care



Methods

Doctor



Physical therapist



Nutritionist



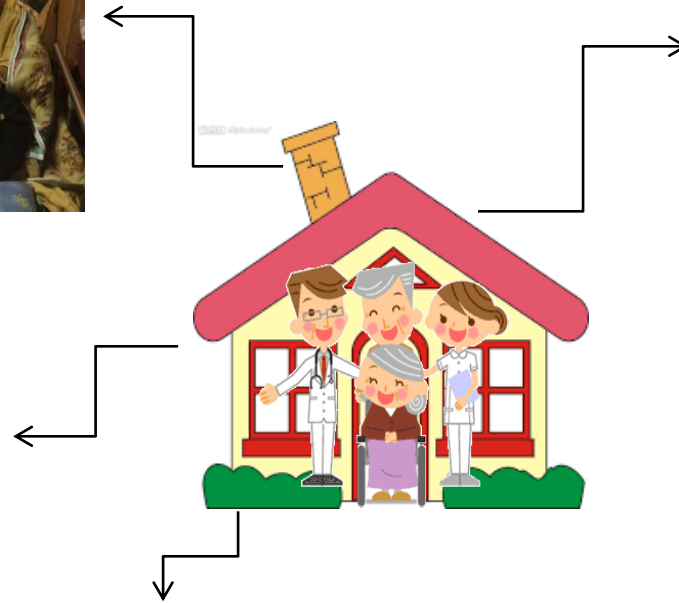
Pharmacist



Nurse



Functional therapist



Equipment of Home Medical Care



Notebook



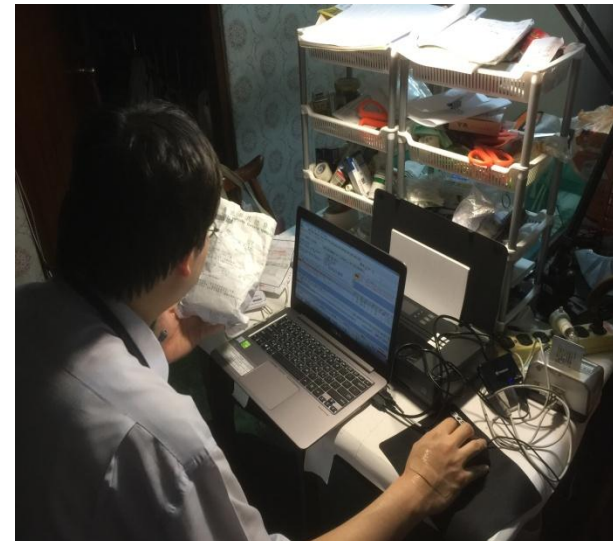
Card-reading



Printer



Wireless network



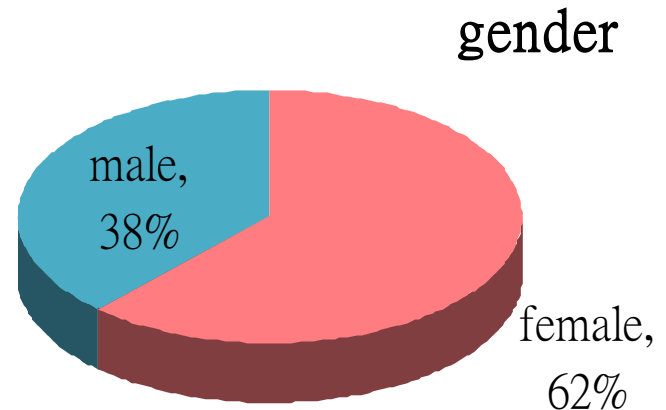
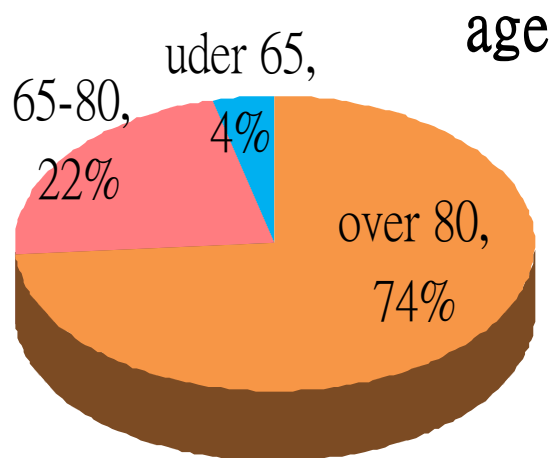


Methods

- The outcome indicators included
 - the hospitalization rate
 - the emergency department rate
 - the re-hospitalization rate within 14 days after discharge.
- A self-administered satisfaction questionnaire was used to assess the professional care knowledge, care capacity and quality of service in this program

Results

- Since January 2017 to June 30, 2018, there were 305 cases, with 2,587 times of service.
 - The age of the cases was over 80 (74%), followed by 65-80 (22%). Female (62%) was predominant.



Results

□ Outcome indicators were checked in 296 ever admitted cases after receiving program one year later :

- the hospitalization rate : 63.9% vs 31.4%
- the emergency department rate : 64.5% vs 38.5%
- the re-hospitalization rate within 14 days after discharge : 30.8% vs 12%

outcome indicators	Before receiving program	After receiving program 1 year
the hospitalization rate	189/296=63.9%	93/296= 31.4%
the emergency department rate	191/296=64.5%	114/296= 38.5%
the re-hospitalization rate within 14 days after discharge	48/156=30.8%	11/92= 12.0%

Results

- The valid questionnaires (107/153, 70.6%) were analyzed and showed **high satisfaction** for this program, especially for the quality of service. The results showed patients get good and high quality home medical care.

items	N	scales	percentage
Care knowledge of personnel	107	4.56	91.2%
Ability of personnel	107	4.64	92.8%
Service quality of personnel	107	4.65	93.0%
satisfaction	107	4.61	92.2%

Convulsion

- ❑ To face the increasing medical care demand in “Aged Society”, based on our experience of "Integrated Home Medical Care Program", the model of home medical care can not only **save time** that patient and family **spend on visiting outpatient clinic**, but also **increase time for patient care and education**.
- ❑ Patients can get good medical care at home thus reducing the need for emergency or hospitalization.

Convulsion

- ❑ This is a policy worth promoting.
- ❑ How to make more doctors willing to provide home medical care will be the challenge that Taiwan will face!

Thanks For Your Attention

“The miracle is not that we do this work,
but that we are happy to do it.”
-Mother Teresa

