

SEAMLESS CARE :

DEVELOPMENT OF A DISCHARGE COMMUNICATION TOOL FOR ELDERLY PATIENTS

J. Giraud¹, M. Thévenet², R. Haddad¹, I. Bruère², S. Lévêque³, M. Mion², A. Rieutord¹
 Pharmacy¹ and geriatric² unit in Antoine-Béclère Hospital (AP-HP), 92140 Clamart and Osmose health Network³, 92350 Le Plessis Robinson, France

INTRODUCTION

Hospital discharge is a critical transition point = challenge in patient's continuity of care

❖ **Particularly for elderly patients who are vulnerable** : poly-pathology, geriatric's syndromes, many hospitalisations,...

❖ **The lack of coordination between hospital and community healthcare professionals and caregivers = one of the main related cause**



Paris South West district



❖ Osmose health network supports 500,000 inhabitants with 100,000 elderly

❖ Beclere hospital have an acute geriatric unit (AGU) with 30 bed

❖ Main barrier to the management of patient progress between hospital and community = **lack of coordination and communication**

OBJECTIVES

Improve coordination by focusing on communication
Design, evaluate and compare a new communication tool (NCT)
to the classical institutional discharge form (ICT)
 according to community caregiver's needs and hospital professionals

MATERIALS ET METHOD

Brain storming sessions, group meetings, interviews : to elaborate the NCT
Qualitative and quantitative methods to compare NCT and ICT :
in AGU during 5 weeks
Professional satisfactions : **hospital** (with anonymous questionnaire)
community (with phone interviews)

RESULTS

ELABORATION OF THE NEW COMMUNICATION TOOL

1 brain storming session and 5 group meetings permit to include

all professionnals paterners



6 professional domains

Short answer and tick boxes were chosen
= patient photography at discharge

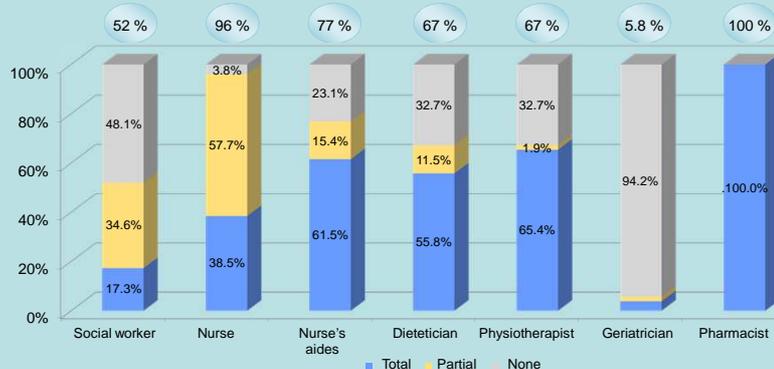
COMPARISON

78 elderly patients were discharged from AGU and **57 patients files were studied** (73%)

Exclusion criterias : death, transfert to an other establishment which doesn't permit the patient file analysis



	NCT % (n)	ICT % (n)	p
Tool availability in medical file	91.2 (52)	98.2 (56)	0.206
Tool filled in :			
•Total	5.8 (3)	0 (0)	< 0.01
•Partial	94.2 (49)	22.8 (13)	
•None	0 (0)	75.4 (45)	
Tool sent	69.6 (39)	0 (0)	< 0.01
Tool reception	64.1 (25)	0	< 0.01
•Rehabilitation center (n=13)	76.9 (10)	0	
•Nursing home (n=16)	50 (8)	0	
•Home (n=28)	25 (7)	0	



SATISFACTION

Community healthcare professionals satisfaction

Participation rate = 88%

Mainly nurses and 9% Home nurse's aides

- Globally there are very satisfied (91%): **information and clarity of NCT**
- Filling quality was moderately satisfied (but only 9.5% unsatisfied)
- **Limit was accessibility** of this tool for all caregivers (particularly at home)

Hospital healthcare professionals satisfaction

Participation = 63%

All professionnals categories were represented

- **NCT was clearer** than ICT, **easy, quick to fill in and adapted**
- **Less time consuming** was declared (4.8% vs 70%)
- **Organisation** was considered as **satisfactory** in **61.9%**

DISCUSSION - CONCLUSION

The new communication tool

= **easy, useful and effective** interprofessional tool

= **was adopted by all professionnals** (hospital and community)

= permit to **eliminate existing silos** all along the care process of elderly patient and to **acknowledge equal importance of each caregiver**

More developments are warranted to further improve the **availability rate** of NCT to the final caregiver

This first collaborative and pilot study allowed us to pool energies from community and hospital professional to develop a practical and useful communication tool to improve elderly patient discharge.