

# SEAMLESS CARE :

## DEVELOPMENT OF A DSCHARGE COMMUNICATION TOOL FOR EALDERLY PATIENTS

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### 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**



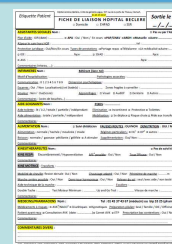
6 professional domains

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

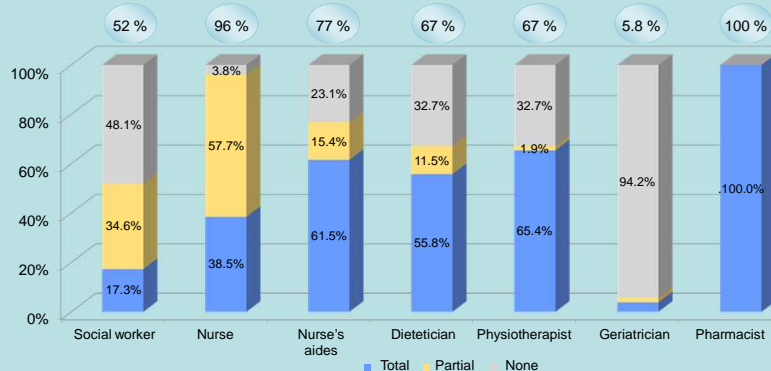
#### COMPARISON

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
<b>Tool availability in medical file</b>	91.2 (52)	98.2 (56)	0.206
<b>Tool filled in :</b>			
•Total	5.8 (3)	0 (0)	< 0.01
•Partial	94.2 (49)	22.8 (13)	
•None	0 (0)	75.4 (45)	
<b>Tool sent</b>	69.6 (39)	0 (0)	< 0.01
<b>Tool reception</b>	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.**