

Elderly Hospitalized Home-Patients in the Cross-Sectoral Team Care at North Zealand Hospital's Emergency Department

2022 Vol. 1
DEMC9 abstracts

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Background: With an increasing- and an increasingly aging population, the elderly morbidity burden is growing. This raises the question of how we can

effectively respond to this health-care challenge in a hospital setting where more patients are both old and comorbid. Consequently, North Zealand Hospital's (NOH's) Emergency Department (E.D.) has launched a pilot project that explores the value of having a cross-sectoral team (CST) to specifically manage old (65+ y.o.), complexly ill, and vulnerable patients on a hospital-at-home (HaH) basis. The purpose of this study was to classify and categorize the CST's elderly HAH patients (not formally discharged from NOH's E.D. but receive home visits by the E.D.'s HaH nurses).

Methods: Data regarding the HaH CST-patients at NOH were prospectively gathered during February 2021. Microsoft Excel software was then used to categorize and analyze the data. Numeric data are given as means \pm SEM.

Results: There were 227 HaH CST-interventions. Of these, 186 (81.9%) were elderly patients. The number of unique HaH elderly CST-patients (uHaHe-CSTps) was 108 (56 male and 52 female) aged 81 ± 0.8 years. The uHaHe-CSTps were categorized into age groups as following: 10 (65-69 y.o.), 18 (70-70 y.o.), 20 (75-79 y.o.), 17 (80-84 y.o.), 27 (85-89 y.o.), 13 (90-94 y.o.), 3 (95-97 y.o.). Of the uHaHe-CSTps, 93% were multimorbid, 82% had polypharmacy, 33.3% were readmitted patients within 2 weeks after ended HaH CST-intervention, and 4.6% died while in HaH CST-care.

Conclusion: NOH's E.D. has vulnerable, elderly, and complexly ill patients who may benefit from the medical care of the CST's HaH function. Furthermore, the HaH CST assists NOH's E.D. and the municipality by taking care of issues that can be handled effectively at the patient's home.