



Figure 1: Medical Helpline. n.d

Figure 2: The Guardian. 2012

Home Visiting and Recovery in Elderly Patients

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Figure 3: Express. 2014

Figure 4: Catholic Social Services. n.d

Introduction

Home visiting is becoming an essential part of nursing practice as technology in health is becoming more available and user friendly. More people are being discharged earlier from hospital and treated at home in the stage of their recovery that they would have once had to be in hospital to receive (St John & Keleher, 2007). This is extremely important with older adults, who are more fragile and have a higher probability of being readmitted to hospital.

“In comparison to hospital follow-up appointments, do home visits after discharge result in overall better health outcomes and recovery for patients aged 65-years-old and over?”

Discussion

Home-care and discharge planning have become important over time as they prevent aggravation of the patient's condition after they have been discharged, as well as reducing chances of readmission (Nagata, Tagachi, Naruse, Kuwahara & Murashima, 2013). Nagata et al. (2013), discusses the importance of discharge planning as it develops a plan that benefits the patient by including the medical, social and financial needs of the patient.

There has been discussion on the involvement of physicians in home visits with their patients. Woodson, Feinglass and Slavensky, (2009) states that the interdisciplinary team being involved in home visits has been a part of other specialized areas such as rehabilitation medicine and developmental paediatrics for an extensive amount of time. The involvement of a physician has the potential to improve aspects of these visits and improve health outcomes for the patient. This is because they are involved with the patient from the beginning through till the last stages of their recovery. Not just until their discharge.

Inadequate planning to meet the care and needs of patients after hospital discharge is a regular occurrence. This contributes to a decline in their healthcare problems which potentially leads to unnecessary hospital readmissions, higher healthcare costs and poor patient outcomes (Jeangsawang, Malathum, Panpakdee, Brooten & Nityasuddhi, 2012).

Recommendations

- Appropriate discharge planning to reduce the amount of readmissions and improve patient outcomes. Readmission of patients is a concern, the decreasing the number of patients readmitted also implicates our practice as both the visiting nurse and the nurse in the inpatient setting.
- From a nursing perspective, the nurses need to ensure that the physician involved in the care of the patient is kept informed and updated on the patient's progress and needs. It will ensure this to occur even when the patient has been discharged into the community to ensure the patient is still receiving appropriate care, just as they would if they were in a hospital setting.
- Recognise the importance of elderly's fragility and being aware of this when they are discharged home and when visiting their home. Nurses need to accommodate elderly by not just curing disease and preventing its occurrence, but preventing the ill from deteriorating.

Conclusion

Home visiting is a vital part of nursing practice as more and more patients continue to be discharged from hospitals earlier in the stages of their recovery. Elderly are at more of a risk when they are discharged. Focusing on this population in the community is essential. Aspects discussed such as readmission, physician involvement and discharge planning all contribute to why this is a practice issue for nurses not only in the community but hospital settings as well. As always, nurses need to look at the patient holistically and note that overall health includes independence and function, not just being disease free.

Rationale

My rationale for choosing a poster for my evidence-based literature review was the accessibility and visual appeal that it offers to a variety of audiences. The purpose of a poster in a clinical area is to provide a summary for care providers to help make change in their practice (Forsyth, Wright, Scherb & Gaspar, 2010). I choose the main ideas that I wanted to portray to my audience and incorporated them in my poster. This was important as the target audience for a poster will change it's focus and detail as they will want the key information and implications on practice when viewing the poster (Forsyth, Wright, Scherb & Gaspar, 2010). The information displayed can be easy for health-care workers like nurses and physicians to access, as well as elderly and their families due to the information being easy to read and having visual appeal.

References

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Image references:

- Figure 1: Medical Helpline. (n.d). Retrieved from http://www.24x7medicalhelpline.com/search_result.php?page=3&city_name=all&locality=&search12=nursing%20care%20service&search_by=both
- Figure 2: The Guardian. (2012). Retrieved from <http://www.theguardian.com/healthcare-network/2012/may/10/nursing-should-tackle-image-problem>

- Figure 3: Express. (2014). Retrieved from <http://www.express.co.uk/life-style/health/535523/Nursing-residential-home-palliative-care-elderly>
- Figure 4: Catholic Social Services. (n.d). Retrieved from <http://cssdioceseofscranton.org/content/senior-services/project-head-for-the-elderly>

PECOT Category	Information relating to question	Explanation
Population	Elderly patients, 65-years +, discharged into their own homes post hospital admission.	Elderly are the fastest growing population, especially in the healthcare sector. They are also a population that is at risk of readmission after discharge due to their fragility.
Exposure (intervention)	Patients that receive home visits post discharge from hospital settings.	Focus remains on patients after discharge as this is when a lot of elderly patients are at a disadvantage. Discharge of fragile elderly patients potentially leads to a high risk of readmissions
Comparison/Control	Patients receiving a follow up home visit, in comparison to visiting a nurse or physician in a hospital setting.	I am interested in the difference that this makes to the patient's recovery and the health outcomes it portrays of being in their own home instead of a hospital setting.
Outcome	Elderly will recover in a more comfortable environment by receiving home visits from a district nurse.	Being in their own home means that they are more comfortable and this could contribute to recovery time. Being followed-up and visited also means that the patient is less likely to be readmitted to hospital.
Time	Non applicable	Non applicable