Geriatric Acute Care and Remobilisation Units

Austria

Prof. Dr. Thomas Frühwald
Geriatrician (AG/R Hospital Hietzing, NEP Austria)
thomas.fruehwald@wienkav.at

SEVENTH FRAMEWORK PROGRAMME

Funded by the European Commission
under the Seventh Framework Programme
Grant agreement no. 223037

Geriatric Acute Care and Remobilisation Units (AG/R's) in Organisational Structures

Subtheme ***Care from a Hospital Setting*** addressing the key-issues:

- Multi-professional teams for assessment, care and treatment
- Integrated prevention, rehabilitation/remobilisation/reintegration programmes
- Day clinic services
- Structures that facilitate integrated discharge and follow-up planning

Status

PILOT PROJECT TERMINATED	PILOT PROJECT ONGOING	PROJECT TERMINATED	PROJECT ONGOING	**IMPLEMENTED PRACTICE RESTRICTED AREAS**	WIDELY SPREAD PRACTICE ROLLED OUT

Main benefit for users/carers:

- improved global outcomes for geriatric patients admitted to an acute hospital: better clinical outcomes, better ADL's, less re-admissions, less NH-admissions, more efficient provision of care, better re-integration in the pre-existing social context

Why was this project developed/implemented?

- Lack of competent, “state of the art” geriatric care for geriatric patients admitted to an acute care hospital
- Specific multidimensional needs of the frail, vulnerable geriatric patient population not met in the “usual care” hospital settings were not met
- There was a lack of structures to develop, to implement and to spread to other disciplines principles of care of geriatric patients

Main features of the example (description)

- Multidisciplinary - multiprofessional geriatric teams perform comprehensive multidimensional geriatric assessment of somatic, psychological and social functions at admission, evaluate rehab potential, formulate goals of treatment and rehab, base therapeutic and rehabilitative intervention on the results of this assessment
- Weekly multidisciplinary team meetings are obligatory communication platforms
- Re-assesment is done to control progress, to re-formulate goals and to evaluate outcomes

What are/were the effects?

- Jan. 2011: 44 units of geriatric acute care, 1590 beds
- Standardisation of the comprehensive multidimensional geriatric assessment process
- Regional networks of departments of geriatric acute care
- Development of a web-based benchmarking system as a quality improvement initiative <www.quigg.at> (so far more than 20 000 data sets)
- Recognition and acceptance of the geriatric expertise – f.e. development of ortho-geriatric models of care
- Acceleration of the process of formal recognition of geriatric medicine as a medical specialty

Strengths

- Political commitment to develop AG/R units in Austria
- National plan stipulating infrastructural and procedural standards
- Commitment to multidisciplinarity
- Integration of rehabilitative processes into acute medical care
- Addressing the spectrum of individual care from preventive, curative to palliative care
- Reference possible to positive, high quality RCT‘s and metaanalyses evaluating outcomes of geriatric acute care based on geriatric assessment published in high impact international literature

Limitations

- 3 federal provinces not yet implementing AG/R (B, NÖ, V)
- Wide range of admission ways: primary vs. secondary
- Lack of systematic evaluation (except centres participating in the benchmarking project)
- No study comparing AG/R care to “usual care”
- Still underdeveloped day care and out patient services
- Insufficient interface with community services
- Insufficient interface with the LTC-sector

Conclusions

- **For practice**
  - AG/R's should better communicate their achievements
  - Better, more standardised data collection
  - More participation in the benchmarking project
- **For policy-makers**
  - Support the expansion of the AG/R network
- **For research**
  - Do more research comparing outcome quality of AG/R- and "usual" care
  - Study the postulated positive effect on attenuating the projected "burden of care" of the target population – also in economic terms