

Erasmus University Medical Center, Department of Public Health (EMC)



Erasmus MC, University Medical Center Rotterdam, is the largest University Medical Center of the Netherlands,

with around 14,000 staff members. Its mission is to contribute to a healthy population and to excellence in health care through research and education. Its research portfolio includes clinical research, biomedical research, and health science research. The Department of Public Health has around 150 staff members, and its main goal is to support evidence-based public health through research and education. Among the public health areas studied by the Department are social determinants of health, medical demography, occupational health, cancer screening, infectious disease control, and medical decision-making. It has a particularly strong track record in quantitative research, including mathematical modelling.

The Geriatric Research Group (GRG)



Gruppo di ricerca geriatrica



The Geriatric Research Group (GRG) has been founded in 1988 in Brescia (Italy) by a group of physicians, psychologists and economists with the aim of improving the

level of knowledge and sensibility of the Italian community on the problems related with individual ageing. GRG is involved in many research projects on the main elderly diseases, with particular attention to the pathway from disease to disability, and project on network of services offered to elderly patients (home services, hospitals, long term care, etc.).

GRG also offers programs of continuous education for health professionals, caregivers and old population on correct life styles for the prevention of unhealthy ageing. Furthermore, it gives advices for the management of services for elderly with a peculiar attention to innovative solutions both in public and private fields. GRG collaborates with many national and international institutions and universities. Website: www.grg-bs.it



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APPCARE
APPROPRIATE CARE PATHWAY



INTRODUCTION

Ageing problems are a common challenge for European health systems. Frail elderly people are often in need of long term care and their chronic conditions require a complex response from a wide range of health professionals. An especially vulnerable group is the hospitalized older people. Among this group, around 30% to 60% develops functional decline and the risk of readmission and hospital-related adverse outcomes is substantial, particularly in the first few days after discharge.

APPCARE (Appropriate CARE for frail elderly patients: a comprehensive model), a project granted by the European Commission under the HEALTH PROGRAMME 2014, is aimed at creating a new model for the management of frail elderly people to demonstrate how an innovative and comprehensive management of complex and co-morbid clinical situations, may maintain patient's functional status in its clinical trajectory, optimizing health care systems.

MODEL DESCRIPTION

The APPCARE model will test a specific care pathways for +75 patients accessing the Emergency Departments with the following characteristics:

HOSPITAL CARE

- Standardized application of the Comprehensive Geriatric Assessment within 48 hour after the hospital admittance;
- Assessment of the social and environmental context of the patient (in particular, the living condition - alone, home-assisted by relatives or informal caregivers, homecare assistance with formal caregivers, nursing home)
- 48h intensive care (short term observation period)

COORDINATED CARE MANAGEMENT

After discharge, specific protocols will be agreed among the involved caregivers for the management of the enrolled patients according to the following APPCARE requirements:

- Establishment of a case management program for complex patients (homecare assisted)

- Geriatric follow up of clinical conditions at 1 month and 3 months

Clinical pathways for the most common chronic conditions (CVD, BPCO, ...), in accordance with all involved specialists.

PREVENTIVE CARE

The APPCARE model for preventive care will involve patients with a good degree of autonomy and foresees the following steps:

- Assessment of physical activity and polypharmacy.
- Proposal of specific agreed pathways for fall prevention and management of polypharmacy to at-risk patients according to the benchmark analysis results.
- Monitoring of pathways adherence of enrolled patients at 1 months, 3 months and 6 month.

All the established protocols will be based on the results of a benchmark analysis on the already existing initiatives at local level, with the clear intent of creating an homogeneous care net around the patient. The experimentation phase will run from April 2016 to March 2018 and involve 3.000 patients distributed into the three pilot sites (Treviso, Valencia and Rotterdam).

EXPECTED RESULTS

The APPCARE Consortium foresees that the achievement of the mentioned project's objectives will lead to the following outcomes:

- Reduction of functional status loss (according to the patient's clinical trajectory)
- More appropriate and timely care interventions
- Reduction of avoidable/unnecessary hospital admission
- Reduction of hospitalization's adverse outcomes rate
- Reduction of readmission rate
- reduction of unnecessary diagnostics and adverse outcomes related to pharmacotherapy
- increased patient and informal caregivers' empowerment and self-management
- early monitoring of frailty conditions
- healthcare delivery optimization and savings

The Azienda ULSS 9 Treviso - LHA9



AZIENDA ULSS 9 TREVISO The Azienda ULSS 9 Treviso (LHA9) is a local health authority in Veneto Region, providing health and social services to 37

municipalities covering more than 400.000 inhabitants. LHA9 delivers also clinical and basic research activities, thanks to the presence of academic departments within the facility. According to the regional health system, LHA9 is the most important actor in healthcare and in social affairs at local level. LHA9 is composed by 2 hospitals, 2 Territorial units, 1 Prevention Department. Through an integrated assistance model, LHA9 provides social services with health relevance, aiming to support people whose health conditions are influenced by disability or exclusion. Moreover, LHA9 works in strict collaboration with municipalities' social departments and it is strongly committed in developing homecare solutions to reach "complex patient" (non autonomous, co-morbid, vulnerable patients, etc.). In the past 10 years, LHA9 has participated and coordinated different EU funded projects. Website: www.ulss.tv.it

Polibienestar



VNIVERSITAT DE VALÈNCIA

Polibienestar is a public research institute belonging to the University of Valencia.

It consists of an interdisciplinary team with more than 60 researchers with national and European experience in health and social policies, combining researchers from various disciplines such as medicine, psychology, economics, sociology, etc. This diverse range of disciplines allows us to carry out interdisciplinary research, innovation and social technology, technical advice and training in the field of public policies. Polibienestar also advises the Administration and private entities in the design, planning and implementation of health and social policies and services. In addition, Polibienestar has a broad experience in cooperation and participation in European networks, and in particular it actively participates in two Action Groups of the European Innovation Partnership on Active and Healthy Ageing promoted by the European Commission; for more information, please visit the website www.Polibienestar.org