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‘Bundled care’ model could offer faster, cheaper, lower-stress health care

St. Joseph’s Health System believes it has found a safer, cheaper and faster way to care for patients that has caught the attention of Ontario’s Health Minister.

It is experimenting with “bundling care,” similar to how telecommunications companies bundle phone, Internet and television services.

Instead of going to different providers in the health-care system for diagnosis, treatment and recovery, patients get all their care from St. Joseph’s with one person overseeing the case and being a point of contact.

“It’s very innovative and exciting,” said Health Minister Deb Matthews, who met with CEO Kevin Smith last week to discuss the project.

It starts before patients are admitted to hospital, continues while they’re there and stays with them while they move through long-term care and home care. Sometimes they will be connected with doctors or other health care providers using mobile devices such as iPads.

The province is giving St. Joseph’s a set amount of money per patient to test bundled care for lung surgery, hip and knee surgery and treating chronic obstructive pulmonary disease (COPD) for the next year.

Early results from the first three months show patients are discharged from hospital one day earlier and feel more secure at home. They stay out of the emergency department and home care is used up to 50 per cent more efficiently.

“We’re always talking about where are patients most frustrated and it’s almost always at the points at which we hand them over between hospitals and family doctors and long-term care and home care,” said Smith. “It’s about the continuum and that’s where we want to go as an organization. We’ve all talked about this for an awfully long time and now we’re doing it.”

Patients enter the system through the diagnostic program to determine what they need from the moment they’re admitted until they’re fully recovered. Next, they’re assigned a care co-ordinator who organizes and oversees all aspects of their care as well as being the patient’s point of contact with the health-care system.

Before the patient is admitted to hospital, everything is put in place for the discharge. If patients need home care, they meet the people who will provide it and get their home ready.

After surgery, they can access the co-ordinator 24 hours a day. If there is concern about infection, the patient might be connected through an iPad with the surgeon, who will be able to see the incision using that technology. The co-ordinator may also send home care earlier or more often.

If the patient comes back to the hospital, it would be straight to the ward and not through the emergency department. One of the key goals is to keep patients out of already-crowded ERs. It also might involve short stays at long-term care facilities to get patients out of hospital who don't need to be there.

St. Joseph's Health System is uniquely positioned to test bundled care because it already runs hospital, long-term care and home care services.

"We've gone from patients saying, 'I didn't know who to call, I felt alone, when I called my family doctor they didn't have the information and when I called the hospital they said come to the emergency room,'" said Smith. "To: 'I feel cared for and safer than I have before and I feel like I'm not telling my story over and over again and I'm less frustrated.'"

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