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**Medwell SA**  
The Home Health Care Specialists

# HOME-BASED CARE

LOOKING AFTER PATIENTS IN THE ENVIRONMENT OF THEIR CHOICE  
Own home, Family member's home, Retirement Village Independent unit



- Aging population, more people who need or prefer care in their homes
- Studies show decrease in symptom burden when treated at home
- Not all "homes" are suitable for care

# AIM OF HOME-BASED CARE

1. To reduce time in hospital/in lieu of hospitalisation
2. To reduce costs
3. To reduce stress for patient/family members
4. To apply appropriate resources to the clinical needs
5. To give the patient a voice (palliative care)
6. To establish a continuum of care



# CONTINUUM OF CARE

- Start with Chronic Disease Management and Primary Health Care
- Hospital to home, transition of care
- Discharged not too early (unstable), not too late (high nosocomial infection risk) – TRICKY
- TEAM EFFORT
- Team players: Case managers, Doctors, Home Nursing company, Medical Schemes, **Family**



# PROCESS TO INITIATE HOME BASED CARE

Request from family/Medical scheme/Hospital Case Managers/Treating Doctors

Assessment by Registered Nurse (RN) – clinical evaluation to establish need in the context of funds, social circumstances and clinical needs

Medical Scheme authorisation or Private

Implementation of care worker/Enrolled Nursing Assistant by RN according to an individualised care plan

Follow-up by RN

24 hour on call telephonic support for carer, patient or family

Various options in terms of hours, intensity or level of care

# CARE MANAGEMENT

RNs, Social Worker, **Patient, Family, Treating Doctors**, Physios, Dieticians



# ROLE PLAYERS IN HOME-BASED CARE

- Registered Nurse: assessments, single procedures (wound care, catheter care, intravenous infusions)
- Carers/Enrolled Nursing Assistants: hands at the patient, assist with Activities of Daily Living, support (nutrition/hygienic environment)
- On call RN (telephonic support)



# ROLE PLAYERS IN HOME-BASED CARE

- In-house doctors to support nurses and liaise with colleagues (GPs, specialists)
- Dietitians
- Physiotherapists
- Occupational Therapists





# WHEN A PATIENT WITH A HISTORY OF FALLS REFUSES TO STAY IN BED



# CARE WORKERS

## Minimum requirements

National Senior Certificate

SAQA home nursing/nursing certificate

3 years experience

## Orientation program

Theory

Practical

Test

Interviews

Criminal record check

Patient specific training (high intensity care)



# SERVICES AVAILABLE

## **Managed Home Nursing Services**

Palliative / Terminal care (collaborate with Hospice)

Nursing Procedures: Wound Care, Stoma Care, Catheter care, IV infusions

Post-operative care

General Home Nursing (assistance with Activities of Daily Living)

Home Ventilation – Long Term

Chronic Disease Management

Post-natal care

## **Holistic Healthcare in Retirement Villages**

Primary Health care

Frail care management

Home-based care in independent units



# APPROACH TO HEALTHCARE

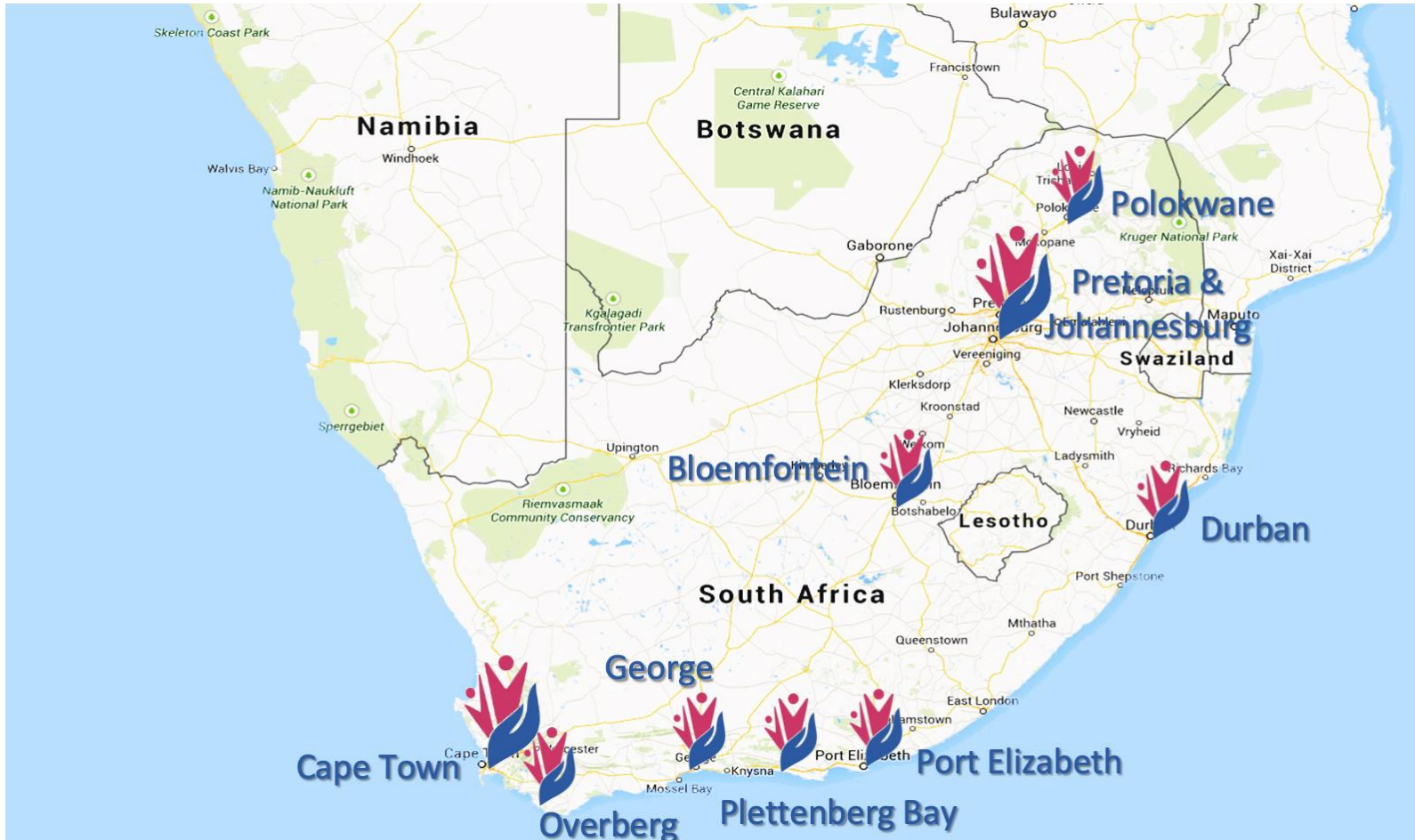
- Patient centred care
- Wellness focus: prevention is better than cure
- Community based care
- Continuum of care at the correct intensity/level
- Transition of care
- Outcome based focus: where should we spend more time/energy....



**AFFORDABLE AND APPROPRIATE**







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