Case management in the acute care setting

- Strategy for providing cost effective quality care that ensures efficient use of resources.

- Process approach with each step in the process being pre determined and managed to obtain a desired outcome.
Collaborative process of assessment, planning, implementation, co-ordination, monitoring and evaluation of options and services to meet an individual’s health needs.

Case Management Society of America (1995)
Goals

• Assisting the patient achieve an optimum level of function and wellbeing
• Continuity of service to a patient on a one to one basis
• Maintaining cost effectiveness in the provision of health services
Essential components

• Able to distinguish between acuity and complexity in selecting patients
• Assessment skills to plan care, implement, monitor and evaluate plans, services and outcomes
• Able to identify resources - link and broker for services and resources for individual patients
• Ensure cost containment of service delivery for individual patients and services.
Groups that benefit from case management

Those identified as:

- incurring high costs or volumes of care
- predictably unpredictable
- often requiring repeated admissions
- having multiple teams of medical and allied health staff involved in their care
- belonging to high risk groups
Trauma Patients

Those who:

- have multiple teams of medical and allied health staff involved in their care leading to increased utilisation of resources and services

- belong to high risk groups and who encounter significant variance from the anticipated plan of care
Principles of case management in the acute care setting

- Co-ordination of care
- Provide education and information
- Liase with services- consensual plan of care
- Be available to the patient and the staff
- Evaluate services/ systems of care
- Efficient use of available resources
- Effective discharge planning and follow-up
To implement case management you need a case manager
Case manager

One person who has an overview and overall responsibility for:

- co-ordinating care
- taking accountability for the delivery of care to a patient or group of patients
- a systems orientation to evaluate cares given and improve service delivery if necessary
Trauma case manager

- Clinician
- Co-ordinator
- Facilitator
- Educator
- Negotiator
- Politician
- Detective
- Advocate
Trauma Case Management

- An evaluation study of the Auckland Hospital Trauma Service process of case management

- Study conducted in 2001
Purpose of study

- To investigate whether the Service’s team had influenced the way the staff care for trauma patients at Auckland Hospital.

- To evaluate staff perceptions of the effectiveness of the case management component for multiply injured patients.
Collaborative model of case management

Involves all members of the clinical and allied teams caring for trauma patients
Participants for the study

Represented staff from

- medicine
- nursing
- physiotherapy
- occupational therapy
- social work
- nutritional support
- speech language therapy
Methodology for the study

- Participants selected by their managers
- Anonymous to the researcher

- Interviewed by an independent interviewer
- Open ended interview schedule

- Answers were analysed by the researcher
Findings
Findings

All of the participants had a clear understanding of the role of the Trauma Service within the organisation.
Findings

• Several stated that the organised ‘team approach’ of the Service had influenced their practice especially in regard to discharge planning.
• Service was seen as having raised the profile of trauma patients within the organisation
Findings on case management

- “Co-ordination”
- “Best practice - management of patients”
- “Overview of the whole”
- “Communicators”
- “Available”
- “Sharing of information”
- “Assessment skills in acute trauma care”
- “Referral advice”
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Significant Results

- Service was seen as making decisions that are in the best interest of the patient.

- This is achieved through case management.

- All participants reported the Service’s method of care delivery had had a positive effect on their practice.
Recommendations from the study

• Promote the Service approach as a model for developing services
• Further study into cost effectiveness of patient outcomes for the organisation - in the complex group of trauma patients
• Development of clinical pathways
• Utilisation of the model for nursing - collaborative and best practice delivery of care to compromised patients in all areas of nursing