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Re-engineering of homehealth service delivery model

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Introduction: Home is the place where every individual wants to be. However, literature has started to reveal that home is also the best setting for providing health care to patients where it is applicable. Considering the raising concerns regarding 1) increasing numbers of patients in hospitals, 2) throughput of discharges, 3) traveling to health care settings, 4) time spend by patient and attendants, and 5) cost associated with hospitalization, home care is the answer today and more so in future as all these concerns are on a rising trend.

Objective: Project objective was to an increase access to care for patients who required medical care at home, as evidenced by increasing number of patients of home care leading to increase in throughput at the hospital.

Method: Using Deming's Plan-Do-Study-Act (PDSA) model for continuous quality improvement methodology, a project was initiated to identify ways to increase patient volume for home care within the available resources. The team reviewed current operational processes, the workload for home health workers along with costs incurred to deliver the services including staff salary, overtime, and transportation. Data related to current operational model was analyzed in depth to identify root cause of inefficiency. Process reengineering was performed to develop an improved design of service delivery. Two major interventions done; 1) development of hub and spoke model and 2) introduction of variable payment model for Registered Nurses (RN). Both these models were piloted at one spoke and upon success, replicated and standardized for home health services at Aga Khan University Hospital.

Results: Volume and revenue comparison of pre and post intervention revealed an increase in annual volume by 28% over the preceding year exceeding budgeted volume and revenue target by 14% and 11% respectively. Reduction in transportation cost, time efficiency, increase in nurses' remuneration and an increase in staff and patient satisfaction were extra gains from the utilization of this new service delivery model of home health care.

Conclusion: The success of this project has provided a sustainable service delivery model of home health service to the organization and access to quality health care to the patients.

Biography

Laila Khymani has her expertise in health systems development in improving the health care quality. Her passion to provide quality healthcare to the doorsteps of the underserved population has encouraged her to come up with the innovation in service delivery model. This innovative service delivery model has created cost-effective and efficient ways of providing home health services to people in a country where they have to pay the cost of health care out of their pockets. This business approach is beneficial for all stakeholders; the organization in terms of financial sustainability, health care workers in terms of job satisfaction and remuneration and above all for patients in terms of access and availability of quality healthcare at their doorstep..

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