The Concept Continuum of Care and Case Management

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### The Concept Continuum of Care and Case Management

The health care system in Hong Kong is a well-developed system that allows the residents to enjoy early heath education and professional healthcare services. Various organizations have been at the forefront in developing strategies that emphasize holistic care such as transitional care interventions in managing chronic illnesses. As supported by De Regge et al. (2017), hospitals play an important role in coordination and transitional care interventions by adopting integrated care programs which result in enhanced care delivery to patients with chronic illnesses. Continuum of care is a model that enables provision of comprehensive care by guiding and monitoring the patient across all levels of care delivery to ensure effective treatment. Continuum of care is closely related to case management, its tike case management, the concept continuum of care is also concerned with patients problems, strengths, needs, and personal concerns.

# Continuum of Care in Case Management

Despite the efforts to provide holistic care, many organizations in Hong Kong mainly focus on providing episodic care, which targets to treat patients for a chronic illness without post-follow-up, efforts to create patient/caregiver relationship, or no attempts to engage the patient with prevention and wellness interventions. Episodic care presents a significant challenge in providing holistic care, post complications, and high healthcare costs. The concept continuum

attempts to oversee effective transition of patients from one point of care to another.

Furthermore, continuum of care is also used to ensure effective patient follow-up from preventive care to ambulatory, acute, and home care facilities.

## **Continuum of Care in the Organization**

There are mechanisms to ensure continuity of care for our outpatients in my organization. The culture of continuum of care ensures that the patients are provided with care as they transition from different levels of care. My organization offers remote monitoring of critically ill patients who are receiving home care after a discharge, and it allows nurses to coordinate care for patients residing far from the facility, thus supporting continuum care. Furthermore, the organization has developed a culture among nurses in which there are nurse-led strategies that

the provision of high-quality, cost-effective care.

### Planned/Implemented Services and Programs

The majority of healthcare systems aim to offer quality patient care to improve the quality of life of patients, ensuring that everyone gets the healthcare service they need. Currently, my organization is using an electronic health record system (EHR) to store key relevant data

healthcare providers to design a care plan based on comprehensive patient information, hence

assisting patients to reach their health goals. The leadership and management are highly supportive of the organization's evidence-based practice (EBP) model. They continuously

and other specialized care personnel to ensure that the patients have received high quality care.

Another program being facilitated is team building to aid in effective communications among health care teams which is crucial in the patient care process. Finally, the hospital has also been promoting patient-centered care by encouraging caregivers to ensure they effectively communicate to their patients, understand their preferences, and engage them in the care plan to increase patient satisfaction and quality care outcomes.

# Impact of the Services and Programs on the bottom line of the organization

Increased quality patient care and patient satisfaction are likely to impact the organization's bottom line positively. For instance, after implementing EHR, my organization noted a significant reduction in costs due to a reduction in a lot of paperwork, testing duplication, and medical errors just as supported by Hoover (2017). Using an evidence-based care model

providers work as a team and communicate effectively also impact the organization's bottom line because hospital resources are used more efficiently. While making health care decisions, it is vital to include patient preferences as it aids in understanding a patients' unique needs and care preferences (Ringdal et al., 2017). Engaging patients in their treatment process is likely to result in positive outcomes because the patient is also involved in the process, which reduces cases like readmissions that put strain on hospital resources.

## **Quality Indicator**

Quality indicators measure, evaluate and communicate whether various aspects of health care have met key objectives. One of the quality indicators is patient safety which can significantly influence the quality of care. In my health organization, patient safety implies a care environment with minimal errors, risks, and harm during the care process. Patient safety quality indicator uses inpatient discharge plan to provide details on patient safety. Importantly

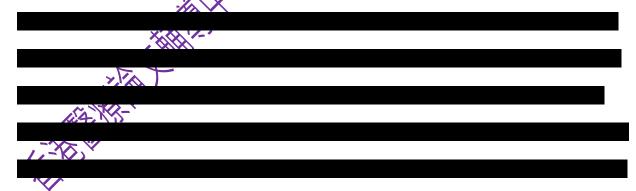
based practice and electronic medical records. At the local, state, and national levels, laws, protocols, policies, and procedures have been designed to facilitate patient safety. For instance, my organization uses an automatic drug dispensing cabinet which significantly reduces cases of medication errors and consecutively leads to patient safety. There are also standards expected from healthcare professionals; for example, nurses are expected to read the name of the medication, confirm the patient's name, and monitor the patient's progress. There are also evidence-based standards for procedures such as inserting and managing foley catheters. There

are generally many protocols and procedures that have been put in place to increase patient safety.

### **Linking Hospital Reimbursement to Performance outcomes**

Linking hospital reimbursement to performance outcomes is one of the strategies to ensure quality health care service delivery. In Hong Kong, where the government provides public health services for free or at a small charge for the residents who use public healthcare plans, I feel that linking hospital reimbursement to performance outcomes will significantly increase the quality of services offered to the residents. As explained by conrad (2015), a benchmark to measure performance outcomes and reimbursement is likely to coerce providers into providing quality service, thus leading to improve to outcomes. The value-based payment system provides incentive payment, thus encouraging providers to improve their service delivery.

In a country where the government provides healthcare to everyone at no cost, some healthcare providers may fail to offer patient care that meets quality indicators and performance outcomes.



to ensure a fair system such that the providers are not penalized for nonmodifiable factors that interfere with the outcomes. Despite the downside, linking hospital reimbursement to outcomes can improve the quality of healthcare service delivery.

# References

Conrad, D. A. (2015). The theory of value-based payment incentives and their application to health care. Health Services Research, 50, 2057-2089.

