

Multidisciplinary integrated care for seniors gives better quality care

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Multidisciplinary integrated care of seniors in residential care facilities resulted in better quality of care, found a Dutch study published in CMAJ (*Canadian Medical Association Journal*).

In the Netherlands, people living in residential care facilities — about 10% of seniors aged 75 or older — have increasingly complex health needs. More than 70% of residents, many of whom have multiple chronic diseases and related disabilities, need professional help with daily living, nursing care and housekeeping. Seniors homes are increasingly dealing with these more complex needs.

The study looked at 340 residents with physical or cognitive disabilities living in 10 residential care facilities near Amsterdam, the Netherlands, to determine the effects of multidisciplinary integrated care. All participants had primary care physicians who were responsible for their medical care. Terminally ill residents were not included in the study.

"By adapting the principles of disease management, we introduced the concept of multidisciplinary integrated care," writes Dr. Hein van Hout, VU University Medical Center, Amsterdam, the <u>Netherlands</u>, with coauthors. "This concept focused on identification and monitoring of the functional disabilities caused by chronic diseases."

The study included assessments every three months of functional limitations by trained nurse-assistants; discussion of priorities and outcomes with the family physician, patient and family members; and



monthly meetings with the patient's health care team (nurse-assistant, family physician, psychologist and geriatrician.)

"Compared with usual care, our model of multidisciplinary <u>integrated</u> <u>care</u> resulted in substantially higher quality of care for elderly people in residential care facilities," write the authors. "Functional ability, number of hospital admissions and health-related quality of life remained comparable between the two groups."

Mortality also declined and people were more positive about the quality of their care in persons where the intervention protocol was fully applied.

The authors conclude that the results of the study can be applied to <u>seniors</u> in residential <u>care facilities</u>, those in nursing homes and those living at home.

In a related commentary, Dr. Robin Stadnyk of Dalhousie University writes, "this is an important contribution to improving care in nursing homes because it integrates process measures with outcomes that are important to the resident's functional status and quality of life. In contrast, much of the North American research on care in <u>nursing homes</u> focuses on effectiveness, improving quality or the culture of care."

Provided by Canadian Medical Association Journal

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