

A strategy for rehabilitation for older people in Ireland



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Protecting the Longevity Dividend

- Collective ageing of our populations the greatest social advance of the last century
- Irish citizens living longer and healthier
- Care needs more likely to be complex
- Evidence-based solutions now recognized but not routinely applied

Geriatric and gerontology expertise

- Comprehensive Geriatric Assessment (and Intervention!)
- Orthogeriatrics
- Stroke Care
- ..Rehabilitation?



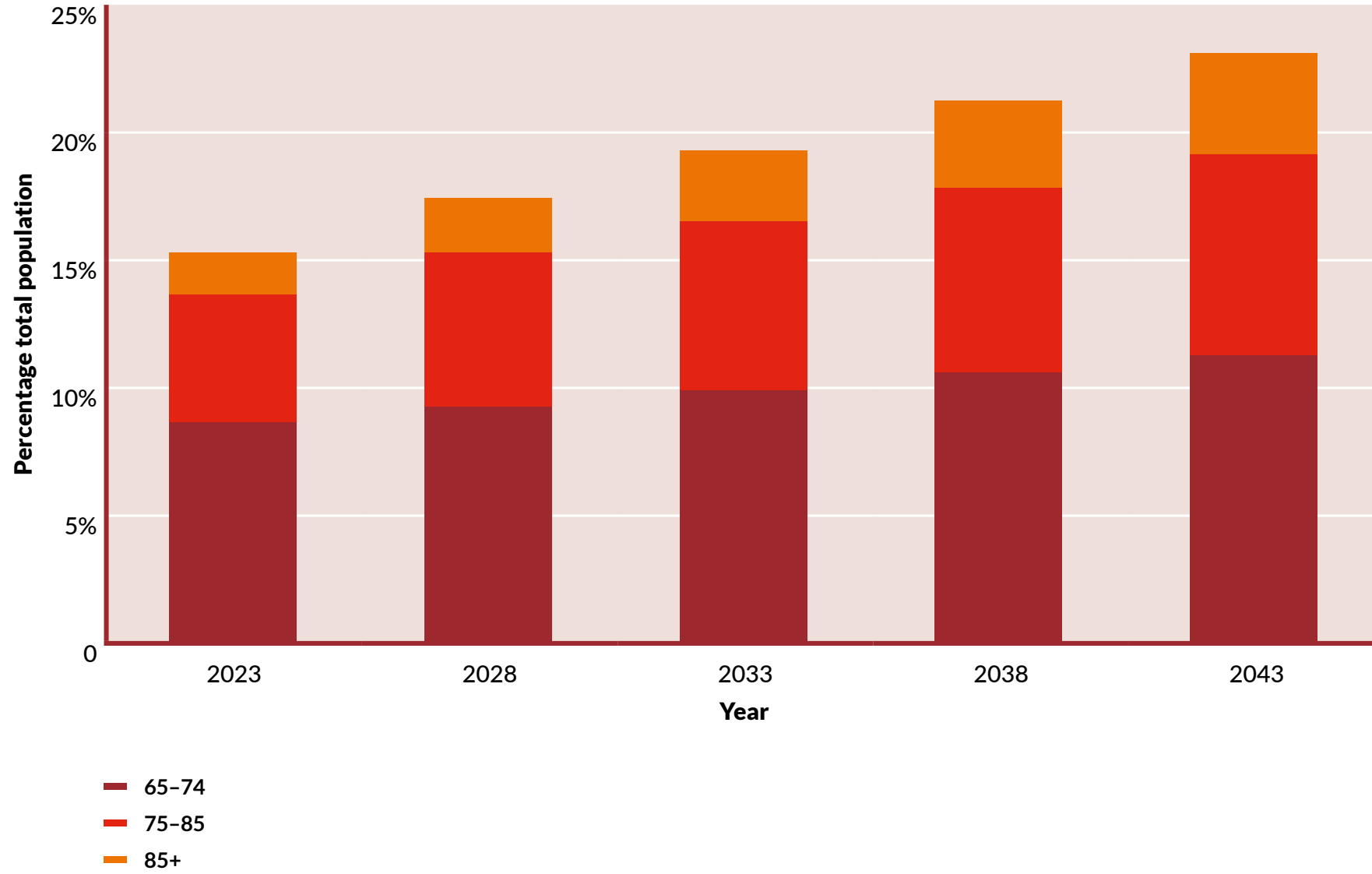
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What is rehabilitation?

- Rehabilitation is a set of interventions designed to **optimize function and reduce disability** in individuals with health conditions in interaction with their environment. This is achieved by focusing on the impact that the health condition or disability has on the person's life, rather than focusing exclusively on their diagnosis. It involves working in partnership with the person and those important to them so that they can maximise their potential and independence, and have choice and control over their own lives.
- It is a philosophy of care that helps to ensure people are included in their communities, employment and education. It is increasingly acknowledged that effective rehabilitation delivers better outcomes and improved quality of life and has the potential to reduce health inequalities and make significant cost savings across the health and care system.

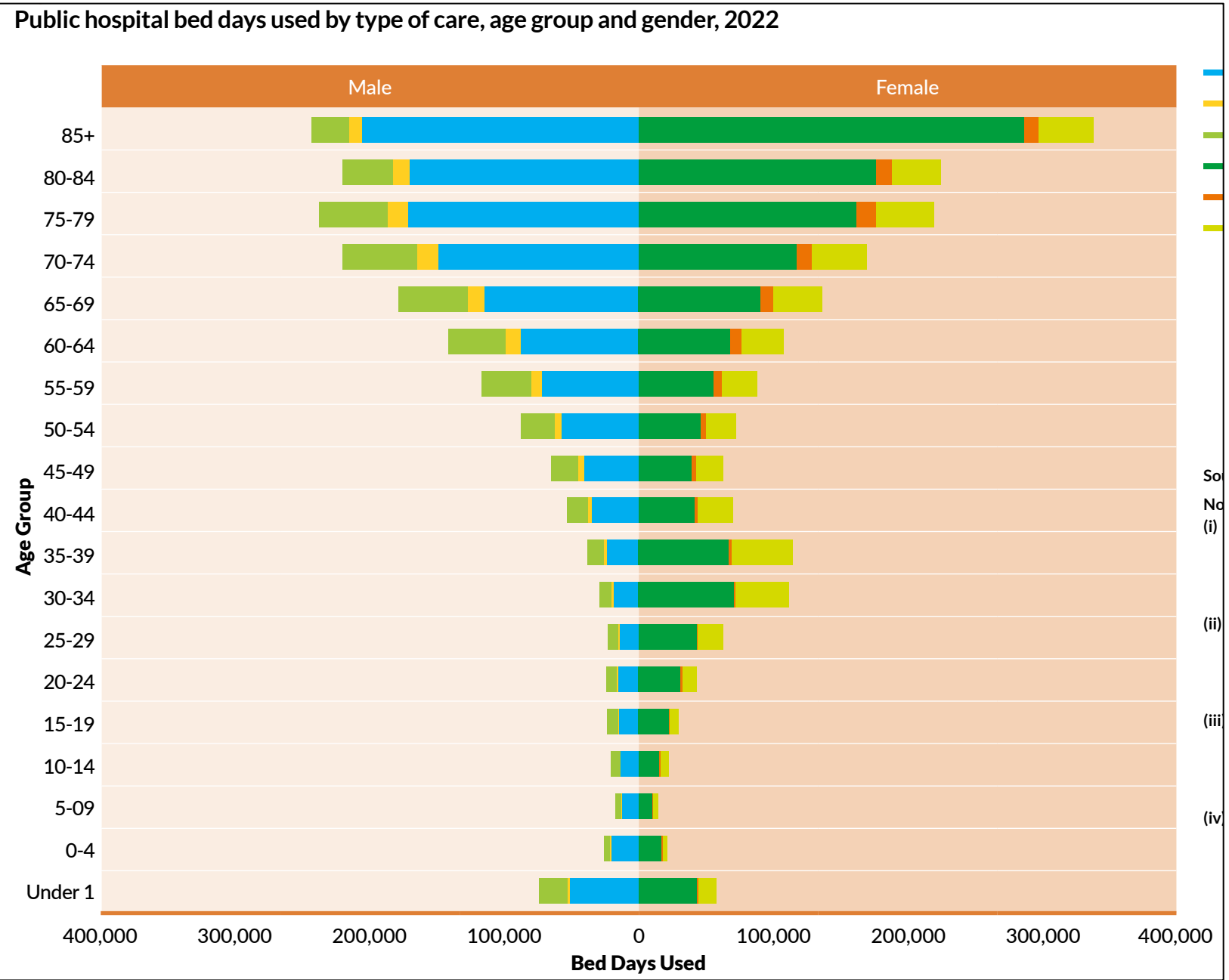


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Loss of function

- 60% of older hospital patients have pre-event functional decline
- 60% of these do not regain their previous functional state at hospital discharge
- 30-40% suffer in-hospital functional decline
- Solution: rehabilitation

Key concern currently

- No standard as yet, few formal rehabilitation units
- High level of use of ill-defined and potentially harmful referral to facilities in a range of settings, labelled with redundant terms such as “step-down/convalescence/transitional care”, some not overseen HIQA
- When UHG ran out of funding for this, referral to long term care dropped from 8% to 2%, and repeat admissions at 90 days from 34% to 24%

The Years Ahead

- 3 rehabilitation beds per 1,000 older people
- 1,040,000 older Irish people
- 3,120 rehabilitation beds
- Important issue for increase in hospital beds – better to invest significant portion in rehabilitation

The years ahead... A POLICY FOR THE ELDERLY



REPORT OF THE WORKING PARTY ON SERVICES FOR THE ELDERLY - OCTOBER 1988

HIQA

- Standards inadequate

Guide to Rehabilitation and Community Inpatient Healthcare Services Monitoring Programme

6 September 2019

Strategy

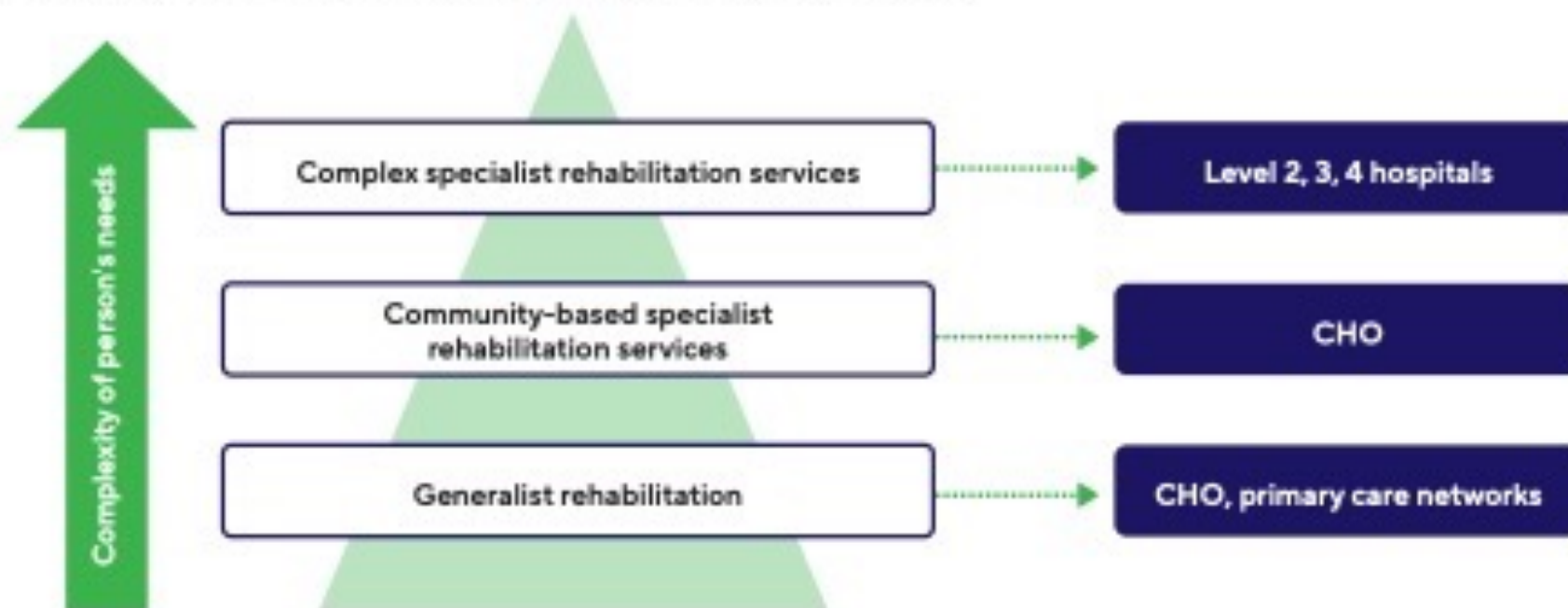
- Multiple iterations through ISPGM
- Circulated to NCPOP and HSE HSCP Advisory Groups
- Covers in-patient and community
- Aligned to HSE Neurorehabilitation strategy

Older people

- 300,000 discharges from acute hospitals per year
- 8,000 delayed transfer of care
- ?number sent to 'transitional' care
- Significant scope for reducing suffering, disability, trolley waits if appropriate rehabilitation in place



Rehabilitation services for older people in Ireland



Staff in WTE	2012 NCPOP in-patient rehabilitation ²⁵	Recommended revised 2022 ISPGM
Consultant		2
Medical		1.5
Nursing		As determined by Nursing Hours Per Patient Day (Safe Staffing Framework) ²⁶
ANP		1
CNS		3.7
Physiotherapy	2 Senior, 2 Basic	5.5*
Occupational Therapy	2 Senior, 2 Basic	5.5*
Speech and Language Therapy	1 Senior, 1 Basic	2.5*
Social Work	Access	2*
Clinical Nutrition	1 WTE	1*
Pharmacist		0.5
Podiatry	1 WTE	
Clinical Psychology		2*
Discharge planner/bed-manager		
Arts/music therapist		
Total	20.7	55



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*a combination of clinical specialist, senior, staff grade and assistant staff as services evolve.

Widespread diffusion

- DoHC
- HSE
- Advocacy
- Healthcare profession representative bodies
- Training bodies



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Moving forward

- The best time to plant a tree is 20 years ago
- The second-best time is now





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- Mightier than the force of marching armies is the power of an idea whose time has come

Victor Hugo