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SYMPOSIUM: NATIONAL NETWORK OF INTEGRATED CONTINUOUS CARE: EVOLUTION OF THE DEPENDENTS HEALTH PROFILE.

(Symposium composed of 6 communications)

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Comunication 1

DEPENDENTS ADMITTED TO LTMU AND ICCT: A COMPARATIVE STUDY ON HEALTH CONDITION EVOLUTION

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ABSTRACT

Introduction: The National Network of Integrated Continuous Care (NNICC) integrates a set of internment types and home support. The main objective is the provision of care for dependents and the training of family members to take care.

Objective: Compare the health condition evolution among dependents admitted on the Long Term and Maintenance Units (LTMU) and the Integrated Continuous Care Teams (ICCT).

Material and Methods: Exploratory study of quantitative profile with an inter-subject and intra-subject design. A sample of 466 cases: 241 admitted in 3 LTMU and 225 in 4 ICCT of Minho, Portugal. Was applied the form "Profile of dependents integrated in NNICC providers" in admission (A) and clinical discharge (D), for 1 year (between 2013 and 2014).

Results: Dependents on the ICCT, are older, have longer dependency time and greater autonomy reconstruction potential; fewer deaths and fewer exacerbations. In LTMU there is a higher % of: pressure ulcers, joint stiffness and ineffective coughing. In an inter-subject evaluation, dependents on the ICCT are less dependent on self-care, in A [$t(464) = -5.573$, $p < .001$], and D [$t(232) = -4.303$, $p < .001$]; lower bodily processes commitment either in A [$t(464) = -2.567$], $p = .011$] and D [$t(233) = -2.009$, $p = .046$]. In an intra-subject evaluation, on ICCT there are a higher number of cases with positive development between admission and discharge, on the dependency level and bodily processes commitment.

Conclusion: The dependents accompanied by ICCT have better health condition and positive evolution compared to those admitted to LTMU.

Keywords: Self-care, Bodily processes, NNICC, LTMU, ICCT