Health Policies

A NATIONAL REFERRAL OF AN INTEGRATED NETWORK OF CONTINUING CARE: A STUDY CASE

This study aims to characterize the National Long-Term Care Network (NL-TCN) users. The Portuguese National Health Service, was restructured in 2006 with the creation of the National Long-Term Care Network to respond to new health and social needs concerning the continuity of care.

Objectives- Analyse the sociodemographic profile of the network users and the review of hospital, local and regional management procedures.

Methods-we used various methods of observational or experimental nature (data processing and presentation of results with the program Statistical Package for Social Sciences, version 20, descriptive statistics (frequencies, crosstabs and test chi-square)). The Pearson correlation test showed a positive correlation between time procedures at the local and regional management and hospital's length of stay.

Results- from a sample of 805 cases, 595 (74%) were admitted in the NL-TCN, a rate lower than the national average (86%). Almost half of the sample was admitted in Rehabilitation Units (46%), while nationally the highest number of admissions was in Home Care Teams (30%). The average time from hospital referral to network admission was 9.73 days with a positive correlation between referred network management procedures and hospital length of stay.

Conclusions- For specialized units, the maximum waiting times were for the Long-Term and Support Units (mean 30.27 days) and the minimum waiting times were for Home Care Teams (mean 5.57 days). The average time between the local and regional management was 3.59 days. Almost 90% of referrals were orthopaedics, internal medicine and neurology and Network users were mostly elderly (average 75 years old), female and married. Most users were admitted to inpatient units (78%) and only 15% remained in their home town.

KEY WORDS: Healthcare system, hospital discharge management, long-term care network.