

Rural multidisciplinary sub-acute collaborative care. What matters most?

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Background: People living in rural towns who require acute specialist care are likely to receive this care in a regional facility which is often a long distance from their home town. If it is not safe for them to return home it is likely they will return to a rural facility for inpatient sub-acute care. The complex nature of such inpatients places pressure and expectation on a generalist rural workforce to provide their health care needs. Care delivered across long distances, within different facilities and by a number of different teams may jeopardise continuity of care. To address this, an innovative multidisciplinary hub and spoke model was implemented by the Sub-Acute Care Team (SCT), based in a regional facility, to collaboratively care for this patient cohort. After the implementation of the SCT research evidence demonstrated an increase in the adherence to clinical practice guidelines in rural facilities. Funding cuts subsequently halved the number of senior clinicians in the SCT.

Aim: To explore key mechanisms which are effective in enabling and sustaining adherence to sub-acute clinical practice within rural sites.

Method: This prospective study enrolled inpatients admitted to a 200 inpatient bed regional facility for specialist care who were transitioned to a 20-50 bed rural facility for sub-acute care.

Interventions: The SCT prioritised sub-acute care processes including case conferencing, comprehensive assessment and multidisciplinary SCT handover and follow up of inpatient progress and team processes in the rural site.

Results: This research is in progress and will complete data collection in early 2015. This presentation reports on Functional Independence Measure (FIM) changes for rural facility inpatients, rural clinician impressions of the model of care within their facility and rural inpatients' satisfaction with health service delivery.

Conclusion: Understanding the key components, 'what matters most', is likely to enable health services to sustain continuity of care and deliver effective sub-acute care management of complex rural facility inpatients.