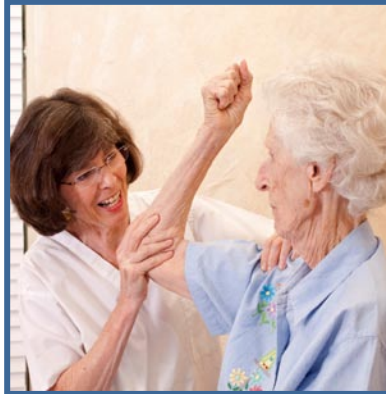




Adding In-Home Rehab Improves Outcomes After a Stroke

Stroke patients who are discharged early from the hospital and who receive home-based rehabilitation promptly afterwards are more likely to be independent than those who receive conventional care, states a large meta-analysis published in *The Lancet* (Lanhorne P, et al. Early supported discharge services for stroke patients . . . 365 (9458): 501-6). Peter Lanhorne, et al., combined results from 11 trials, involving 1,597 cases. They compared conventional hospital based care with programs designed to accelerate discharge by involving community-based care including physician supervision, physical therapy, occupational therapy, speech therapy, and medical nursing. The investigators found that those who were discharged early with home health care had statistically fewer deaths and reduced dependency. By providing home-based rehabilitation and other services described in these investigations, Baystate Visiting Nurse Association & Hospice (BVNAH) can help your patients realize the improved results described in this study.



Langhorne and colleagues found that stroke patients involved in programs focusing on early discharge through home-based care had an average length of stay (LOS) 8 days shorter than comparison groups. The subgroup of severe stroke patients were released an average of 28 days earlier. **The homecare groups proved six percent more likely to regain independence.** Five of the 11 trials reported an economic analysis. All five concluded that the savings gained from reduced LOS outweighed the costs of community-based programs such as home health. Hospitals would benefit from Early Supported Discharge (ESD) programs because they increase bed availability and because Medicare payment

systems strongly reward hospital efficiency.

This study did not state that patients should skip inpatient rehabilitation. On the contrary, best results have been achieved when patients have received expert inpatient rehabilitation followed promptly by home-based rehabilitation. In commentary published by *The Lancet*, Dr. Ronald Meijer states that admission to ESD services will be the optimum choice for patients who:

- would benefit from learning skills in the actual home instead of trying to carry over learning from a facility to the actual home
- no longer need the medical and nursing treatment that *only* a hospital can provide
- have moderate stroke severity
- can return home because of professional care and/or family support
- need rehabilitation treatment that can be provided at home
- might find the combination of traveling to an outdoor service with exercise to be too tiring

Call **BVNAH** to make this academic observation a reality for your patients. BVNAH physical and occupational therapists will promptly begin home based rehabilitation programs that identify individual needs and focus on skills important to each individual patient's home environment. BVNAH can also send nurses for medication review, speech therapists, and nurse aides to provide ADL support. These services make more efficient discharge and more context specific learning possible for patients suffering from stroke and many other maladies.



New Rehab Manager at BVNAH

Carson Reinart, DPT, has joined BVNAH as their new Rehab Manager. Carson has extensive home care experience having spent 15 years with the VNA of Boston. He relocated to this area two years ago and worked as the Therapy Program manager with Sundance Rehab. Since joining BVNAH, Carson has expanded the rehab staff with the hiring of six new professionals including PTs, PTAs, and a Speech Language Pathologist. This expanded capacity allows BVNAH to take additional referrals from physician offices for patients who may benefit from home health rehabilitative services.

*Consider Baystate Visiting Nurse Association & Hospice for your patients.
To make a referral call: 800-249-8298.*