

Managing Wounds and Cellulitis in Hospital at Home

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BACKGROUND

Hospital at Home continues to provide a platform for the collaboration between patients, care partners, and healthcare providers in the comfort of the patient's home.

Providing an acute level of care to our patients and allowing them to recover in their homes has proven to be a safe and effective environment to treat patients with wounds and cellulitis.

Utilizing technology to safely assess, treat, and monitor patients with wounds has proven to be effective, personalized and accessible, while improving the quality of life for patients in their own homes.

OBJECTIVES

Hospital at Home attempts to reduce hospital readmissions, lower health-care costs, and improve patient outcomes and satisfaction. Treating wounds in Hospital at Home eliminates the gap that inconsistencies may cause when assessing and treating wounds.

Our specially trained healthcare team is educated on utilizing technology to photograph consistently to assist the provider to appropriately assess, maintain or adjust the treatment plan.

METHOD

Treatment at home begins in the traditional hospital setting and patients with wounds/cellulitis can be transferred to home safely. Existing WOC orders remain active in the patient's EHR upon transfer to Hospital at Home. The specialized RNs are taught to take daily photos that include:

- informed consent
- A white background
- If an extremity is involved- capture bilateral extremities (for comparison)
- Wound measurements
- Double patient identifiers in photo with a tape measure, and identification of area of wound with the date the photo was taken


The virtual provider can make plan of care adjustments for our patients based on the consistent photos of the wounds/cellulitis. Wound care is performed by our RNs. The personalized, continuous focused care provided by our specialty care team also minimizes the risks associated with a hospital stay.

*Hospital at Home WOC consults require a virtual visit.

RESULTS

Treating wounds/cellulitis at home as an acute care patient has contributed to our improving readmission rate, reducing costs, improving hospital throughput, excellent patient experience, and decreasing the length of stay. Some of our results: Readmission rate from Hospital at Home 12% and Brick and Mortar 19.2%. Hospital at Home patient experience 90%.

 **90.9 Net Promoter Score, N = 44**

 **12% All-Cause Readmission Rate**
Compared to 19.2% in-house general adult readmission rate (similar patient type)



Conclusion

In conclusion, our practice highlights the importance of consistency while taking photos when virtually assessing and treating wounds. The results demonstrate that we can effectively treat wounds utilizing the technology available, and the virtual provider can assess and treat based off the photo images provided in the patient's EHR. Moving forward, further research could explore the use of advanced technology to evaluate wounds electronically while in Hospital at Home. This work contributes to a deeper understanding of the importance of accurate wound documentation using photos for the virtual Hospital at Home patient. .

REFERENCES

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