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| **Enhancing Respiratory Patient Care in the Community: A Retrospective Analysis at a Metropolitan Sydney Hospital** |
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| **Introduction/Aim:** Chronic respiratory conditions cause a substantial burden on Australia’s healthcare system, particularly concerning preventable hospitalisations associated with asthma and Chronic Obstructive Pulmonary Disease (COPD)1. The Respiratory Coordinated Care Program (RCCP) addresses this issue by delivering specialised community-based respiratory care, with goals of minimising hospital length of stay, readmission rate and improving patient satisfaction. This study, conducted at a metropolitan Sydney hospital, examines the incorporation of community-based respiratory medical support into the RCCP framework.**Methods:** A retrospective analysis of respiratory patients who received a home visit by the Respiratory Registrar at a metropolitan Sydney hospital over eight months. Demographic data, medical and hospital admission history was extracted from the electronic medical files for analysis. **Results:** 56 patients were reviewed from February to September 2023. The median patient age was 80 ± 14.3 years. 34 patients (60%) had COPD. Other conditions included pulmonary fibrosis (13 patients, 23%), obstructive sleep apnoea (5 patients, 9%), asthma (5 patients, 9%), pleural effusions (5 patients, 9%) and lung cancer (2 patients, 4%). 24 patients (42%) were on home oxygen and 7 patients (13%) were on non-invasive therapy. 31 patients (55%) were housebound and unable to attend clinic appointments. 32 patients (57%) had no further admissions to hospital after the home visit. For those experienced readmission, the mean time to the subsequent admission was 30.4 ± 48.4 days. 7 patients (13%) had 3 or more admissions in 2022 and 4 of these patients had reduced admissions in 2023.**Conclusion:** Providing home medical support to respiratory patients in the community is an important component of RCCP. This is especially crucial for patients dependent on home oxygen, and with limited capacity to attend outpatient appointments. Notably, most patients who received home-based medical consultation remained free from further hospitalisation and there was a trend to reduced re-admission rates for patients with recurrent hospitalisation. **Grant Support:** No grant support to declare. **References:**1Australian Government. "Chronic Obstructive Pulmonary Disease." 30 June 2023. Australian Institute of Health and Welfare. <https://www.aihw.gov.au/reports/chronic-respiratory-conditions/copd>. |