

POSTER PRESENTATION

Open Access

A new case management concept to decrease the rehospitalisation rate in heurischemic

G Rümenapf¹, S Geiger², A Godel³, W Vogelsang⁴, S Morbach⁵, N Wilhelm⁶, N Nagel^{7*}

From International Conference on Prevention & Infection Control (ICPIC 2011)
Geneva, Switzerland. 29 June – 2 July 2011

Introduction / objectives

The treatment of patients suffering from the neuroischemic diabetic foot syndrome (DFS) comprises arterial revascularization (e.g. below-knee bypass surgery), minor amputations, debridements, as well as long-term specialized wound care. Following premature discharge to the homecare sector, the quality of postoperative care is often inadequate. Many patients are readmitted. We studied the influence of a trans-sectoral case management (CM), ensuring outpatient care according to our clinical standards, on the readmission rate, length of hospital stay (LOS) and the hospital's costs/benefit situation.

Methods

DFS patients after implementation of the CM (Case Management Group (CMG); n = 202; 2007-2008) were compared with a historic control group (HCG; n = 190; 2005-2006). All patients had high maintenance foot wounds as well as healing incisional wounds following bypass surgery. Both groups were matched for the principal diagnosis, a patients clinical complexity level (PCCL) of 4, and G-DRG-related flat rate. From the 202 CMG patients evaluated, 54 received long-term trans-sectoral care by the CM.

Results

The rehospitalization rate in the CMG was significantly reduced versus the HCG (9,8 % vs.16,7%; p = 0,041). The reduction of the revolving door effect in the CMG significantly improved the costs/revenue situation for the hospital. The LOS was unchanged.

Conclusion

The implementation of a hospital-based trans-sectoral CM significantly reduces the rehospitalization rate in patients with neuroischemic DFS requiring bypass surgery. Hospital economics are improved.

Disclosure of interest

None declared.

Author details

¹Clinic for Vascular Surgery, Diakonissen-Stiftungs-Krankenhaus Speyer, Speyer, Germany. ²Case Management, Diakonissen-Stiftungs-Krankenhaus Speyer, Speyer, Germany. ³Medical Controlling, Diakonissen-Stiftungs-Krankenhaus Speyer, Speyer, Germany. ⁴CEO, Diakonissen-Stiftungs-Krankenhaus Speyer, Speyer, Germany. ⁵Dept. Of Diabetology and Angiology, Marienkrankenhaus Soest, Soest, Germany. ⁶Konzeptmanagement, B. Braun Melsungen AG, Melsungen, Germany. ⁷Medical Scientific Affairs OPM, B. Braun Melsungen AG, Melsungen, Germany.

Published: 29 June 2011

doi:10.1186/1753-6561-5-S6-P326

Cite this article as: Rümenapf et al.: A new case management concept to decrease the rehospitalisation rate in heurischemic. *BMC Proceedings* 2011 **5**(Suppl 6):P326.

Submit your next manuscript to BioMed Central
and take full advantage of:

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at
www.biomedcentral.com/submit



⁷Medical Scientific Affairs OPM, B. Braun Melsungen AG, Melsungen, Germany

Full list of author information is available at the end of the article