

Priority Home

Your care...Your home...Our priority...

Priority Home Highlights

We know that when given a choice, most individuals prefer to be at home than in a hospital. *Priority Home* is a new way of providing patient care that focuses the entire care team, in the hospital and in the community, on helping an individual in hospital return home safely.

While *Priority Home* is intended primarily for seniors, the philosophy of recovering at home with community supports is something that should be applied to all patients after a hospital stay.

Ultimately, *Priority Home* is about providing the right care, at the right time, in the right place. It's about ensuring that our hospitals and long-term care (LTC) homes are there for those who need them most, and that everyone on the care team is asking, "What can I do to help this person get home?"

Priority Home:

- Reduces risk for hospital acquired infections and hospital associated deconditioning;
- Gives time to optimize functioning post-acute hospitalization prior to making a major decision about the future;
- Provides the best environment to experience the significant life transition of moving to (in few situations) a personal care home;
- Empowers patients to participate in their care, along with improving patient outcomes;
- Improves the effectiveness of discharge planning;
- Reduces the number of alternate level of care (ALC) patients;
- Shortens Emergency Department (ED) length of stay, prevents avoidable ED visits, hospitalization, re-hospitalization and LTC placement;
- Improves patient flow;
- Provides better access to hospital and LTC for those who really need it.

How does Priority Home work?

- Promotes home as the primary discharge destination;
- LTC applications will generally not be started in hospital;
- Home Care, in partnership with other community programs, will have capacity to care for high-needs patients in the community.

How does Priority Home differ from current practice?

Priority Home requires a philosophical/culture change across the continuum of care. Discharge planning is initiated early in the patient's hospital stay, allowing for community services to be arranged in advance, so patients can safely return home. Central to the *Priority Home* approach is a new centralized home care service that will provide short term, intensive and restorative services to eligible clients for up to 90 days.

The bottom line:

The *Priority Home* philosophy is the responsibility of the entire health care team. Patients place a great deal of trust in their health care providers and you play an important role in the success of the *Priority Home* philosophy.

Your hospital has a *Priority Home* implementation team – talk to your manager for more information or visit the for more information http://webdev.manitoba-ehealth.ca/cps/wrha_intranet/priority-home/index.php

You can also visit <http://home.wrha.mb.ca/improvement/healing.php> for information on system wide changes occurring within the WRHA.