



Research Paper

The Importance of Care Continuity

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ABSTRACT

Continuity of care is a concept that refers to maintaining the provision of good quality medical care to patients throughout the needed treatment period, which is a special concern for caregivers and healthcare institutions. Continuity of care is considered a cornerstone and an "essential component" in general medical practice.

Continuity of care describes the relationship between a patient and a therapist over a certain period of time, and extends beyond the interpersonal aspects of therapy. Continuity of care is concerned with the quality of care over time, and is conceptually related to a patient's satisfaction with both the interpersonal aspects of care, and the coordination of the provided care. Medical care is a comprehensive process that can involve multiple caregivers and medical care institutions, and there is a vital need to maintain up-to-date information about each case and communicate it to all related caregivers in order to assure the delivery of appropriate and high-quality medical care.

Continuity of care refers to the continuous care relationship between professionals and patients, as the quality of the relationship between a patient and a healthcare professional is important in the delivery of proper personal care.

During emergencies, the ability to maintain continuity of care will be more difficult and challenging for the treatment providing team, treatment might be impaired as result of the emergency event, which will affect the ability to transfer of healthcare service from the therapist to the patient, which can endanger the life of the patient if the needed healthcare was undeliverable. Hospitals must provide solutions for such cases in order to ensure proper care continuity and avoid the endangerment of the lives of patients.

This article aims at explaining the concept of continuity of care and its importance in the provision of healthcare services.

KEYWORDS: continuity of care, caregivers, patients, chronic illness, medical care, care institutions.

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I. INTRODUCTION:

The concept of care continuity is as an important aspect describing the treatment experience of people who receive different treatments for services that are received over specific time periods. It involves consistent experiences and is related to how patients/clients experience a combination of different services. Moreover, the managerial continuity of treatment is defined as the time arrangement of services that complement one another under a joint management plan, provided by a variety of suppliers. The managerial continuity of treatment emphasizes the consistent use and implementation of treatment programs, especially when patients cross the boundaries of different organizations and health services. [1]

The American Academy of Family Physicians (AAFP) defined continuity of care as "a process in which the patient and the doctor collaborate with the ongoing involvement of the general health services to achieve the goal of the best quality of care." [2]

According to this definition, continuity of care illustrates the relationship between a patient and a therapist over a given period of time. The continuity of care extends beyond the interpersonal aspects of therapy. Another view of continuity of care is intrinsically associated with those responsible for treating patients with chronic illness and complex treatment needs, who must meet with professionals with a variety of expertise and skills. Continuity of care refers to the concept of "continuous" personal relationship and caring between therapist and patient. A form of care continuity can be measured by means of indicators of the extent of the patient's consultations with one therapist or group of therapists. Thus, the quality of the relationship between the patient

and the caregivers (professionals) is important in the provision of "personal care" "and concern for" the whole person. "The continuity of care results from current concerns to improve patient health, to improve the quality of care in a chronic illness. [2]

Continuity of Care Delivery:

Continuity of care is concerned with the quality of care over time. Continuity in the experience of care relates conceptually to a patient's satisfaction with both the interpersonal aspects of care and the coordination of the care. In most cases, medical care involves multiple caregivers and care institutions, and there is a vital need to keep up-to-date information and to communicate it to the different caregivers in order to assure delivery of appropriate, high quality medical care services. The continuity of care may refer to the continuity within the unit - a specific family doctor - over time, and different caregivers within a unit and at the change of shift junctures, where medical staff share information with each other, or continuity of care in the transition from one unit to another - coordination, collaboration and information transfer between different caregivers in different clinics, between hospital, between wards and facilities within the same hospital and in the transition from hospitalization to discharge.

The continuity of care is important to caregivers and patients alike, and it leads to an improvement in the satisfaction level, reduces costs and improves health. Keeping up the continuity of care is especially significant for those patients who are more dependent on health services, such as elderly patients, patients suffering from complex medical conditions, mentally vulnerable patients and patients with chronic diseases.

The family doctor, who is the primary coordinating caregiver, and the one who mediates and receives on additional treatment, plays a central role in ensuring the continuity of care over time. Studies show that in order to achieve a good continuity of care, it is important that the number of caregivers is kept to a minimum, meaning that the same doctors shall accompany a patient throughout his/her treatment process, and that the system be able to provide the flexibility and be able to adapt to changes in the living circumstances of the patient over time. Additionally, there must be transparency and accessibility to information regarding the patient, as well as good communication between all of the caregiving institutions and hospitals.

Patients are usually treated by a variety of therapists and organizations, raising the concern about non-continuous and complete care. Continuity of care is expressed in developing a relationship between a specific therapist and a patient, a connection that extends beyond specific episodes of illness, this continuity implies a sense of belonging between patients and therapists.

There is the patient's loyalty to the therapist on one hand, and the personal responsibility of the therapist on the other. The feeling of belonging is mainly felt in long-term care; this feeling encourages communication and trust between the parties and it reinforces the therapist's personal responsibility as well as the patient's sense of loyalty.

Continuity of care is seen as providing services to the patient in a coherent, logical, consistent, and long-lasting manner. In chronic and long-term illnesses, the process of building a therapeutic relationship is done with a group of therapists and not a single physician. The treatment is provided by a multi-professional team coordinated around the same treatment plan. It should be noted that a treatment plan is of high importance, it bridges past and present treatment and takes care of potential therapeutic needs. A treatment plan must be kept flexible and capable of adapting to the changing needs of the patient.

Each patient has a formal, personalized plan that helps organize the treatment provided by the multi-professional team, in addition to helping the patient navigate his or her path through the bounds of the therapeutic protocol, which incorporates several factors that give it care. It is desirable that these treatment plans include reference to various characteristics of the patient that will facilitate treatment and help achieve cooperation and satisfaction with the treatment such as religious, ethnic and similar characteristics.

Relationship between patient and caregiver:

Continuity of care refers to the concept of the continuous caring relationship between a professional and a patient. The quality of the relationship between patients and professionals is important in the provision of personal care. Coordinating the delivery of care in chronic conditions involves a range of activities, including self-management support, case management, multidisciplinary team working, and clinical care pathways to integrate specialist and generalist skills [2]

Continuity of care can be quantified by checking the patient's satisfaction with the provided treatment. An important point to consider is having an interpersonal relationship between the patient and the therapist and their impact on the patient's satisfaction. Most often, whenever there is a good interpersonal relationship between the patient and the therapist, an improvement in the patient's satisfaction is observed. A problem that arises is what matters first; whether there is satisfaction with the interpersonal relationship or whether there is an interpersonal connection with a satisfaction with the treatment.

Over time, continuity of care develops a relationship between therapists and patients, this relationship is based on trust, patient awareness, bio-loyalty and even satisfaction. Continuity of care is an extremely important element when it comes to chronically ill patients and even more important in emergencies, when a trust relationship is established, the strong bond provides calmness and confidence in dealing with such difficult times, a trust that the therapist will not abandon patients simply because there is an emergency. The personal connection is based on accepting a person regardless of who he/she is; this means that therapists will provide treatment regardless of the patient's religion, race, and gender. The physician knows his/her patients in depth, knows how they will behave, and how they might respond to various situations due to long hospitalizations duration. There is no doubt that a physician does not know how the patient will behave during a war, but can certainly rest his mind and reassure him about the treatment he is receiving.[3]

Continuity of care consists of two main elements; the first is related to the individual treatment and the other is related to treatment for a period of time. The first element is explained by the individual - how he/she perceives the integration and coordination activities in therapy and the second explains the long-lasting multidimensional chronological treatment. [4]

There are three main types of continuity of care; continuity of information, continuity of care management, and continuity of communication. Continuity of information is related to the use of previous information related to the patient to ensure providing optimal care for that patient in the present time. Information is the thread that links different therapists to the same patient at different places and times. In addition to medical and health related information that appears in a patient's medical record, important information that can be conveyed includes the patient's preferences and needs - physical, mental, religious, etc.

As for the continuity of care and management, it is related to the consistent and continuous approach to treatment management tailored to the changing needs of the patient. This continuity is especially important when dealing with chronic patients who require treatment from a number of different medical institutions who work together to accomplish the same purpose. Continuity is achieved when the required services are provided concurrently according to a joint treatment plan that gives a sense of security in the treatment future for both the therapist and the patient. It should be noted that in long-term care, the flexibility of the program is important; a treatment program must be adjustable according to the needs of the patient and any changes that may occur in his/her clinical condition.

The continuity of communication and relationship refers to the ongoing therapeutic relationship between the patient and his/her caregivers, which not only bridges the gaps between past treatments and the current treatment, but also constitutes a link to the patient's future care. This relationship is primarily valued in the field of mental health care and among primary care practitioners such as home care and hospital care, where the same team treats the patient over extended periods of time, providing a sense of coherence, continuity, and security in care. [5]

The existence of clinical records it is absolutely fundamental for the continuity of care. Clinical records contain a summary of patients' reported events, investigations, and opinions. It is highly important to create a continuous record that includes at least the patient-reported events and investigations, and in the best case, includes opinions related to the patient's case.

Patients' clinical records must be in a form that can be passed on from one doctor to another, and can be made available to all care providers, when needed, whether they are specialist or general practitioner. Optimal care involves sharing information and using information to improve care through performance-based audit.

Continuity of care must be embraced within an atmosphere of cooperation. Advances in medicine have led to a situation in which patients often have several conditions at the same time.[6]

Continuity of care during emergencies:

Detailed planning in case an emergency is necessary to ensure the safety of chronic patients. During emergencies, the ability to maintain continuity of care will be more difficult and challenging for the care providing team; treatment can be impaired, hence, transferring the service from the therapist to the patient can be impaired, which can endanger the life of the patient. Improving health for patients with a chronic health issues is a major goal of the overall health system. Patient should be given the sense that the various elements of the health services and their services are connected to each other, which is usually referred to as therapeutic continuity or treatment coordination.

Cancer patients receive intensive chemotherapy treatment according to a special protocol for each patient, which cannot be stopped under any circumstances (except for cases of severe drug sensitivity). Some cancer patients undergo orthopedic surgery to remove a tumor, the recovery after such a major surgery is very slow and difficult; a cancer patient after an orthopedic surgery should be confined to bed with minimal movement. Cancer patients after bone marrow transplantation should stay in special rooms with a negative

pressure ventilation system to reduce the entry of pollutants into their rooms, which can endanger their lives, especially those with a very weak immune system.

After receiving chemotherapy, a cancer patient starts to gradually suffer from the side effects of chemotherapy itself. Such as the decline of white cells count, resulting in a very weak immune system that can endanger the patient's life.

In case of emergency, the issue of continuity of care is very important for such patients. In emergencies, these patients may be in the course of receiving chemotherapy, or a bone marrow transplant operation, or a cancer patient with high body temperature and a weak immune system, these patients must receive a life-saving, irreversible antibiotic.

If the continuity of care is not met in the above-mentioned cases, and it can endanger the lives of cancer patients. Thus, it is very important to plan the treatment, perform exercises to practice treatment continuity and maximum response with a minimum injury during treatment.

Patients with chronic kidney diseases, especially those who undergo dialysis or had renal allografts, are particularly vulnerable. Regional disaster management plans must assume that dialysis units will be nonoperational and that dialysis patients must be treated away from their customary dialysis facilities. After disasters, transportation will network function poorly, and patients and dialysis facilities may need to require help from emergency responders or military personnel, as directed by the local emergency operations center.[7]

Fortunately, many disasters, such as hurricanes, wildfires, ice storms, and floods, can be predicted days prior to their occurrence. Advance warnings and early evacuations will likely improve the continuity of care and the safety of chronic patients during disasters.

In order to maintain continuity of care for patients, especially patients with chronic diseases, hospitals must maintain business continuity for patients that are being hospitalized, and patients who come from the scene of the disaster. At the same time, hospitals are supposed to deal with the internal problems related to the hospitals' facilities (such as severe damage caused by an earthquake or a missile attack). Moreover, hospitals are supposed to provide care continuity under all circumstances, which requires hospitals to be prepared for any scenario, and to provide an alternative solution for chronically ill patients, including, but not limited to cancer patients, patients who underwent orthopedic surgeries, patients in delivery rooms, and patients in intensive care units.

II. SUMMARY:

To summarize, continuity of care is a highly important concept in the field of medical services, and it is importance for healthcare providers and for patients. Maintaining care continuity at all times is very essential for healthcare institutions, especially in times of disasters. In order to maintain continuity of care for patients, especially patients with chronic diseases, a hospital must maintain care continuity and provide treatment for currently admitted patients and for patients who come from the scene of the disaster. As part of their continuity of care readiness, hospitals must be prepared for any scenario, and must be able to provide alternative solutions for the patients in case of any emergency.

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