

Guided care provides better quality of care for chronically ill older adults

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Patients who received Guided Care, a comprehensive form of primary care for older adults with chronic health problems, rated the quality of their care much higher than patients in regular primary care, and used less home care, according to a study by researchers at Johns Hopkins University. In an article published online by the *Journal of General Internal Medicine*, researchers found that in a 32-month randomized controlled trial, Guided Care patients rated the quality of their care significantly higher than those in normal care, and were 66 percent more likely to rate their access to telephone advice as excellent or very good. Patients also had 29 percent fewer home health care visits.

"As more practices move to a comprehensive care model, Guided Care's team care approach can help ensure better quality care and more satisfied patients," said Bruce Leff, MD, co-investigator of the study and professor with the Johns Hopkins School of Medicine and Johns Hopkins Bloomberg School of Public Health. "In addition, the nearly one-third reduction in home care use highlights how providing comprehensive care for high-risk patients can reduce health service utilization."

According to the study, Guided Care patients also experienced, on average, 13 percent fewer hospital re-admissions and 26 percent fewer days in skilled nursing facilities. However, only the difference in [home health care](#) episodes is statistically significant. In earlier reports, physician satisfaction was higher and [family caregiver](#) strain was lower with Guided Care.

Guided Care is a model of proactive, comprehensive health care that can help primary care practices transform into patient-centered medical homes. Guided Care focuses on improving care for patients with multiple [chronic health conditions](#). Guided Care teams include a registered nurse, two to five physicians, and other members of the office staff who work together to perform home-based assessments, create an evidence-based care guide and action plan, monitor and coach the patient monthly, coordinate the efforts of all the patient's healthcare providers, smooth transitions between sites of care, promote patient self-management, educate and support family caregivers, and facilitate access to community resources.

More information: "A Matched-Pair Cluster-Randomized Trial of Guided Care for High-Risk Older Patients," *Journal of General Internal Medicine*, 2013.

Provided by Johns Hopkins University Bloomberg School of Public Health

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