


Volume 13, 23 October 2013

Publisher: Igitur publishing

URL: <http://www.ijic.org>

Cite this as: Int J Integr Care 2013; Annual Conf Suppl; [URN:NBN:NL:UI:10-1-114686](https://nbn-resolving.org/urn:nbn:nl:ui:10-1-114686)

Copyright: 

Conference Abstract

Collaboration in transitional care - a study of a post-discharge programme for elderly patients

Susanna Bihari Axelsson, Associate Professor, Aalborg University, Sweden

Correspondence to: **Susanna Bihari Axelsson**, Aalborg University, Sweden, Phone: +46 76 7860896, E-mail: susanna@socsci.aau.dk

Abstract:

Background: The Norwegian collaboration reform involves both structural changes and financial incentives to improve collaboration between municipalities and health enterprises. In Norway, the hospitals are organised as health enterprises, while the municipalities are responsible for primary care and long-term care. The programme studied took place in an intermediate ward for transitional care of elderly patients, which was run in collaboration between a municipality and a local hospital belonging to a health enterprise. The aim of the study was to describe and analyse the collaboration and its possible effects on the organisations involved.

Methods: A combination of interviews, questionnaires and analyses of official statistics.

Results: The collaboration between the municipality and the health enterprise was working well on the top management level, but was more problematic on the operative level. Patients who received transitional care at the intermediate ward were more satisfied than those who received similar treatment at hospital departments. The ward had lower average costs per patient than the departments. After discharge, the patients from the intermediate ward had also less need for care and support in their homes. Therefore, the costs of the health enterprise as well as the municipal could be reduced by transferring patients to the ward.

Discussion: In many studies of collaboration, there are more problems on the top level than on the operative level, where professionals often see the need for collaboration around a specific patient or patient group. In this study, the collaboration was working better on the top level than on the operative level. Over time, however, the collaboration on the operative level was improving through mutual adjustments of routines and an increased understanding of the advantages of collaboration.

Keywords

elderly patients, transitional care, collaboration, interorganisational, interprofessional

Presentation available at <http://www.integratedcarefoundation.org/content/23-transitional-care-and-care-coordination>