## HOME HEALTH CARE IN LEBANON





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Home health care refers to the delivery health care services in the home setting. This includes physician services, nursing services as well as physical therapy and other forms of medical treatment. The benefits of providing medical care at home are many and include:

- Convenience to the patient and family
- Reduced risk of iatrogenic infections
- Reduction in cost of care
- Increase in hospital bed availability

Advances in medical technology have led to an increase in life expectancy and the aging of the population. With this demographic transition comes a rise in the prevalence of chronic diseases and an associated increase in the cost of healthcare<sup>1</sup>. Transitioning some of the medical care that was traditionally provided in the hospital to the home setting has been suggested as one way to reduce the burden on hospitals and reduce the health care bill while maintaining good quality of care<sup>2, 3</sup>. The availability of home health care can allow for early hospital discharge, reduce bed blocking and result in significant cost savings<sup>4</sup>. This cost saving has been clearly demonstrated in the setting of terminal illness and end of life care. Home-based palliative care has been shown to decrease in physician visits, bed-days, ICU admissions, and medical tests<sup>5</sup>. When home-based palliative care is made available at a national level and affordable to the public, the end of life care bill is significantly reduced<sup>6</sup>.

In addition to reducing the cost of medical care, studies have shown that home nursing can reduce patient distress. improve symptom burden and help patients maintain their independence longer than patients who do not receive home care<sup>7</sup>. In a randomized controlled trial evaluating the use of home healthcare teams, Zimmer et al found that in addition to fewer hospitalizations incidents, less outpatient visits, and less nursing home admissions, patients and their caregivers expressed greater satisfaction with their care than those in the control group.<sup>8</sup>

Many disabilities and illnesses can be managed in the home setting. Advanced evidence-based nursing guidelines have been developed for that purpose and these have been applied successfully with positive outcomes<sup>9</sup>. As the benefits of home health care became more evident, national health plans and health insurance companies have begun to integrate home health services into their packages as a means to cut costs and to improve quality of care.

In Lebanon, local physicians and midwives have provided home based medical services to patients in their community for many years. Non-governmental and faith based organizations have also served as providers of home health services in their communities although it does not appear that these services are planned or delivered in a structured or organized fashion. Private home health agencies did not appear in the Lebanese market until the late 1990's and their services were initially restricted to the Greater Beirut area. In recent years, there has been a significant increase the number of home health care agencies. A webbased search for home health agencies in November of 2012 yielded a total of 16 agencies in Lebanon. Follow up telephone calls confirmed that there are 12 private home care companies actively providing nursing care and physical therapy in addition to a variety of other services such as medical transportation, medical equipment rental, and babysitting services. Few of these companies provide services outside of Greater Beirut.



Although there is no reliable data on place of death in Lebanon, it is believed that most of the terminally ill patients in Lebanon are cared for in hospitals and ICU departments, where they are more likely to receive invasive and unnecessary procedures that are unlikely to be of benefit and may in fact harm them<sup>10, 11</sup>. Balsam-The Lebanese Center for Palliative Care is a nongovernmental organization that provides home based palliative care services to patients in the Greater Beirut area. By providing medical care at home to patients with advanced illnesses, organizations like Balsam give patients and their families the option of remaining at home and receiving the medical care that they need even in the setting of serious and advanced illness.

The stress associated with leaving the hospital and going home can be high. Families may question whether they Home care allows patients and their families more choice. are making the right decision. In seriously ill patients, With advanced illness, the loss of control on ones body and stress can be associated with the transfer itself as well as destiny that is associated with the disease is often a major concerns about whether the home setting is adequately struggle for patients. Remaining in their home, a setting prepared to meet the needs of the patient<sup>13</sup>. This is espethat they are comfortable in and familiar with, can increase cially the case when a patient has been in the hospital for their sense of control and therefore improve their over all a prolonged period of time. In cases of advanced illness, wellbeing. In their home, patients remain surrounded by discharge home can sometimes be viewed as an admission familiar objects and this can be extremely comforting to of defeat and acceptance of the fact that there is no more them. They can continue the eat the food that they are achope for cure. This can create conflict within families customed to eating prepared in the way that is familiar to when some members are interested in taking the patient them. Having the choice of what to eat and can improve home and others are fighting this move for fear of not dooral intake in situations where anorexia is a problem. Reing enough for their loved ones. maining at home also eliminates the restrictions of the hospital in terms of number of visitors and visiting hours al-The main barrier facing access to home care remains finanlowing patients to be surrounded by loved ones at anytime.

cial coverage. Most of the services offered by home care companies are not covered by public or private insurers. In our experience, most patients start to feel better when Only recently, some private insurance companies started

they return home from the hospital. There is an improvement in their mood, an increase in their appetite and an overall increase in functional status. Patients who have been bed-ridden, withdrawn and refusing to eat in the hospital can start eating and become more engaged. Patients who are terminally ill or imminently dying may have a few "good days" when they are active and engaged with their families after they return home from the hospital. This observation is supported by studies that have documented that patients usually prefer to spend their last days at home next to their families<sup>12</sup>.

Some patients and caregivers feel more secure in the hospital setting. The presence of nursing staff and easy access to physicians around the clock can reduce anxiety and many feel this reduces the burden on caregivers. Caregivers may believe that it is safer to keep patients in the hospital and are not aware of the increased risk of hospital-acquired infections that are associated with prolonged hospitalization. Caregivers worry that they may not act appropriately or quickly enough in the case of an emergency and this can be a barrier to home care for many. However, when adequatelv supported, caregivers can usually provide their ill loved ones with the care that they need. Caregivers who are able to support their sick family members at home tend to feel empowered and proud of the fact that they are able to play a supportive role. This sense of pride remains even after the patient dies, and we believe it can help family members in their grief and make the bereavement period easier.

## HOME CARE

to cover basic medical procedures such as antibiotic administration, intravenous hydration, phlebotomy and laboratory testing at home<sup>13</sup>. These are still not covered by public insurers such as the National Social Security Fund (NSSF) or the Ministry of Public Health (MOPH). As a result, the private home healthcare agencies cater primarily to people from the higher socioeconomic income brackets who can afford to pay out of pocket and are not accessible to a large proportion of the population 13. To insure access to their services to all without regard to their ability to 2012, from Programmes and Projects: Cardiovascular Disease pay, organizations like Balsam provide their services free of charge and must rely on private donors to cover their costs. This is a major barrier to growth and unless reimbursement schemes change, access to such services will remain limited.



Home health care services are an important component of the health care system and should be made available, affordable and accessibe to all patients who could benefit from them regardless of their place of residence or their ability to pay. This can significantly reduce the health care bill, improve quality of care, and increase patient satisfaction. Patients and families should have the right to receive high quality affordable care in the setting of their choice. At this point in time, home based care remains fragmented *Lebanon*.

and only attainable to a small proportion of the population. Developing a mechanism to reimburse home health care in the country is the first step towards intergrating this service into the health care system. Such a change could have a major impact of the health of the population and the health sector in our country.

## References

<sup>1</sup>WHO. (2012). World Health Organization. Retrieved 11 27, Strategic Priorities: http://www.who.int/cardiovascular diseases/priorities/en/

<sup>2</sup>Elliot, S. (2008). Healthcare in the Home, Nursing Management. 39 (12). 39-42.

<sup>3</sup>Mehmood., S.(2012) Healthcare's coming home The Health Service Journal: 26-27

<sup>4</sup>Hammond J., (1979) Home health care cost effectiveness: an overview of the literature. Public Health Rep. 94(4): 305-311 <sup>5</sup>Brumley RD, Enguidanos S, Jamison P, Seitz R, Morgenstern N, Saito S, McIlwane J., Hillarv K, Gonzalez J., (2007) Increased Satisfaction with Care and Lower Costs: Results of a Randomized Trial of In-Home Palliative Care Journal of American Geriatrics Society 55 (7):993-1000

<sup>6</sup>Bosanguet N (2002) Models of Palliative Care Service Delivery. What is most cost effective? Disease Management and Health Outcomes 10 (6) 349 - 353.

<sup>7</sup>McCorkle R., Benoliel J.Q., Donaldson G., Georgiadou F., Moinpour C., Goodell B., (1989) A randomized clinical trial of home nursing care for lung cancer patients. Cancer 64 (6), 1375-1382

<sup>8</sup>Zimmer J.G., Groth-Juncker A., Mccusker J. (1985) A Randomized Controlled Study of a Home Health Care Team, American Journal of Public Health 75(2) 134-141

<sup>9</sup>Peterson, L. E. (2004), Strengthening Condition-Specific Evidence-Based Home Healthcare Practice. Journal for *Healthcare Quality*, *26 (3): 10–18* 

<sup>10</sup>Daher M, Estephan E, Abu-Saad Huijer H, Naja Z.(2008) Implementation of palliative care in Lebanon : Past, present, and future. J Med Liban; 56 (2): 70-76.

<sup>11</sup>Hughes-Hallett, T., Craft, A., Davies, C., Mackay, I., & Nielsson, T. (2011). Funding the Right Care and Support for Everyone. Secretary of State for Health. Palliative Care Funding Review.

<sup>12</sup>Doumit, M.A.A., Abu-Saad Huijer, H., Kelley, J.H. (2007). The lived experience of Lebanese oncology patients receiving PC. European Journal of Oncology Nursing, 11 (4), 309–319. <sup>13</sup>Ghalayini, Z. (2012, 11 19). Marketing Manager; Valens Home Health Care. (L. Baltouni, Interviewer) Hamra, Beirut,



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