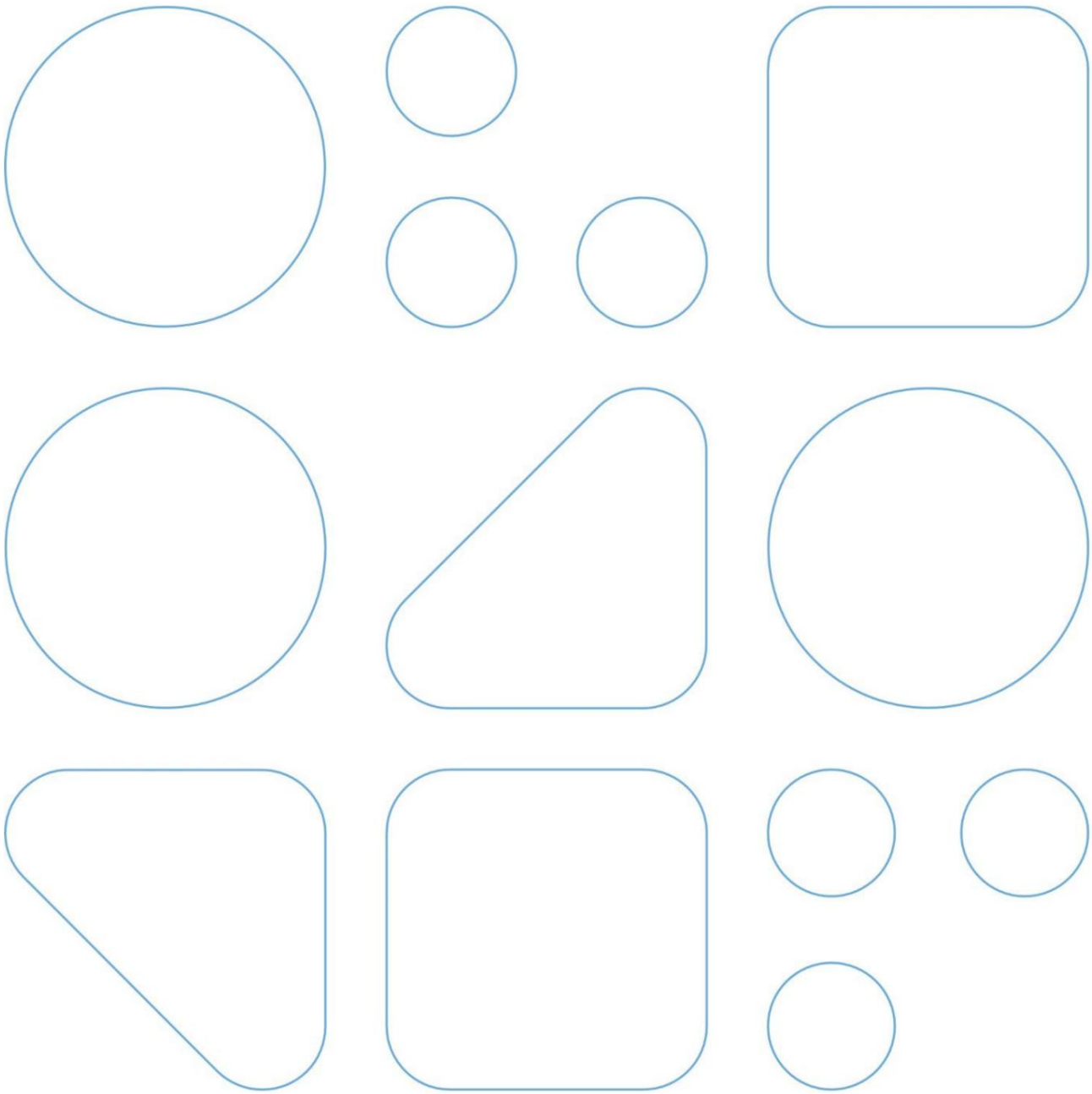
AKERSHUS UNIVERSITETSSYKEHUS

Subplan 1: The elderly patient

2022-2026

20.04.2022



Development plan 2040

Subplan 1: The elderly patient

This plan is one of nine sub-plans under Development Plan 20240, which describes Akershus University Hospital's (Ahus) main goals and plan for the development of the hospital up until 2040. The sub-plans describe specific projects and development initiatives that are planned for the next four years. The partial plans are rolled out and updated annually, as part of the company's prioritization and budget process.

Nine sub-plans have been drawn up:

Subplan 1: The elderly patient

Sub-plan 2: Acutely and critically ill patients

Sub-plan 3: Cancer

Sub-plan 4: Mental healthcare and substance abuse treatment

Sub-plan 5: Children and young people

Sub-plan 6: Competence and education, recruiting and retaining

Sub-plan 7: New tasks and further development of patient services

Sub-plan 8: New work processes and technology

Sub-plan 9: Research and innovation

About the investment area

The population is growing throughout the catchment area. The number and proportion will grow strongly in the coming years and will lead to an increased need for specialist healthcare services.

Aging and aging processes are not described by chronological age alone, it is individual and how one copes with life is also influenced by the environment and financial and relational resources. As a result of this variation, there is a need to make individual assessments of those who are *frail* and need more tailored treatment .

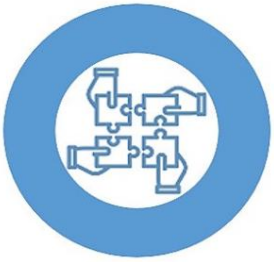
With more elderly people living longer, the hospital must plan for growth in age-related diseases, such as cardiovascular disease, cancer, chronic lung diseases, dementia and diabetes. Such a development will require closer cooperation between different specialties and professional groups within the hospital and place higher demands on interaction with the primary healthcare service and the patient and next of kin.

The sub-plan for the elderly patient is a strategic plan for the development of good service offers for the elderly patient in the years ahead. It contains target descriptions and measures that are planned to be carried out during the planning period. The partial plan is a 4-year plan, which must be updated annually.

Plan for the period 2022-2026

The action plan for the elderly patient describes the measures to be taken within the specified period to achieve the goals in the sub-plan.

How many of the measures are carried out and how quickly they are carried out will depend, among other things, on project framing and funding. Several of the goals in the action plan are long-term, which means that they will be initiated, but not completed, within the plan period.



Area of focus 1: Comprehensive and coherent health services across service levels

Ahus shall initiate and actively participate in the work with a holistic and coherent health service for elderly patients with complex needs.

Goal	Measures 2023 - 2026	Measure 2022	What does it take to succeed?
A has been established good culture of interaction between service levels	Establish working group as: • Describes needs • Elaborator proposed solution • Plans and implements "Health Community Week", in a suitable form. Prepares a plan for teaching and hospitalization between the hospital and nursing home Establish "Health Community Week" as an annual campaign in the hospital's reception area		Good anchoring and representatives from various divisions in hospitals, as well as representatives from various municipalities in the primary healthcare service
Frail elderly people with complex needs must have an offer of integrated health services	*Integrated health services for frail elderly people with complex needs* (IHT) spread to the Ahus reception area	• Spread IHT to 4-6 new ones municipalities • Establish follow-up research	• Funding • Collaboration with researchers • Digital support tools: Package sequence IHT Digital treatment plan - Interaction data
Reduce risk in transitions between hospitals and municipalities and avoid unnecessary readmissions	The patient safety measure *Safe and equal discharges* are introduced for bed areas that treat many elderly people	*Safe and equal discharges* as a theme for the learning network 2022/2023, including ensuring the transfer of epicrisis to the right recipient at the right time	• Participate in the learning network *Best on getting better* • Spring 2022: 1-2 bed areas express their interest in participating with this theme
	Continue the approach from the collaborative project My life, my responsibility (MILA) trial of digital home monitoring for municipalities and departments	MILA2 has a project end in March 2022 Continue the approach from MILA2 to more departments in the hospital and municipalities. • Who and how is clarified in dialogue with relevant departments and municipalities with process support from Innomed	• Document results from MILA2 • Continue the cooperation with Upper Rome - • Continued access to a solution for digital home follow-up that supports shared treatment responsibility and access to a digital self-treatment plan • Apply for funds from the National Welfare Technology Programme, dissemination project in 2022

Area of focus 2: Elderly patients must be ensured the right treatment at the right time and experience good and adapted patient care

The activities at Ahus must be arranged so that the treatment offer is best adapted to the elderly patient. This will involve closer collaboration on subjects, areas and patient progress. Many older people will have chronic and complex disorders that will require close collaboration between specialists and specialist groups.

Goal	Measures 2023 - 2026	Measure 2022	What does it take to succeed?
Frail elderly patients should experience a hospital course adapted to their needs	Increase in the number of geriatric beds in line with the strategic land plan (7-8 beds)		Rokkade in connection with the rebuilding of Ahus Nordbyhagen • Concept investigation should include taking care of delirium/ dementia-friendly design
	Based on the mapping: Implement measures for elderly-friendly emergency departments	Map needs and recommend measures for elderly-friendly emergency departments	Draw up a mandate and establish a working group
	All departments that treat the elderly have received support for implementation and follow-up Dementia-friendly hospital by 2026	Support implementation of Dementia-friendly hospital with 2 new bed areas	• Bed areas define local goals and sets aside local resources • Automatic extracts to the risk table in QlikView
	Map the need and opportunities for strengthened food provision at several departments that treat many elderly people. Implement further developed food offerings for the elderly		
Strengthen specialized treatment and professional collaboration across specialist departments in the hospital	Expand the solution for multidisciplinary geriatric presence (equivalent to orthogeriatrics) in various departments	• Establish dialogue with specialist departments that treat many elderly people • Investigation and implementation of various possible models for organization and financing arrangements for geriatric support	• Presupposes increased job resources and/or partial funding from the department receiving the offer • Work to achieve ISF • Train geriatricians locally to ensure recruitment
Patients and relatives should experience receiving customized information	Continue the introduction of patient notes as part of the epicrisis template or a separate discharge note at all relevant departments	Adapted information for patients as part of the epicrisis template will be introduced as a theme under the 2022/2023 learning network together with epicrisis and safe discharge.	• Participate in the learning network *Best on getting better* • Spring 2022: 1-2 bed areas express their interest in participating with this theme
Ensure the right treatment at the right time and avoid over- and under-treatment	Establish screening to detect frailty in the elderly over the age of 75 before starting demanding treatment regimens in specialist departments that often request supervision for this		• Dialogue with departments where this is needed • Funding of geriatric resources

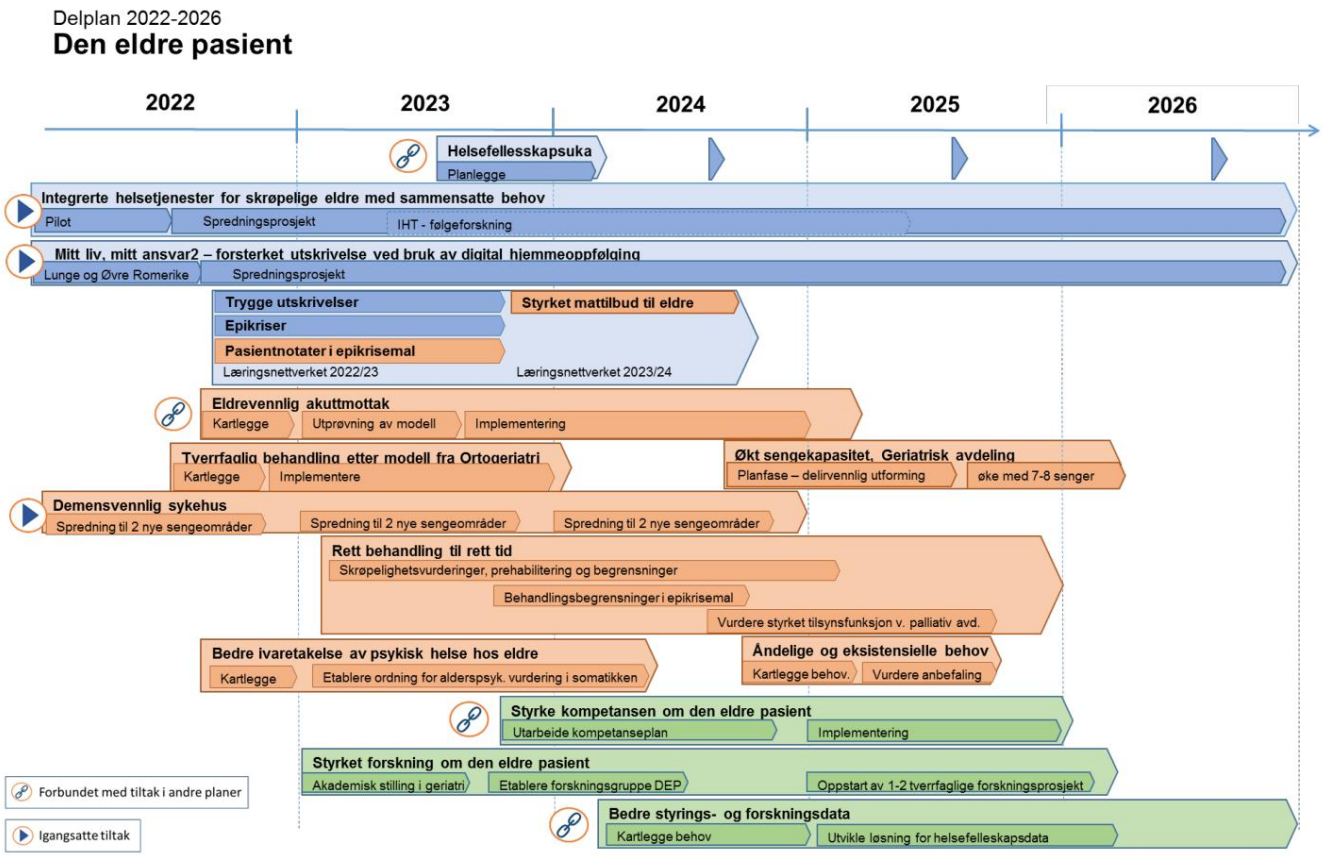
	Processing restrictions and clarification of responsibilities into the epicrisis template		Strengthened supervisory function at the palliative care department for support for palliative care measures
Better care for mental health among the elderly	Map and establish a system for strengthened geriatric psychiatric assessment in somatics	Establish a strengthened supervisory function and cooperation between the department for geriatrics and geriatric psychiatry	Draw up a mandate and set up a working group
	Consider the establishment of joint professional forums and networks within geriatric psychiatry between hospitals and municipalities		
The patient must have his spiritual and existential needs regardless of culture and religious community.	Map needs and recommend measures to ensure that patients from different religious or life-view communities have their needs met		

Area of focus 3: Develop and strengthen services for the elderly through competence development and research

Ahus must ensure sufficient personnel with the right skills to look after elderly people with complex needs. Knowledge development will involve an increased focus on pragmatic research and implementation of new knowledge.

Goal	Measures 2023 - 2026	Measure 2022	What does it take to succeed?
Strengthen the competence of all employees about the elderly patient	Preparation of a competence plan for the care of elderly patients Implement training plans in ht competence plan in all divisions of the hospital		Set up a working group with representatives from various departments in the hospital as well as from the primary healthcare service
Increase in pragmatic research on older patients and the services they receive	Expertise and a research group around the elderly patient will be established during 2023	Academic positions at the geriatrics department: a professorship with 20% set aside for teaching and furthering expertise on the elderly patient	
	Include Ahus' four thematic investment areas as assessment criteria for Ahus' strategic research funds. Create 1-2 interdisciplinary, Ahus-outgoing projects with a focus on the elderly patient and with pragmatic data follow-up/data capture in the primary healthcare service		Establish collaboration across professional groups and divisions.
Better management data	In collaboration with the municipalities, map needs and develop solutions for health community data		Financing

Process drawing



Akershus University Hospital HF

Visiting address: Sykehusveien 25, Lørenskog
Mailing address: PO Box 1000, 1478 Lørenskog
Telephone: 67 96 00 00
Email: postmottak@ahus.no