An analysis of the management of brief follow-ups in regional patients with spinal cord injuries of occupational origin

GERARDO CORREA-ILLANES 1
Departamento de Rehabilitación, Hospital del Trabajador de Asociación Chilena de Seguridad

ABSTRACT

Introduction: Spinal cord injury (SCI) patients require periodic preventive health screening systems for early detection of complications.

Objective: To evaluate the quality of a Brief Follow-up Evaluation (BFE) program implemented in SCI Hospital del Trabajador (HT), with patients living outside the Central Metropolitan region, considering efficacy and efficiency.

Patients and Methods: A retrospective case series study of SCI patients residing between Arica and Linares (Chile), who completed BFE between the year 2000 and 2012. A BFE consists of a scheduled check-up appointment at HT, in which the patient and laboratory tests performed at the patient’s regional hospital, are evaluated sequentially by a multidisciplinary team. Program results were compared with the traditional system used since 1998. Quality indicators were established for efficiency and efficacy, and cost savings evaluated.

Results: During the study period, 95 patients participated in one or more BFE. The efficiency of the program improved: it required only 22.9% of the time previously needed; patient participation was 2.6 higher; 76% of patients attended all required laboratory tests, and 87% completed a comprehensive multidisciplinary evaluation. On average, 60 complications were detected per year. The program saved 1,800 hospital bed days per year, equating to a total opportunity cost per patient of U.S. $ 192,442, or U.S. $ 14,803 per year.

Discussion: The greatest strength of the program is its foundation in a standardized, multidisciplinary approach, involving the systematic recording of information, and structured detection and resolution of complications in our health system. Conclusion: The Brief Follow-up Evaluation program at HT proved successful, with high efficiency and efficacy compared to the previous system.

Key words: Follow-up care; long-term care; spinal cord injuries; preventive medicine; rehabilitation.