

Nursing Homes and E-health

Shuyan Xie, University of Alabama, USA

Yang Xiao, University of Alabama, USA

Hsiao-Hwa Chen, National Cheng Kung University, Taiwan

ABSTRACT

A nursing home provides skilled nursing care and rehabilitation services to people with illnesses, injuries or functional disabilities, but most facilities serve the elderly. Nursing homes provide various services for different residents' needs, including daily care, assistance for the mentally disabled, and drug rehabilitation. The levels of care and quality of care provided by nursing homes have increased significantly over the past decade. The trend is toward continuous quality development and resident satisfaction; therefore, healthcare technology plays a significant role in nursing home operations. This article discusses general information about current nursing home conditions and systems in the United States and explores how technology and e-health help improve the nursing home development based on the present needs and trends. The authors also report on Thomasville Nursing Home, discussing current trends in nursing home technologies.

Keywords: E-health, Nursing Homes, Rehabilitative Technologies, Technology, Telemedicine

INTRODUCTION

Nursing home is a significant part of long-term care in the health care system. Nursing homes provide a broad range of long-term care services—personal, social, and medical services designed to assist people who have functional or cognitive limitations in their ability to perform self-care and other activities necessary to live independently. This survey releases some information about nursing homes, including general introduction of nursing homes in USA, resident information, quality of life, services that are providing, governmental regulations, and developing trends. Objectives of this article are providing the broad information about cur-

rent nursing homes in the United States to help understand the positive and negative situations that confront to nursing homes. Furthermore, our nursing home visiting report points out the real residents' experience and opinions on their life qualities, needs and attitudes on technologies. Based on this information we introduce more technological innovations to improve nursing home development.

PART I: NURSING HOMES IN THE UNITED STATES

General Information

A nursing home, a facility for the care of individuals who do not require hospitalization and

DOI: 10.4018/jhdri.2009100104

who cannot be cared for at home, is a type of care of residents. It is a place of residence of people who require constant nursing care and have significant deficiencies with activity of daily living (NNHS, 2004).

People enter nursing homes for a variety of reasons. Some may enter for a brief time when they leave the hospital because they need sub-acute care, such as skilled nursing care, medical services, and therapies (NNHS, 2004). Others, however, need long-term care (LTC). LTC is generally defined as a broad range of personal, social, and medical services that assist people who have functional or cognitive limitations in their ability to perform self-care and other activities necessary to live independently (NNHS, 2004).

In the United States, nursing homes are required to have a licensed nurse on duty 24 hours a day, and during at least one shift each day, one of those nurses must be a Registered Nurse (RN) (NNHS, 2004). A RN is a health care professional responsible for implementing the practice of nursing in concert with other health care professionals (American Nurses Association, 2006).

In April, 2005, there were a total of 16,094 nursing homes in the United States. Some states having nursing homes that are called nursing facilities (NF), which do not have beds certified for Medicare patients, but can only treat patients whose payments sources is Private Payment, Private Insurance, or Medicaid (U.S. Department of Health and Human Services, 2008). Medicare is a social insurance program administered by the U.S. government, providing health insurance coverage to people who are aged 65 and over, or who meet other special criteria (Castle, 2008). Medicaid is the U.S. health program for eligible individuals and families with low incomes and resources. It is a means-tested program that is jointly funded by the states and federal government, and is managed by the states. Among the groups of people served by Medicaid are eligible low-income parents, children, seniors, and people with disabilities. Being poor, or even very poor, does not necessarily qualify an individual for

Medicaid (U.S. Department of Health and Human Services, 2006a).

SERVICES

Baseline Services

Those services included in the daily rate. The following basic services should be made available to all the residents (U.S. Department of Health and Human Services, 2006b; U.S. Department of Health and Human Services, 2003):

- Lodging-a clean, healthful, sheltered environment, proper outfitted;
- Dietary services;
- 24-hour-per-day nursing care;
- Pharmacy services;
- Diagnostic services;
- The use of all equipment, medical supplies and modalities used in the care of nursing home residents, including but not limited to catheters, hypodermic syringes and needles, irrigation outfits, dressings and pads, etc.
- General household medicine cabinet supplies, including but not limited non-prescription medications, materials for routine skin care, dental hygiene, care of hair, etc., except when specific items are medically indicated and prescribed for exceptional use for a specific resident.
- Assistance and/or supervision, when required, with activities of daily living, including but not limited to toileting, bathing, feeding and assistance with getting from place to place.
- Use of customarily stocked equipment, including but not limited to crutches, walkers, wheelchairs or other supportive equipments, including training in their use when necessary, unless such items are prescribed by a doctor for regular and sole use by a specific resident.
- Activities program, including but not limited to a planned schedule of recreational, motivational, social and other activities

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