

## Hospital in the Home (HITH)

<b>Document date</b>	October 2007
<b>Program</b>	External program
<b>Program code</b>	A program code is established for each HITH program (financial programs).
<b>Definition</b>	<p>Hospital in the Home is the provision of hospital care in the comfort of the person's own home.</p> <p>Patients are regarded as hospital inpatients and remain under the jurisdiction care of their treating doctor in the hospital.</p> <p>Patients receive the same technical treatment that they would have received had they been in a hospital bed.</p> <p>HITH is available to public patients from the 42 participating public hospitals across the state, along with some private hospitals.</p>
<b>Responsibility</b>	RALLY Healthcare.
<b>Referrals</b>	<p><i>To</i> RALLY Healthcare.</p> <p><i>From</i> Public and private hospitals.</p>
<b>Type of service</b>	<p>Types of service include, but are not limited to, the following:</p> <ul style="list-style-type: none"> <li>• All intravenous antibiotics – may be given via a cannula, central line or pump (always HITH)</li> <li>• Chemotherapy and fluids – e.g. 5FU via a pump or ARA-C/GCSF as subcutaneous injection, (always HITH)</li> <li>• Anti-coagulation therapy – e.g. Clexane injections. This includes pre and post-operative administration. (Can be considered for ongoing HACC if Clexane is long term and required in lieu of oral medication, e.g. Warfarin. Initial stabilisation would be considered HITH)</li> <li>• Home Insulin stabilisation</li> <li>• Some wound care – e.g. staple removal, post-op wounds such as hernia repair (see <i>Appendix 1 – RDNS position on drain and peg tubes/catheter care</i>)</li> <li>• Vac-system dressings (always HITH)</li> </ul>

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<b>Eligibility/criteria for accepting referral</b>	<p>Assessed as being clinically suitable.</p> <p>Have appropriate support in the home, i.e. Carer availability.</p> <p>Have a suitable home environment.</p> <p>Chooses to be treated in HITH.</p> <p>The client does not require 24 hour monitoring.</p> <p>Emergency contacts are available and are clearly documented.</p> <p>Security assessment has been determined.</p> <p>Clarified 'not for resuscitation orders'.</p> <p>Individual medical orders and adrenalins are available for the management of anaphylaxis (see RDNS Policy CP-N01 <i>Anaphylaxis</i>).</p>
<i>Overseas visitors</i>	Not applicable.
<b>Health insurance</b>	Not applicable.
<b>Fees</b>	The purchaser (referral source) pays agreed fee (as per RALLY Healthcare fee schedule) while program is active.
<b>Liaison charge</b>	Not involved in referrals unless negotiated on FFS basis.
<b>Consumables</b>	Provided by HITH.
<b>Continuity of care/Core</b>	Not applicable.
<b>Access responsiveness</b>	Negotiated around purchaser request.
<b>RDNS policy reference</b>	<p>CP-B06 <i>Determining client fees</i></p> <p>CP-B07 <i>Billing fee for service programs</i></p>
<b>Contract/agreement</b>	Development of service agreements is the responsibility of RALLY Healthcare.
<i>Contract responsibility</i>	CEO
<i>Contact responsibility</i>	RALLY Healthcare Operations Manager.
<i>Expiry date</i>	As per individual contract.
<b>Other programs permitted</b>	No other programs permitted.

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**Comments**

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Participating hospital and hospital contacts attached (refer to *Appendix 2 – Hospital in the Home program and Program Managers*).

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**Reference/source of information**Website: [www.dhs.vic.gov.au](http://www.dhs.vic.gov.au)

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<b>Reviewer:</b>	HACC Non-HACC Committee	<b>Last review date:</b>	September 2007
<b>Authoriser:</b>	GM/DON	<b>Next review date:</b>	July 2011