

Alden's Transitional Care Prepares Patients for Home

Fear of the unknown is a major concern for those navigating through the health care system. Moving from the hospital setting to skilled nursing and then home can be one of the most stressful transitions for individuals and their families. After leaving the hospital, people still feel weak and may not understand how to manage their health care conditions or whom to call if they have a question or their condition worsens. Poorly managed transitions can lead to unnecessary physical and emotional stress – and readmissions. With the advent of the Affordable Care Act, health care providers are working together even more to make sure individuals remain stable when they return home following a hospital stay.

PROVIDER PARTNERSHIPS

Alden Estates of Barrington is partnering with hospitals in meeting this goal – to assist individuals in regaining their former level of functioning. We help individuals by confirming transfer arrangements and medication lists while they are still in the hospital, providing nursing care and therapy when they come to us, helping them achieve maximum function, and assisting with their transition after discharge, ensuring they have the help and equipment necessary in the home setting.

Alden Estates of Barrington has partnered with local hospitals in an effort to work toward keeping our community healthy and helping people get the rehabilitation and therapy they need to function to the best of their ability. In addition to the 24/7 care and services we provide, we've

partnered with one of our local hospitals in providing a nurse practitioner who follows patients from the hospital to our facility. We meet weekly with the nurse practitioner to discuss each patient's plan of care to ensure that all of their needs are met when they leave Alden.

TRANSITIONAL CARE

The Transitional Care Unit at Alden Estates of Barrington, also known as the TCU, provides specialized, goal-directed care to help individuals recover more completely following a hospital stay. The TCU offers individualized care and services to meet the needs of adult patients who no longer require a hospital setting, but may need some extra time to recover and regain the ability to perform daily tasks. A few extra days for recovery in the TCU can give someone the time needed to regain the strength and function needed to successfully be discharged home.

TCU patients benefit from the availability of a wide range of health care services designed to restore them to their highest level of functioning possible. Post-Acute Rehabilitation Programs in Orthopedics, Cardiac, Pulmonary, and Neurology offer advanced rehabilitation techniques to help patients achieve maximum independence.

Alden Estates of Barrington's Transitional Care nurses are knowledgeable in post-acute protocols and practices. Rigorous staff education and training and required certification in post-acute rehabilitation means our nursing team can provide a similar level of quality, care and services found in the hospital setting.

PATRYK GUSCIORA, RN

ALDEN ESTATES



Patryk Gusciora, RN, is the Transitional Care Nurse for Alden Estates of Barrington, which specializes in short-term rehabilitation, transitional care and post-acute services. In his role, Patryk visits patients in the hospital prior to discharge to help with the transition to the rehabilitation center, oversees their care during their stay and helps in communicating with patients' physicians upon request.

CONTINUUM OF CARE

Patients at Alden Estates of Barrington receive the care and services needed to make a successful transition from hospital to home. We know our patients' goal is a successful return to home so our therapists and nurses work with them to increase their strength and flexibility as quickly and safely as possible. We have a care coordinator who meets with patients and their families to review the care plan as well as discharge goals. Prior to discharge, we arrange for any medical equipment and home health services the patient may need when they return home. After discharge, Alden Estates of Barrington staff make follow-up phone calls to ensure that the transition from Alden is a smooth one.

Alden Estates of Barrington optimizes the transition from hospital to home. Our Transitional Care model of care, intensive therapy, electronic medical records system, highly skilled staff, and a five-star setting promote optimal patient recovery.

Alden Estates of Barrington is the 'Shortest Route to Recovery' offering:

- Transitional Care
- Post-Acute Services
- Rehabilitation
- Orthopedic, Cardiac, Neurology, Pulmonary
- Therapy
- Physical, Occupational and Speech

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