Launch of the "Berlin Patient Guides for Integrated Stroke Aftercare" project

Brinkmeier: "A sign of hope"

"A good day for care, a good day for Berlin and a good day for patients". Dr Michael Brinkmeier, Chairman of the Board of the German Stroke Foundation (Stiftung Deutsche Schlaganfall-Hilfe), used this phrase to launch the "Berlin Patient Guides for Integrated Stroke Aftercare" project. The BeLOTSE project is a co-operation between the Jewish Hospital Berlin, the research-based pharmaceutical company Novartis and the German Stroke Foundation with the aim of closing a gap in care into which stroke patients often fall after acute treatment and rehabilitation. In future, specially trained stroke pilots will now also accompany stroke patients and their relatives in the capital region for a year - as is already the case in other regions in Germany. They help with the organisation of aids, the coordination of appointments, communication with cost bearers and ensure that medication is taken correctly.

>> The project addresses the particular challenge of Berlin's heterogeneous population structure with many single people and a high proportion of people with a migration background. BeLOTSE is part of a nationwide initiative to establish patient pilots - based on scientific support and positive experiences from previous projects such as the STROKE-OWL project - as an integral part of standard care. When Dr Gerhard Jan Jungehülsing, Head of Neurology at the Jewish Hospital Berlin, approached Jessica Maaß, who is responsible for clinic management at the hospital founded in 1756, with this idea, he was met with an open ear. There was no question, she recalls, when Dr Jungehülsing came to her and told her about the request to establish stroke pilots in the hospital. Brit Ismer, CEO of the Jewish Hospital Berlin, sees this as a "great obligation", but also as an honour to continue a tradition and history of her hospital. Such projects are a good example of how the hospital not only provides first-class care for stroke patients, but is also thinking much further ahead: "We support people according to the motto: 'Everything you do should be for the good of others: 'Everything you do, you should do out of love'". This is a quote from Maimonides, a Jewish doctor and philosopher, who "also gives us important values along the way". Ismer: "We are carrying the eventful and moving history of this building into the future. We are also very pleased that we are able to do this with projects like this, which go far beyond what is actually expected of a hospital, and for the first time in the Berlin-Brandenburg region. "The question is, of course: why have stroke pilots at all?" PD



Partners in the BeLOTSE project - Berlin Patient Guides for integrated stroke aftercare in Berlin (from left to right): Nicolas Weber, Head of Innovation and Activation at Novartis Pharma, PD Dr Gerhard Jan Jungehülsing, Head of Neurology at the Jewish Hospital Berlin, Isra Khedher, Stroke Pilot, Jessica Maaß, Deputy Chairwoman of the Board & Head of Clinic Management at the Jewish Hospital Berlin, Brit Ismer, Chairwoman of the Board at the Jewish Hospital Berlin, Dr Michael Brinkmeier, Chairman of the Board at the Jewish Hospital Berlin, Dr Michael Brinkmeier, Chairman of the Board at the Jewish Hospital Berlin. Michael Brinkmeier, Chairman of the Board of Stiftung Deutsche Schlaganfall-Hilfe, Judy Hennessen, Stroke Pilot, Lena Graßkemper, Project Coordination Stiftung Deutsche Schlaganfall- Hilfe. The new Berlin stroke pilots hold the project folder in their hands: Isra Khedher (left) and Judy Hennessen (right). Before the project started, the two stroke pilots received appropriate training from the German Stroke Foundation and the Jewish Hospital Berlin. Both pilots previously worked as a physiotherapist and speech therapist on neurological wards, among others, and have a great deal of experience in working with stroke patients. They have now been able to start supporting the first patients as part of the BeLOTSE project. Copyright: Caro Hoene.

At a glance

- **The problem:** After acute care and rehabilitation, stroke patients experience a gap in care that leads to poorer health outcomes. Among other things, up to 50% of medication is no longer taken after two years.
- **The solution:** The "BeLOTSE" project deploys specialised stroke pilots who provide patients and their relatives with individual case and care management support for one year.
- **The goals:** Improving the quality of life and participation of patients, preventing secondary strokes and helping patients to help themselves so that they can find their way through the healthcare system.
- **The partners:** The project is a collaboration between the Jewish Hospital (implementation), the German Stroke Foundation (concept & experience) and Novartis (financial support & partnership).
- **The speciality in Berlin:** The project consciously faces up to the complex reality of care in a metropolis with a very heterogeneous, often single population.
- **The vision:** the knowledge gained should convince politicians to establish patient guides as recognised and health insurance-funded standard care for complex illnesses throughout Germany.

Dr Jan Jungehülsing answered this rhetorical question himself. Like all German hospitals, the Jewish Hospital Berlin is in a pretty good position when it comes to acute stroke care, as long as they have stroke units. His hospital is also well positioned with direct aftercare facilities and rehabilitation clinics. Nevertheless, there is a gap in care into which patients "perhaps fall particularly deeply" after a stroke. Stroke is a kind of marker disease for such gaps in care, because healthy people already find it difficult enough to navigate our healthcare system. This is much more difficult for sick people, but even more so for patients who are physically or mentally disabled to a significant extent - one third to one half - after a stroke. Jungehülsing: "That's why these people need a lot of support, and that's exactly where our project comes in." The guides employed at the Jewish Hospital support patients in the first 12 months after a stroke - including at home. They help with communication with payers, organise aids and remedies or the conversion of bathrooms and toilets and ensure that patients have contact with physiotherapy and occupational therapy as well as sufficient contact with their family doctors.

And finally, they also ensure that patients take their prescribed medication correctly. According to Jungehülsing, it is known that almost 50 per cent of all medication is no longer taken after two years following a stroke. Changing this is part of the task of this "great project that fits well into the Berlin healthcare landscape". The aim is not to create more work for the medical colleagues in private practice, but to "relieve them of work by helping patients in their respective home environments".

Nicolas X. Weber, Head of Innovation & Activation at Novartis Pharma, added: "We want to help shape the healthcare system of tomorrow and improve existing structures and patient care. This requires strong alliances between all stakeholders in the healthcare system on an equal footing. The BeLOT-SE project is an example of our commitment to enabling patients to enjoy a better quality of life and a better quality of care." "With this project, we as a foundation are establishing a stroke pilot project in the capital region for the first time - an important milestone on the way to standard care," emphasises Dr Michael Brinkmeier, Chairman of the Board of Stiftung Deutsche Schlaganfall-Hilfe. For him, the launch of this project is a matter close to his heart. After all, it shows that the original STROKE-OWL project can be scaled up and rolled out to other regions. "We are actually also sending out a signal here, one of hope," said Brinkmeier.

The foundation's declared aim is to "help as many patients as possible to continue to receive good care after receiving excellent acute and rehabilitation care". However, this does not only apply to the indication of stroke. According to Brinkmeier, only around 20% of a stroke pilot's work is directly concerned with indication and intervention. The remaining 80% is "professional caring".

According to Brinkmeier, it is therefore possible to "summarise different interventions into a new form of care". In fact, the intervention relates to SGB V, but for those affected it is overarching. Because: "Patients usually don't know Roman numerals, they have a stroke or another serious health problem and simply need help. <<

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