

Sepsis Simple Strategies: Community Support

Think About It!

87% of sepsis cases originate in the community and not in the hospital.

Sepsis patient risks continue after hospital and/or rehab stays. More than 40% of older patients have another hospitalization within three months of the initial sepsis, most commonly due to a repeat episode of sepsis or another infection.

Take Action!

Assess anticipated patient support needs at home to ensure they can avoid unnecessary hospitalizations, including emergency department visits and readmissions.

Partner with organizations that can provide patient support at home.

Focus on high-risk populations (e.g., those with recurrent pneumonia, urinary infection, frail immune system).

Key Considerations:

Coordinate Support and Services with Community Partners and Providers to Help Sepsis Patients Stay at Home



Pharmacy: Help patients create a current [medication list](#), connect them to a local pharmacy, and ensure medications are available and able to be obtained via pick-up or delivery.



Mental Health: Surviving sepsis can be traumatic. Assess for additional counseling and support needs, facilitate referrals, or provide [resources](#).



Home Care: Facilitate an initial meeting with home health agency staff prior to the transfer home. Share this [tool](#) for home health staff sepsis education. Schedule and ensure that a visit will occur within 48 hours. Coordinate timely durable medical equipment (DME) delivery.



Church/Social Support: Based on a patient's preferences and history, identify contacts who can ensure engagement with friends and a faith community either virtually, in-person or through home visits.



Primary Care: Share this [resource](#) to help patients prepare for follow-up visits. Assist with scheduling appointments (including transportation, if needed).



Area Agency on Aging: Identify the [local agency](#) and [services](#). Some may include meal support programs.



Hospice: If needed, [start conversations](#), coordinate consults prior to the transfer home and facilitate introductions.



Family/ Caregivers: Determine what [type of help](#) can be provided by whom (transportation, cleaning, meals, companionship, etc.). Include family members and caregivers in sepsis [education](#) and [prevention](#).