Timely and appropriate physiotherapy service in Accident and Emergency Department, Prince of Wales Hospital
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Introduction
With increasing demands of AED service in Hospital Authority, long waiting time for uncomplicated musculoskeletal conditions requiring consultations and treatment is common.

Objectives
The establishment of AED physiotherapy service in Prince of Wales Hospital is to provide early physiotherapy intervention in order to facilitate early discharge, minimizing hospitalization and improve patient accessibility for physiotherapy outpatient service.

Methodology
A service review was performed between October to December in 2015. To facilitate patient flow, a dedicated physiotherapy clinic was set in AED and on-call physiotherapy system was developed. Physiotherapy interventions included pain relief, mobility training and strengthening exercises. Besides, timely physiotherapy outpatient service for early discharged cases would be provided as indicated. Patient satisfaction survey was also conducted.

Result
Results From October to December 2015, 264 AED cases were referred for physiotherapy management. The most common presentations seen by the service were musculoskeletal in origins (93%, n=245). The results showed that a total of 240 patients (91%) were seen within 60 minutes. Besides, 59 patients (22%) could directly be discharged after physiotherapy intervention without hospital admission. Among these 59 cases, more than 95% of patients (n=57) were arranged outpatient physiotherapy within two weeks for further management. Patient satisfaction survey indicated a high level of satisfaction on the service. More than 91% of patients (n=240) agreed that AED physiotherapy service could provide a prompt assessment and treatment for them, while more than 93% (n=245) were satisfied with the assessment and treatment provided by the physiotherapists.

Conclusion The survey result has demonstrated that quick access of physiotherapy service in AED is effective. AED physiotherapy service can provide a timely appropriate level of care for
musculoskeletal cases and facilitate patient flow by hastening early discharge and reducing AED overcrowding. The improved patient flow is also achieved with very high level of patient satisfaction. We recommend that such service model can be generalized to other hospitals so as to enhance the quality service in AED setting.