



## Service Priorities and Programmes Electronic Presentations

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### **A New Initiative to Decrease Unnecessary Acute Hospitalizations for Terminally ill residents and to Improve their Quality of Life in a Long Term Care Hospital**

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#### **Introduction**

Cheshire Home, Shatin (SCH) is a 300-bed long-term care hospital taking care of the frailest elderly patients and the severely neurologically disabled patients who require intensive medical and nursing care. During the office hours, there are two doctors providing on-site medical support, but during non-office hours there is no on-site medical support. Review of clinical data in early 2015 showed that most of the transfers to acute hospitals occurred during non-office hours and a high proportion of terminally ill residents (70%) passed away in acute hospital.

#### **Objectives**

To implement a new initiative in SCH to decrease the unnecessary acute hospitalization for terminally ill residents and to improve their quality of life.

#### **Methodology**

An initiative of early detection of deteriorating patients was implemented with triggering points including a SaO<sub>2</sub> <94%, or clinical signs of increased sputum and shortness of breath and etc. The doctors performed ward rounds both in the morning and in the afternoon, to start medical interventions promptly for residents with signs of early deterioration. For those residents who ran an inevitable downhill course, they and or their family members were interviewed for making an advance directive / care planning including cardiopulmonary resuscitation, artificial fluid and nutrition, oral or intravenous antibiotics and transfer to an acute hospital in case of further deterioration. "Do not transfer out" order was documented in the resident's record if this was the decision made by the resident and/ or the family. Medical treatments with dedicated nursing care are provided to promote symptoms relief, the resident and their family members are given psychological support both during and after the dying process of their loved ones.

#### **Result**

The adoption of this program has markedly decreased the unnecessary acute hospitalizations for terminally ill residents in SCH, with the proportion of terminally ill patients being managed and subsequently passed away in SCH significantly increased in the year 2015 from 30% ( 1Q) → 64% ( 2Q) → 70%( 3Q) → 75%( 4Q). Feedbacks from the family members also showed that they appreciated all the measures that were taken to improve the quality of life of the residents during their last days.