



Service Priorities and Programmes Electronic Presentations

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Multi-disciplinary Orthopaedics Rehabilitation Empowerment (MORE) program – Coordination for Continuum of Care for Injured Workers

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Introduction

Work rehabilitation for injured workers with musculoskeletal problem remains a challenge to local public healthcare setting. Care coordination through engagement of employer with the objective of Return to work is an important element for rehabilitation of injured workers. Service model with continuum of care from healthcare service to workplace is the key to success. Unfortunately, consultative paper by Hong Kong Hospital Authority by Echelon on 2008 on rehabilitation of injured workers opines that there is no detailed service model for dealing with the interface between various parties (professional and workplace) resulting in fragmented, redundant and ineffective care.

Objectives

To tackle this long standing problem, a Multi -Disciplinary Orthopedics Rehabilitation Empowerment (MORE) program with case management approach was implemented since 2012. The objective is to align the resources from worker compensation and public system through case management approach to accelerate the work rehabilitation process. Through the coordination with employer, return to work arrangement in later phase of rehabilitation was implemented.

Methodology

A cohort of patients with lower back musculoskeletal injuries were screened and recruited to either MORE group or control group. Patients in MORE group received a coordinated multi-disciplinary management involving early intervention and biological clearance while patients in the control group received conventional care. Sick leave and Time to return-to-work from date of injury, time lapse to medical assessment board (MAB) referral, and MAB completion in the two groups were compared.

Result

316 qualified patients were invited to join the “MORE” program, and 168 patients who followed through conventional care were recruited in the “Control” group. Patients managed in the MORE program had significantly shorter duration for return to work (MORE: 8.5 months, Control: 16.2 months, $p < 0.01$), and a clearly higher percentage

of successful return to work cases (N=140, 66.4%) compared to the Control group (N=47, 31.3%). The MORE group also had much shorter lapse time MAB referral after (76.6 vs. 201.4 days, $p < 0.01$) compared to Control group. This study has demonstrated the effectiveness of the MORE program, which emphasized case management approach, liaising with employer for return to work, early intervention, which can improve the outcome of injured workers higher rate of return to work and reduction of work disability.