

Service Priorities and Programmes

Electronic Presentations

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Home Sweet Home – Physiotherapy Home Support Program to Facilitate Safe and Early Discharge

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Introduction

Elderly patients with physical impairments and functional limitations may not be able to cope safely with their previous home environment upon discharge from hospital. Besides, their caregivers may not have the skills and confidence to take care of them. A Physiotherapy Home Support Program (HSP) had been implemented to facilitate a safe and early discharge of these patients. The HSP included early discussion with family members about the care plan, pre-discharge home environmental visits to advice on home modification. After discharge, domiciliary services would continue to monitor patient's progress, provide on-site patient and caregiver training and further tailor-made home support and exercise program.

Objectives

To evaluate the feedback from patients and their caregivers on the Physiotherapy HSP and its effectiveness on promoting the mobility status and reducing fall and re-admission rate one-year post-discharge.

Methodology

This was a retrospective program evaluation. Patients directly discharged home from the Department of Orthopaedics and Traumatology of Queen Elizabeth Hospital and received the Physiotherapy HSP were included for analysis. Information on (1) mobility level of patients, (2) number of fall incidents, (3) episode of re-admission due to fall, and (4) patients and caregivers satisfaction survey were retrieved for analysis at 2 time-point of measurements, at inpatient discharge status and one-year post-discharge follow-up via telephone interview.

Result

From July 2010 to September 2014, 154 patients received the physiotherapy HSP service. Mean age was 74.8+10.6 years old (Female: 108, male: 46). They suffered from knee problems (45%), hip problems (33%) and others (22%). Altogether 409 home visits had been provided. Nearly all patients and their caregivers strongly

agreed the advice from Physiotherapists was very useful and the program helped to optimize patients' functional independency, increase confidence of caregivers in taking care of patient and improve their knowledge on Fall Prevention. At one-year post-discharge follow-up, 80% of patients became outdoor walkers (p<.0001). 11 patients reported incident of fall and 2 patients were re-admitted due to fall. Physiotherapy HSP was effective in ensuring a smooth transition from hospital back to community. Fall prevention was enhanced and patients were more willing to ambulate around in a safe environment and had increased their functional independency. Home-based service was much appreciated by the patients and their caregivers.