



## Service Priorities and Programmes Electronic Presentations

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### **Skills transfer from hospital to community**

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### **Introduction**

With the problem of aging population and increasing trend of caring in the community, many of our patients, especially the frail ones are taking care by elderly institutions such as old-age home, day care centres or home care teams. Standard of these early institutions were concerned and important as a gatekeeping of hospital services. In view of these, the Community Service team collaborated with different clinical specialist and community partners to develop trainings to community early institutions for skills transfer from hospital to community.

### **Objectives**

To increase the awareness and knowledge on frail elderly for frontline staff in the elderly institutions  To support skills transfer from hospital to community  To facilitate the collaboration between community partners and hospitals  To avoid unnecessary admission to A&E

### **Methodology**

To access the needs of training in the community, surveys were sent to elderly institutions to collect their opinions on specific criteria for training and their difficulties in specific skills handling for frail elderly. After collecting feedbacks from the community, we invited some core members to form a working group with clinical for discussing the details of the training to serve the needs of elderly institutions. During 2015-16, a total of four trainings to elderly institutions were finished. 1. Stoma & Wound Care was held in collaboration with HKEC Wound team. The training included basic handling skills of stoma and wound, practical skills and case illustration were demonstrated. 2. Feeding and Swallowing was held in collaboration with HKEC Speech Therapy. The training introduced swallowing features of elderly, practical skills in feeding and basic handling of choking. 3. Palliative Care Training was held in collaboration with HKEC Palliative Care team and HKEC Geriatric team. The

training shared skills in communication with patients and carers who are in palliative care and services provided in hospital. 4. Diabetes & Exercise Training was held in collaboration with HKEC DM team. The training introduced features of Diabetes patients when doing exercise and the basic skills in handling for emergency.

### **Result**

With the above 4 trainings, a total of 296 participants attended our trainings. Among the participants, 32.4% of them are nurses; 25.2% are allied health staff such as physiotherapist, occupational therapist and social workers; 21.7% are frontline health workers and 21% are others such as management, administrative staff or program workers. Evaluation forms were distributed and collected from participants. A total of 274 evaluation questionnaires were collected. 98.7% of participants agreed that the training empowered their knowledge, skills and confidence in handling elderly for different situation. As all the trainings are 3-hour trainings, other comments revealed that longer and more practical trainings are needed.