Pre-admission Discharge and Care Planning Model of Medical Social Services for Total Joint Replacement Service of Yan Chai Hospital

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Introduction

- YCH established the 2nd Total Joint Replacement Centre in Hong Kong in 2011
- Multi-disciplinary approach, starts at out-patient stage few months before admission
- MSW adopted a new model of pre-admission D/C planning
- Objectives of study: retrospective survey to review the effectives of the model and roles of MSW for:

n= 606 cases

period: from 1 Oct 2011 to 30 Sept 2012

Out-pt

Traditional practice

Case referred to MSW after admission

In-pt

100% Case f.u. in ward for D/C plan review & service f.u.

Post D/C

Post D/C f.u. for needy cases

Characteristic of model and roles of MSW

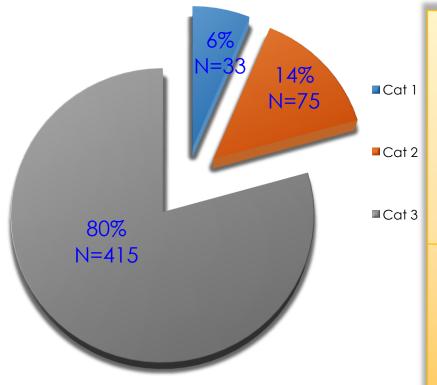
- 100% case intake before admission
- Early detection for D/C risk& readiness of operation
- Timely mobilization & liaison with social services
- Empower/ enhance pt's capacity for OT
- Formulate D/C plan before admission
- Communicate with clinical team for special case before admission
- 100% case review in ward

LOS: 8.5 days VS Benchmark: 15 days

Case risk level – 3 categories

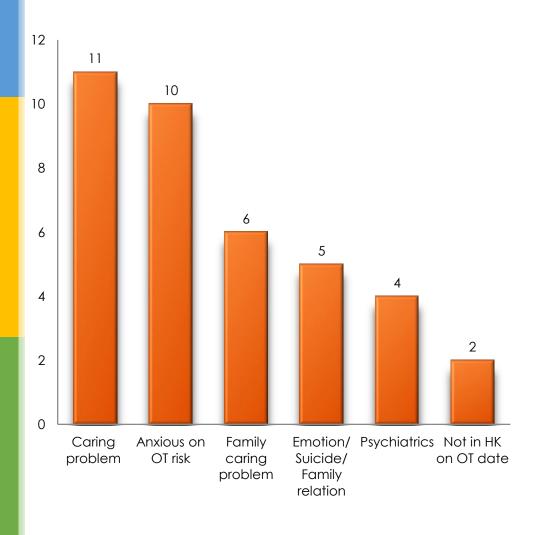
	PAC case	*Non-PAC case
Male	163 (27%)	31 (5%)
Female	360 (59%)	52 (9%)
Total	523 (86%)	83 (14%)

	PAC case	*Non-PAC case
Knee	466 (77%)	69 (11%)
Hip	57 (9%)	14 (3%)
Total	523 86%)	83 (14%)



Cat 1	 I. Psychiatric illness II. Emotional problem, anxious to OT, depressed III. Prominent family relationship problem IV. Weak social support, living alone, frail elderly couple V. Carer of dependent family member
Cat 2	I. Potential D/C problemII. Ambivalent towards OTIII. Deprived living environmentIV. Non-lift landing, living in China etc.
Cat 3	NAD

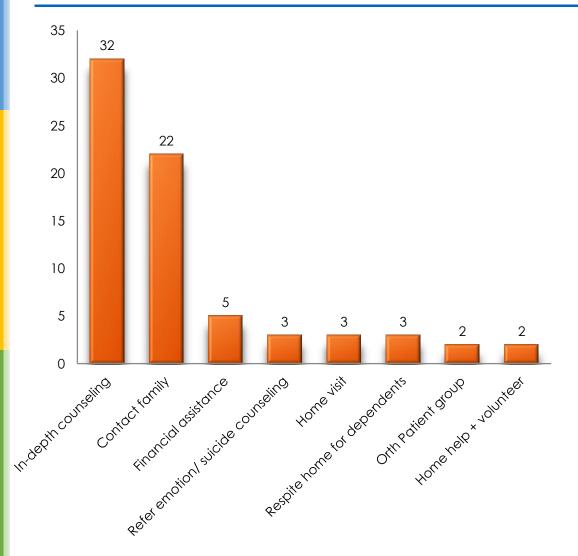
Cat. 1- Problems encountered



Characteristic: Emotionally laden cases

- ➤ Major concerns:
- 1. Anxious for operation esp. female patients
- 2.Emotional/suicidal
- 3. Poor family relationship
- 4. Psychiatric problems
- 5. Caring problem of patient
- 6.Caring problem of dependent family member

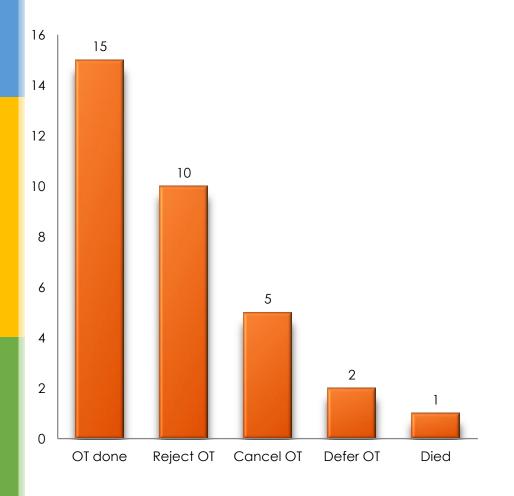
Cat -1 MSW interventions



MSW early interventions:

- 1. In-depth counseling
- Close contacts with family
- 3. Home visit
- Cooperation with SWD/ NGOs
- Line up social services/ resources
- 6. Invite to Orth patient group "關健同行"
- 7. Community volunteers
- → MSW communicates with clinical team for f.u.

Cat 1 - Outcomes & implications



- 45.4% cases problems resolved and completed OT
- ➤ 30.3% cases confirmed to withdraw OT before PAC
- ➤ 15.1% cases clinically NOT fit for OT
- Implications, MSW to:
 - ✓ facilitate D/C planning before admission
 - ✓ empower / enhance pt's capacity to receive OT
 - ✓ identify "special cases" patients for clinical team to follow up

Thank you

