Presentation no.: SPP6.1

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Project title
An casemix analysis of long stay extended care patients : insight for subacute management care plan

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Keyword(s)
Length of stay
Medical extended care

Approval by Ethics Committee: /

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Introduction
The transferral of patients from acute hospital to subacute hospital in the cluster can help to release overloading of high occupancy rate in the acute wards. Despite comprehensive medical treatment and management, there are a number of patients still required a longer length of stay before ultimate discharge. An analysis of these patients will give insight to the frontline professional colleagues on good practice of subacute management care plan

Objectives
To understand the need and characteristics of the patients in subacute medical extended care wards who had a prolong length of stay

Methodology
1. Retrospective analysis of patients admitted to 2 medical extended care wards in Kowloon Hospital, with a LOS of 90 days or more. Only patients who were cared at home in premorbid state were included in the study. 2. To illustrate, by 2 case study, that multi-disciplinary management is the key to facilitate discharge of patients with complicated medical and social problems

Result
There were totally 24 cases were included in the analysis. Demographic characteristics are as followed : Sex : Male 8(33.3%), Female 16 (66.7%) Mean Age : 82.25 (Range from 61-90) LOS : 125.3 days (Range from 91-188) FIM(total 126): score 18 (n=9 37.5%), score >19<50 (n=4 16.67%), score >50(n=2 8.33%, no record (n=9 37.5%) Discharge destination : Death 3 (12.5%), OAH 13 (54.2%), Home 8(33.3%) Principal Diagnosis on admission : CVA 9(37.5%), Other neurological 3(12.5%), Cardiac 4 (16.7%), Respiratory medical 2(8.3%), Neoplasm 1 (4.17%), CRF 2(8.3%), Others 3(12.5%) Death after discharge : 8(33.33%) Cause of death (n=11) : Pneumonia 5(45.45%), Neoplasm 3 (27.27%)%, Pulmonary oedema 1(9.1%), AMI 1(9.1%), Encephalitis / myelitis 1(9.1%) Detailed study on two cases with prolonged LOS cases found that close communication of all team members by case conference could start off the pre-discharge plan more smoothly. Motivational interviewing technique could help to understand caregivers’ concern and could hasten process of making agreement on the discharge details. In addition, follow up actions by multi-disciplinary effort would make safe discharge successful.