Geriatric Rehabilitation: Patient Empowerment
Lau, O.L.M., Li, K.Y. and Tang, I.F.K.
Department of Rehabilitation and Extended Care, Tung Wah Group of Hospital Wong Tai Sin Hospital (WTSH), Hong Kong SAR.

Keywords:
Geriatric Rehabilitation
Patient Empowerment

Introduction
Ageing population is a major challenge and concern in Hong Kong. By 2050, Hong Kong is forecasted by the World Health Organization (WHO) to rank fifth in the world for cities with the largest percentage of older adults. The growing burden of chronic disease will greatly affect quality of life of older people. Therefore, it is believed that rehabilitation of geriatric patients with patient empowerment is imperative for their well-being. Patient Empowerment Program" which is patient-centered collaborative approach was launched in our Geriatric rehabilitation since 2009.

Objectives
(1) To increase geriatric patient’s knowledge and improve their physical mobility and psychomotor skills; (2) To improve their cognitive function (2) to assist the geriatric patients with disability and chronic illness to attain and maintain maximum function; (3) to inspire greater patient’s self-awareness of their own disease and condition during inpatient rehabilitation period.

Methodology
Geriatric patients were recruited under Geriatric Rehabilitation program in 2013/14. Other than department training, individual/group health education and psychomotor skills sessions were provided by nurses according to their disease type and needs. Positive feedbacks and return demonstrations were evidenced immediately by patients and their carers. Group therapy sessions were also provided weekly. Outcome measures were parameters related to cognitive function, Mini-mental State Examination (MMSE); and parameters related to physical mobility, Elderly Mobility Scale (EMS) and Modified Barthel Index (MBI).

Result
In 2013/14, 280 elderly patients (48.9% male and 51.1% female) were admitted for
Geriatric rehabilitation program. The mean age is 82.1 (range 65 – 109). 46.4% of elderly patients have AMT 7 or above. The overall score of MMSE, EMS and MBI increase when patient was discharged to community. Conclusion The need for an empowered patient with a partnership with the health providers is evident (Loft, McWilliam and Ward-Griffin, 2003). Patient empowerment can promote greater quality of life by directed learning, increased communication, and enhanced self-knowledge. In the future, patient satisfaction may be needed to understand so as to provide better professional services on geriatric rehabilitation to reduce readmission rate.