Empowerment of Patient Care Assistant (PCA) in Integrated Care and Discharge Support for Elderly Patients (ICDS) Pre-discharge Education: Meter Dose Inhaler (MDI) Assessment and Education

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Introduction
Initial screening by ICDS link-nurse is essential to the triage of service in TKOH. Assessment in drug compliance especially MDI technique is one of the dominant parts in initial screening as Chronic Obstructive Pulmonary Disease (COPD) is common in elderly patients. Due to limited nursing manpower, PCA is assigned to assist in MDI assessment and education with a view to increase the effectiveness of the screening progress.

Objectives
1. To empower PCA in MDI assessment and education  
2. To promote effectiveness of link-nurse in case recruitment process

Methodology
Pilot was conducted from 8th April, 2013 to 8th July, 2013 by link-nurse and PCA. Initial screening was performed by link-nurse with the inclusive criteria: (1) aged >= 60 years old, (2) mentally capacitated, (3) sufficient physical strength, (4) good coordination and the exclusive criteria: (1) old aged home resident, (2) Multidisciplinary, Efficient and Superior (MES) Program for COPD case. Comprehensive assessment was completed by PCA according to the TKOH standardized assessment form. Before pilot, PCA had received relevant training and passed the audit and test. Teaching materials used were published by Hospital Authority. Reassessment was done before discharge. For those who failed to achieve 100% compliance, PCA would refer back to link-nurse for further education. Further follow-ups by ICDS case manager (nurse) after discharge would be arranged.
Placebo (supplied by pharmacy) was used to avoid illegal drug administration by PCA.

**Result**
Results 73 cases (56 males and 17 females) were recruited in the pilot. Overall age was 80. In assessment, 61% achieved 100% compliance. After education, 27% had increased compliance, 4% had no change and 8% could not complete due to death or early discharge. After assessment, 5% were recruited to ICDS due to less satisfactory puff technique upon discharge. Conclusion and Evaluation Positive results were found in the pilot. It indicated that (1) MDI assessment by PCA was effective in screening patient with fair compliance, (2) education carried by PCA was effective in reinforcement of puff technique and knowledge of patient, (3) PCA could promote effectiveness of link-nurse in case recruitment process. Continuous evaluation and modification would be preceded by link-nurse regularly. Audit and spot check would be carried out yearly to maintain the standard of PCA. Further implementation was suggested after the pilot.