Ambulatory Care for Demented Elderly

Dementia Day Care Centre

Wong Chuk Hang Hospital

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Outline

> Introduction of DDCC Services



- Non-Pharmacological Intervention on a Multidisciplinary Approach
- > Evaluation of DDCC Services
- ➤ Conclusion and Future Direction
- > Acknowledgement

Introduction

Ageing population in Hong Kong



The Prevalence of Dementia in HK of people aged ≥ 70 years



Yu et al. 2012

Dementia is one of the main causes of dependence and disability at old age









The Leading Cause



Drug Treatment for Dementia

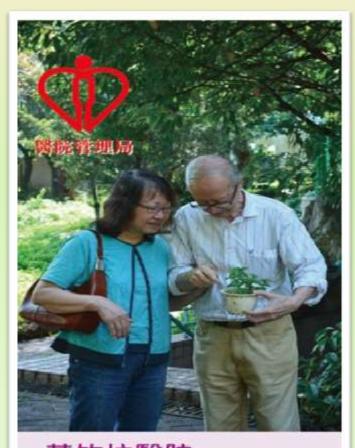


WCHH Dementia Day Care Centre was set up in November 2000



Services For Demented Elders

- Serving elders with Mild to Moderate level of cognitive impairment
- > Duration of training
 - 4 months training program
 - 2 sessions per week



黃竹坑醫院 長樂坊 認知障礙症日間中心

Non-Pharmacological Therapeutic Training

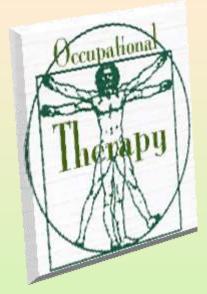
Aims at:

- Delaying disease progression and functional decline
- Improve demented elder's quality of life and integrate into the community
- Relief caregivers' stress



Multidisciplinary Approach

- Cognitive training
- > Physical exercise training
- ➤ Specially Designed activities
- > Caregivers' Training Workshop
- ➤ Direct Mobile Phone Consultation Service
- **≻**Community Partner



Cognitive Training

Memory training

> Aims at improving the cognitive and functional abilities, self-esteem & reduce problematic behaviors



Reminiscence Training









Perceptual Training





Computerized Cognitive Training



Reality Orientation

Physical Exercise Training

>Aims at maximization of their strength, flexibility, coordination, balance, interaction with others













Specially Designed Activities



Cooking Activity to Celebrate Festivals



Share these happy moments with their relatives







Journey for Active Minds: Jockey Club Museum Program for the Elderly













Caregivers' Training Workshop







Direct Mobile Phone Consultation Service

Commenced since June 2003

The service hours are 9am to 5pm from Monday to Friday and 9am to 1pm on Saturday





Community Partner

For early identifying and providing non-pharmacological intervention

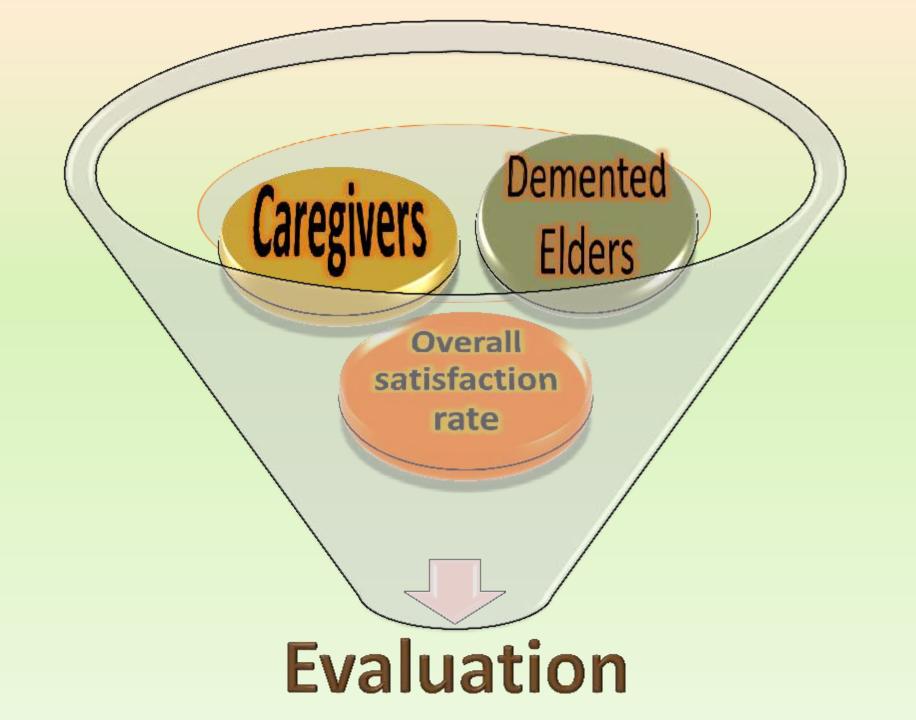
For provide continuity of care for the demented elders



Effectiveness of Non-Pharmacological Intervention through Multidisciplinary Approach

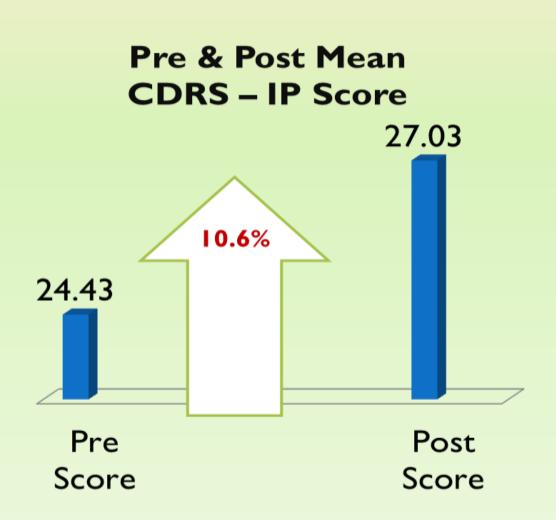
- ➤ Data collected from January to December 2014
- Paired sample t-test was used to measure the effectiveness
- ➤ Mean MMSE score 20.7
- ➤ Mean age 80.5





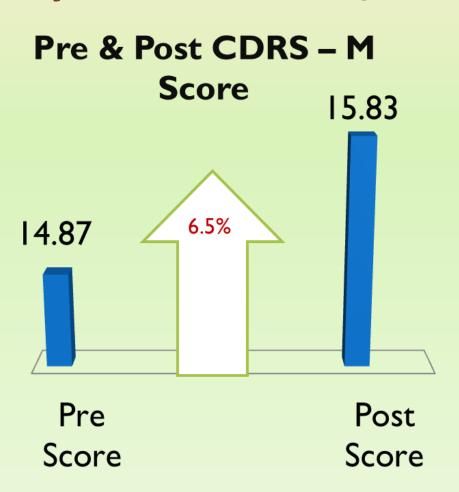
Comparison of Mean CDRS-IP Score Pre & Post Therapeutic Training

> By using paired sample t-test, there was a significant increase in the **CDRS-IP** mean score (p=0.01)



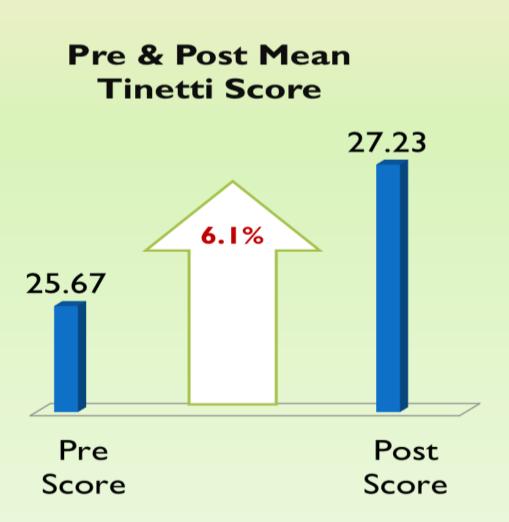
Comparison of Mean CDRS-M Score Pre & Post Therapeutic Training

> By using paired sample t-test, there was a significant increase in the CDRS-M mean score (p<0.01)



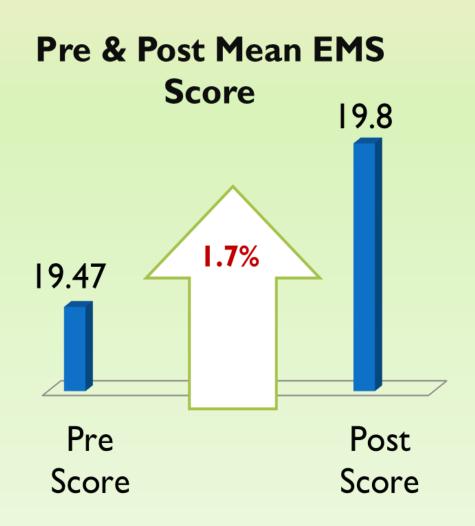
Comparison of Mean Tinetti Score Pre & Post Therapeutic Training

➤ By using paired sample t-test, there was a significant increase in the Tinetti mean score (p<0.01)



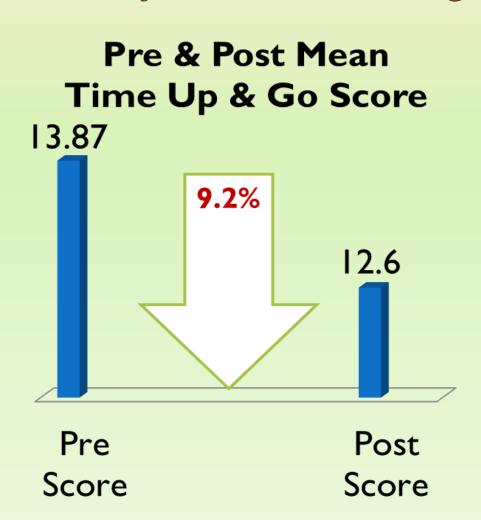
Comparison of Mean EMS Score Pre & Post Therapeutic Training

➤ By using paired sample t-test, there was a significant increase in the EMS mean score (p=0.03)



Comparison of Mean Time Up & Go Score Pre & Post Therapeutic Training

➤ By using paired sample t-test, there was a significant decrease in the Time Up and Go mean score (p=0.03)



Psycho-social Aspects

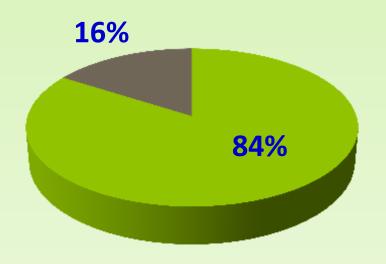


■ Improved ■ Unchanged

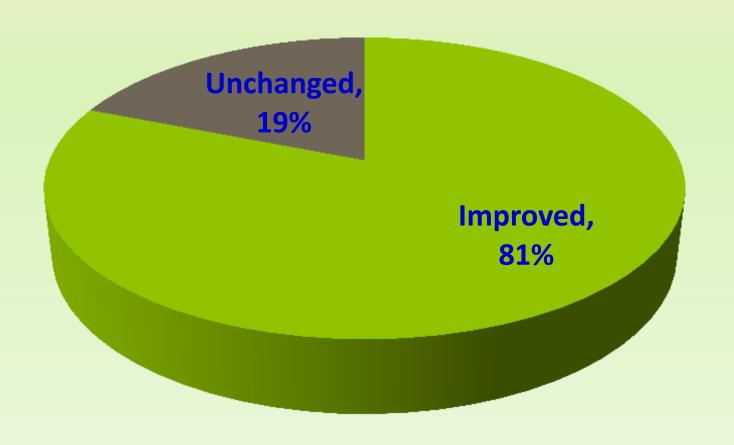


Improved interest to the surrounding things

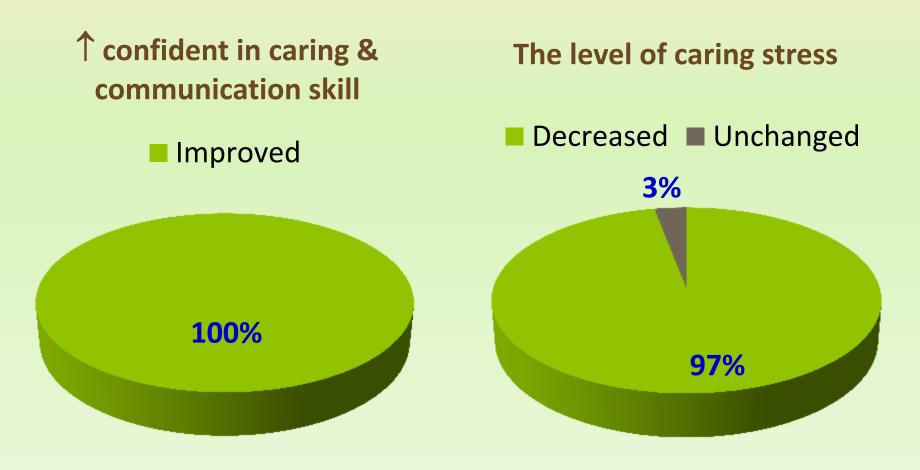
■ Improved ■ Unchanged

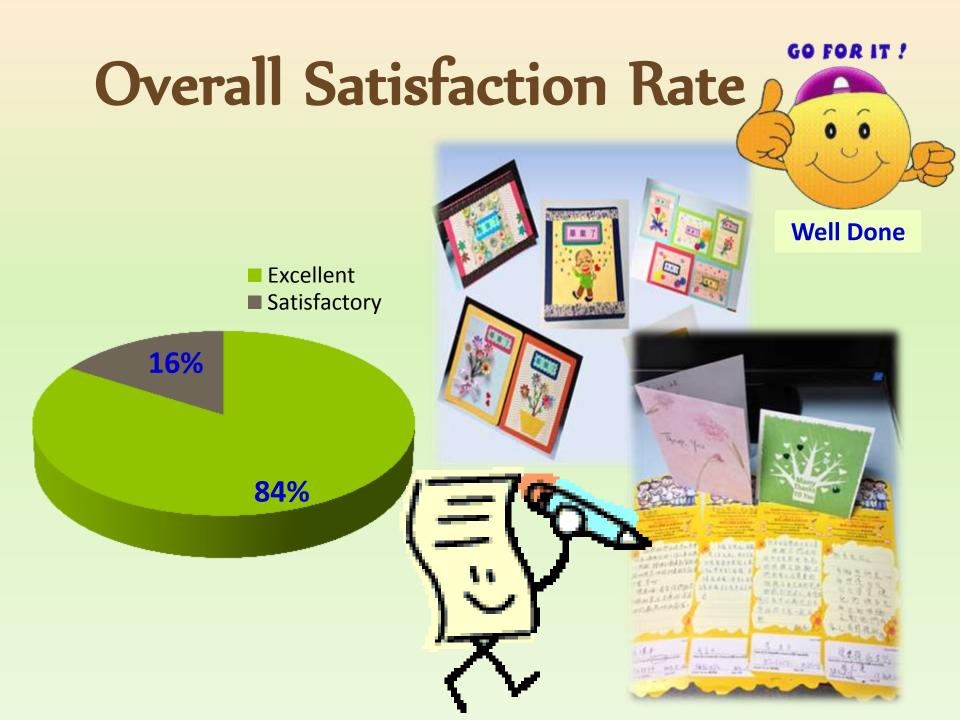


Improvement on Memory, Participation and Communication



Caregiver Aspects





Feedback from Caregivers

媽媽的行為和說話都比以前 有進步

你們的工作是真真正 正的分担了我們家人 的精神壓力,和生活 上的不便

你有和發力的知代們無愛他,美道你們一個人們看為你們看的人們看的人們不可見的人們可以們們的人們可以們們的人們可以們們的人們可以們們的人們可以們們的人們可以們們的人們可以們們的人們可以們們的人們可以們們們們

媽都石每元否通很角好都活用。能,多据的我不安因家婚人的要知排不庭果。

打麻雀」這 活動舒緩了媽 媽肩腰的僵 硬。一個八十 歲從未受過教 育的婆婆,在 這裡可以嘗到 上課的滋味, 對她「腦退 化」的問題有 明顯幫助

Conclusion (1)

➢Our Limitations:

Location is not convenience

- Limited spacing in our centre
- Inadequate community resources for providing continuity of care after clients' discharge



Conclusion (2)

- Therapeutic training for demented elders requires integrated multidisciplinary strategies
- Physical exercise training appears beneficial to demented elders and should be considered as an integral part of therapeutic training

Conclusion (3)

The training can efficiently help maintain their functional and psychological stability which enables the demented elders integrating into the community

> Caregivers' stress and burden could also

be reduced



Conclusion (4)

The service model of collaboration with community partner to provide early screening, early interventions and continuity care for the demented elders is highly recommended

Future Direction

- To continue exploring the possibility of collaborating with NGOs as to enhance the partnership with community for providing one-stop dementia day care service
- To setup the Carergivers' Self-Help Supporting Group to help
 - Relieve caregivers' stress
 - Strengthen and enhance their problem solving capacities and skills
 - Promote psycho-education and provide support



Acknowledgement

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- ➤ Ms. S H Yeung, TWEH GM(N)/WCH GM(N)
- ➤ Dr Y M Wong, WCH MO
- ➤ Ms. Yvonne Chan, WCH WM
- ➤ Mr. William Tam, WCH PT I
- ➤ Ms. Menda Chau, WCH OT I
- ➤ Mr. Tse, WCH MSW



