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Identifying the contributing factors of patients with discharge problems and designing a questionnaire for early discharge intervention

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Introduction

Discharge planning is becoming increasingly important for optimal resource utilization. Because of the limited living space in Hong Kong, patients with Orthopaedic problem often have difficulty to walk with aids at home. The problems leading to barrier to effective discharge planning are the lack of standardized, policy-driven hospital-wide discharge planning approach in public health sector in Hong Kong and the lack of communication and coordination among different health service providers.

Objectives

This study aims to validate a modified discharge planning screening tool (CALF MAC) with the assessment of patients' social healthcare needs for early Medical Social Worker (MSW)'s discharge planning intervention.

Methodology

From January through May 2017, eligible patients are recruited and screened by the modified screening tools (CALF MAC) in Orthopaedic wards in Kwong Wah Hospital, Tai Po Hospital and Alice Ho Miu Ling Nethersole Hospital. The modified screening tool (CALF MAC) results were compared with actual referrals from physicians or the clinical teams for validation by independent samples t-test. The cutoff score of modified screening tool (CALF MAC) were found by sensitivity, specificity, positive predictive value and negative predictive value.

Result

A total of 87 patients were studied. The studied data followed normal distribution. The screening tool was validated by virtual of the statistically significant different in mean scores for cases with or without referral to MSW ($p < 0.001$). The cutoff score of 5 or above was validated by virtual of statistically the most significant association ($p < 0.001$) with high sensitivity, the highest specificity, the highest positive predictive value and the lowest negative predictive value among the scores. It is highly possible to apply

this standardized discharge planning screening tool to clinical services for reduced length of stay and smoother clinical pathway because the screening tool is easy to use and can be circulated to the ward nurse to identify patients in need of MSW discharge planning intervention during early stage of hospitalization.