

Service Priorities and Programmes Electronic Presentations

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Enhance independence in ADL for acute stroke patient in ward environment Lui NF(1), Fung HO(1), Chan CS(1), Tsui CY(1), Clancey JCT(1), Ma WL(1), Leung KF(1)

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Introduction

Stroke is one of the major clients in occupational therapy in Queen Elizabeth hospital. Every year there are about 1200 patients admitted due to stroke. Early intervention at ward and bedside ADL participation is important to facilitate early self care independence and decide the suitable rehabilitation plan for each patient. A patient centered treatment program is essential to ensure the intensity of treatment and the quality of service provided. Besides, standardization of treatment protocol is also playing an important role to ensure every colleague providing up-to-standard treatment. In order to ensure standardization of therapy and effective case management for stroke patients, we have developed guided treatment reference for therapists to follow since 2014. With a mature clinical pathway developed in recent years, therapists can provide appropriate care according to patient needs. In this paper, the journey in developing a standard of high quality care is demonstrated to facilitate early participation and independency after an acute stroke.

Objectives

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Methodology

Occupational therapists provide services in acute stroke unit in 3 wards with 42 beds. Routine daily treatment is performed which aims at facilitating early participation in ADL and usage of affected upper limbs at bedside and ward environment. This is an important role of occupational therapist to promote early discharge home and heighten the rehabilitation morale of our patients. Due to large service needs, with accumulation of experience, experienced occupational therapists have quantified our treatment plan and patient needs and designed a time-framed treatment protocol in 2014 so as to ensure the high quality care according to patient journey and hospital needs. In this protocol, we have derived a treatment content in day 0-3 and day 3-7. In each time frame, we have included all the essential items in both assessment and treatment that the occupational therapist should perform on each stroke patient. After a refining period, a stroke audit was also piloted in 2015 to assess our therapists in stroke unit in carrying out the proper assessment and treatment. This is an essential part to ensure them to provide standard of care during hospitalization in

acute hospital. In 2017, the audit result showed our therapists has achieved above 80% in the audit items of the care standard.

Result

By developing a standard treatment protocol of stroke and regular audit exercise, it provides a proper guideline of care plan for occupational therapists who are green in experience and new to work in stroke unit. Apart from ensuring high quality care to clients, the most important thing is to minimize the sick role as to regain the sense of independence after an acute stroke.