Promotion of keeping elderly safe in community by filling the services gap between patient and social support Tai Po District

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Introduction
Community Nursing Service (CNS) provides care support for the discharged patients who are unable to attend health care facilities. It aims to optimize the patients’ self-care abilities to stay safe in their familiar environment. In 2011/12, 2437 new referrals for CNS were recruited. Only 80% cases completed the full treatment offered by the CNS. Most of the remaining 20% cases that declined CNS were due to the financial constraints. Increased recurrent admissions or attendances at General Out-patient Clinic (GOPC) were thus recorded. Since October of 2012, a budget from Alice Ho Miu Ling Nethersole Charity Foundation was granted to support a project named as 4C “Charity Program for the Care & Concern of the Community elders”. It aims to support those under-privileged elders in Tai Po District to fill the service gap. This project aims to provide timely transitional subsidize home visits for the needy elders with financial difficulties and who failed to grant subsidy from the social welfare department (SWD) in Hong Kong.

Objectives
• Allocated funds to AHNH-CNS to subsidize home visits for needy patients with financial difficulties. • Keep patients healthy in the community and decrease the utilization of GOPC

Methodology
Recruitment of cases: 60 or above aged Hong Kong Residents with the following factors express on terminate CNS because of financial issue Clinical factors • Require nursing support by CNS; • Suffer from 2 or more chronic diseases; • Limited home visitation arrangement due to financial problem • Unable to complete treatment because of financial issue Social factors • Receiving CNS with full charges; • Failed to grant subsidy from SWD; • Live alone; or • Live with spouse only; or • Poor social support; Sponsor home visits • each patient will be given a maximum of 4 visits for free • CNS charges is gazette as HK$80 per home visit
**Result**
Up to 31st December 2012, a total of 15 patients and 51 home visitations were granted for subsidies. The majority of disease categories of beneficiaries had complex respiratory (46.7%) or diabetic (40%) problems. Under the care of CNS, none of them attended GOPC. 53% of beneficiaries could have their problems completely solved in 4 visits. 47% of the beneficiaries required further management. Both the clients’ quality of life and the carers’ psychological status were noted to have improvement under the 4C project.