



Service Priorities and Programmes
Electronic Presentations

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New model of Physiotherapy Consultation under General Out Patient Clinic (GOPC) of Kowloon West Cluster (KWC)

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Introduction

Patient with different problems will attend GOPC in day to day practice. Chronic diseases like Diabetic (DM), Hypertension (HT), Obesity and musculoskeletal pain are commonly seen in GOPC. The tradition model mainly relied on doctors and nurses for education of all aspect like drug compliance, diet and exercise. Limited information was provided to patient on the importance of exercise, how to perform as well as joint care in current practice. Physiotherapy Consultation started to provide full time service in GOPC since 2011 in KWC. We aimed to provide comprehensive management for patient and empower the patient for self management of chronic disease.

Objectives

i) To empower the patient for self management of chronic disease ii) To provide ex consultation and prescription service for patient iii) To provide early intervention in musculoskeletal cases and triage patient to appropriate level of care

Methodology

Exercise consultation and prescription will be provided by individual consultation. Exercise class with emphasis of self management will be arranged for appropriate patients. The method of self monitor by use of RPE level, target heart rate or calculation of exercise time by METS concept will be taught by physiotherapists. Reassessment and goal setting will be provided to ensure the exercise is performing in a safe and progressive manner. Simple pain relief modalities for pain relief in handling musculoskeletal case will be provided. Educational talk for joint care in degenerative joint pain was provided for improving the patient awareness in self management. Triage service will be provided in handling complicated cases which required more sophisticated equipments. The network and support from Physiotherapy department in SOPC of nearby hospital was established.

Result

From Nov 2011 to Oct 2013, 6695 patients had attended the physiotherapy consultation. Their mean age was 60 with male to female ratio 1: 2. Half of them were

having DM and HT while the remaining were having musculoskeletal problem. 3 % of patient was referred back to SOPC physiotherapy department for further management of the musculoskeletal pain. 1765 patients (26 %) had attended for the group session for joint care, fall prevention talk and exercise class. Conclusion With the new service model of physiotherapy consultation in GOPC, we hope to provide better patient management in chronic disease management. In long run, we aimed to decrease the burden of SOPC physiotherapy service in handling the chronic musculoskeletal pain cases and treating the patient in appropriate level of care. Earlier consultation and intervention can be provided to patients in chronic musculoskeletal pain