



Service Priorities and Programmes
Electronic Presentations

Convention ID: 639

Submitting author: Mr HANG CHEUNG

Post title: Occupational Therapist I, Pamela Youde Nethersole Eastern Hospital, HKEC

Occupational Therapy (OT) Services Outcome Reviews in General Outpatient Clinics (GOPC) in 7 clusters

Cheung H (HKEC), Leung K (HKWC), Chan CW (KEC), Wittlin-Yau HC (KCC), Chan SF (KWC), Ngan SY (NTEC), Leung E (NTWC)

Family Medicine Specialty Group, Occupational Therapy Central Organizing Committee, Hospital Authority

Keywords:

Occupational Therapy
Services outcome reviews
primary care services

Introduction

Recent HA strategic service plan remarked the need to manage the growing demands, shift focus toward prevention and early intervention. In response to this development, OT pioneered in various disease management programs in primary care with the aims to promote health, injury prevention, and enhance wellbeing in physical, mental and emotional aspects (Fong, 2008). Since 2010, there are 13000 clients through over 50000 attendances being served annually in GOPCs in 7 clusters. The outcomes are evaluated.

Objectives

Retrospective analysis of treatment outcome of all cases attended OT programs in 7 clusters GOPC from 1-1-2013 to 31-12-2013

Methodology

6 programs with OT involvement were retrieved namely Enhance Public Primary Care Service (EPPS), Integrated Mental Health Program (IMHP), Nurse and Allied Health Clinic (NAHC) - Respiratory Disease Management Program (RDMP), NAHC – Fall Prevention Clinic, Risk Assessment and Management Program (RAMP) for Diabetes and Hypertension, and Smoke Cessation & Counseling Program (SCCP).

Result

In EPPS, patients with memory decline, functional decline and musculoskeletal pain were recruited. Programs reviews showed improvement in the mean score of Chinese Mini-mental Status Examination($p=0.041$), Everyday Memory Questionnaire($p=0.015$), pain score($p=0.0001$) and various functional score such as Disability of Arm, Shoulder and Hand, Roland Morris Disability Questionnaire and Health Assessment Questionnaire($p=0.0001$) in NTEC and HKEC. The IMHP OT provides early intervention for patients with depressive mood and anxiety. The family doctors in collaboration with OT for treatment showed significant improvement in Patient Health

Questionnaire-9($p < 0.001$) and Generalized Anxiety Disorder-7($p < 0.001$) in HKWC and KCC. NAHC-RDMP provides rehabilitation for patients with smoking and respiratory symptoms. Programs include lung function screening, brief pulmonary rehabilitation and Lifestyle redesign program enable clients in self-management for a healthy lifestyle. NAHC-Fall Prevention Clinic detects elderly fall risk and provides appropriate services such as, fall-risk management, home modification advice and coping strategies for physiological deficits. Studies showed effectiveness in reducing fall rate($p < 0.001$) and improving Barthel Index and Lawton (IADL) score($p < 0.001$) OT in RAMP for DM and HT at NTWC encourage clients for better self-management through occupational lifestyle redesign, mind body relaxation and wellbeing promotion. Evaluation found enhancement in lifestyle, stress management and wellbeing for healthy living, as well as reduction in Cardiovascular risks for DM/HT patients. OT is one of the professional involved in SCCP at NTWC with aims to assist the smokers intended to quit smoking through smoke counselling and cessation service. Conclusion All these OT programs in 7 clusters aim at health empowerment, disease risks reduction and early intervention. Our clients are successfully empowered to manage their specific conditions with wellbeing in physical, mental and emotional aspects. With this foundation, working with the direction of Family Medicine multidisciplinary care teams, OT horizon is expected to further developed in the primary care setting.