Service Priorities and Programmes

Electronic Presentations

Convention ID: 241
Submitting author: Ms Tak Man LO
Post title: Senior Physiotherapist, Tai Po Hospital, NTEC

Outcome-focused care and inter-discipline collaboration in stroke rehabilitation

Lo TM(1), Au KM(2), Wong KM(2), Lau FO(1)
1. Physiotherapy Department, Tai Po Hospital 2. Occupational Therapy Department, Tai Po Hospital

Keywords:
Inter-discipline collaboration
outcome-focused care
stroke rehabilitation

Introduction

People lacking of social support in Hong Kong reside in Mainland China usually return to Hong Kong for further management after acute stroke attack. Tai Po hospital (TPH) provides extended-care rehabilitation for them. Under fast track rehabilitation and cross border effect, service demand and quality need to be monitored and managed.

Objectives

1. Monitor service demand and quality through outcome-focused evaluation 2. Enhance fast track rehabilitation by inter-discipline collaboration

Methodology

Stroke patient admitting TPH was under organized care plan and regular case meeting to formulate and align pre-discharge plan. Inter-disciplinary members assessed key performance indicators on daily functions and mobility, which were reported in case meeting. Early identification of care-giver for timely involvement, empowerment by interactive education with joint effort from different disciplines avoided duplication or conflicting information. Concerted effort from nurse, physiotherapist and occupational therapist to obtain MBI facilitated monitoring of rehabilitation progress. Performance indicators and demographic data including age, sex, type of stroke, pre-morbid function, residential types, care-giver training sessions and length of training were collected for analyzing. Outcome evaluation report was shared annually to highlight on efficiency and effectiveness of rehabilitation.

Result

Result From 2011 to 2013, longitudinal analysis in TPH had shown an increasing proportion of patients (73.7% in 2011, 77.5% in 2012 and 81.1% in 2013) who were able to walk independently becoming dependent after stroke attack. Over 40% of

them were bed-ridden or sitter when they were admitted to TPH, despite their poor functional mobility status, under coordinated inter-discipline care, there were statistically significant improvement ($p<0.001$) in both functional and mobility indicators upon discharge, including Modified Barthel Index (MBI), Modified Functional Ambulatory Category, and Modified Rivermead Mobility Index, with the average length of training maintained at 22 days over the 3 years. Conclusion Good interdisciplinary teamwork and outcome-focused care is the key in stroke management under both fast track rehabilitation and cross-border effect. Successful teamwork requires well-structured team with members having established roles and clear line of accountability. Nowadays rapid growth in sciences and technology render advance development in scope among various disciplines, together with high turnover rate in staff, the uphold of collaborative work practice culture need to be nurtured with mutual respect, an open attitude and a patient-focused mind.