HAC 2016 ABSTRACT for Oral Presentations

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Presenting Author: Fred CHAN, RHTSK PTI

Project title

Integrating Rehabilitation into the Heart of Acute Care - Ward-based Physiotherapy at C8 Elderly Friendly Ward Increase Therapy Time and Team Collaboration

Author(s)

Chan F(1),Tao K(1),Chan C(1), Ng F(2),Ho J(2), Kng C(2)
(1)Physiotherapy Department,(2)Department of Geriatrics,Ruttonjee and Tang Shiu Kin Hospital

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Introduction

Safe & early mobilization, fall prevention and promoting functional independence are essential components in acute care of the elderly. C8 acute geriatric ward, incorporate a specifically designed multifunctional day area replete with rehabilitation equipment, enables ward-based physiotherapy (PT) that engages major key stakeholders. A systematic PT mobility assessment and fall prevention algorithm was developed to ensure that needy patients were recruited for the ward-based early mobilization and fall prevention PT program in additional to the traditional bed-side PT care. Besides, safe & early mobilization was advocated in the evening and during weekend, through the active engagement of committed nurses and caregivers.

Objectives

To evaluate the clinical benefits and efficiency of the ward-based PT program.

Methodology

C8 patients screened or referred for in-patient PT from July to December 2015 were recruited.
Cross-sectional study was conducted to examine patients' demographics and physical performance.
Process indicators on patient attendance, PT time, transportation time and staff man-hours were analyzed.
Besides, satisfaction survey was conducted to collect feedback from patients and nurses.

Result

680 patients (62%) of 1098 admissions in C8 ward were recruited in the ward-based PT program. 103 of them (mean age=81.1±6.4; 9.4% of C8 admissions) were identified through the PT Fall Prevention Algorithm. Ward-based PT training session lasted for 75 minutes in the morning and 35 minutes in the afternoon. Also, patients, caregivers and nurses were engaged in evening and weekend exercise training session (20 minutes daily). Three times more acute patients benefited from the PT early mobilization program sooner, with 5.5 times increase in PT duration (i.e. 130 vs 20 minutes per patient per day when comparing ward-based PT in C8 and gym based PT in comparative acute geriatric ward respectively). Rehabilitating patients in the well-equipped C8 multifunctional day area not only helped to save 1.7 supporting man-hours/day in porterage but also enabled longer PT session with better exercise tolerance in patients. Ward-based PT program was well accepted by key stakeholders; the overall satisfaction of both patients and nurses were 87.5±6.8% and 84.3±9.8% respectively. Conclusion: Two-thirds of acute elderly patients, who received ward-based PT as part of comprehensive multidisciplinary elderly friendly care, benefitted from safe & early mobilization and increased PT duration. In addition, the enhanced multidisciplinary collaboration and increased care-giver engagement resulted in satisfaction of both patients and nurses.