Improving The Well Beings of Patients at The End of Life — Meeting Their Caregiving Needs in Discharge Planning

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Introduction
The quality of life of palliative care (PC) patients is strongly associated with normal functioning in daily living activities. Along their disease trajectories, patients’ health condition deteriorates at various degrees and their ADL needs would become more diverse and complex which place heavy caring burden on their families. It is important for Occupational Therapist (OT) to meet patients’ multidimensional needs in order to empower them to cope better with their disease.

Objectives
(1) to identify patients' needs with different functional levels, discharged locations and caring support which would be the crucial factors for determining OT interventions proactively in the PC ward

Methodology
Blanket coverage of OT service to PC ward of Our Lady of Maryknoll Hospital was provided upon patient admission between January and April 2016. Palliative Performance Scale (PPS) on admission, discharge locations, types of OT intervention and patient and caregiver’s views on Readiness for Home Care Measure (RHCM) (3 indicators: Wish to Discharge Home, Readiness for Discharge and Competence for Home Care being rated with Numeric Rating Scale 0-10) were reviewed. Patients were compared according to their discharge locations, which were discharged home (DC home) and discharged old aged home (DC OAH).

Result
Screening for OT service was provided to 193 PC in-patients (M=105, F=88) with mean age 74.9(SD±13.1) in which 31.6%(N=61) was discharged home, 17.6%(N=34) was discharged to OAH and 49.7%(N=96) had succumbed. Their mean PPS scores on admission were 54.8(SD±14.2), 45.9(SD±11.3) and 38.9(SD±13.5) respectively which were significantly different from each other (p