



Rehabilitation Based on Patients Needs: A 4.5-year Evaluation of the Pioneering Medical-Social Collaboration in Fragility Hip Fracture Rehabilitation

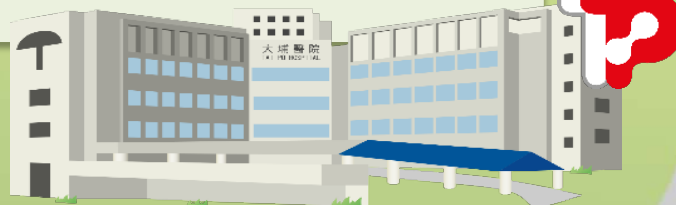
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Introduction: Goal of rehabilitation for geriatric hip fractures is to achieve an optimal functional state with maximal independence in community. This cannot be achieved without community parties engagement and collaboration. With conjoined effort of the TPH and the NTE-CRDC of SAHK, a clinical pathway management with medical-social collaboration (MSC) for fragility hip fracture has been launched since 2008.



Clinical Pathway provides a cross-sector platform for multidisciplinary healthcare and social professionals to organize their rehabilitation and support services in a coherent and consistent manner. The target patients discharged from TPH will be referred to NTE-CRDC with mutually-agreed assessment tools and training protocols, offering the best chance for successful outcomes in a cost-effective way.



Methodology: All hip fracture patients discharged from NTE-CRDC during Jan 13 - Jun 17 inclusive were reviewed with respect to their length of stay, functional performance and status before and after receiving community-based rehabilitation (CBR) services from NTE-CRDC.

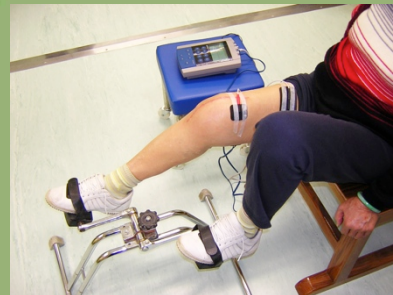


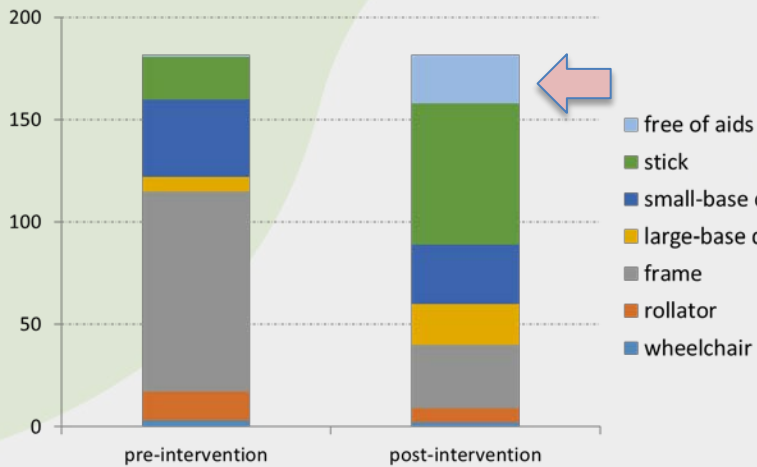


Objective: evaluate the MSC clinical pathway protocol for fragility hip fracture over 4.5-year period.

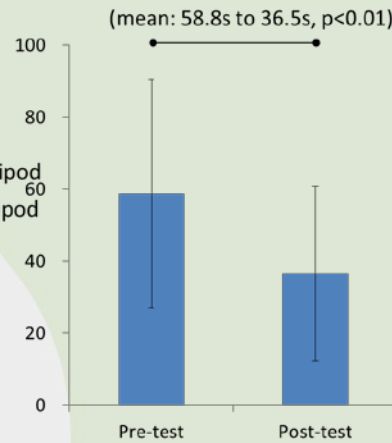


Results: A total of 182 patients were reviewed. The median length of service in NTE-CRDC was 87 days. Nearly all patients (98.9%) were self-ambulatory upon discharge from CBR with significant improvement ($p < 0.01$) in functional scores as shown below.

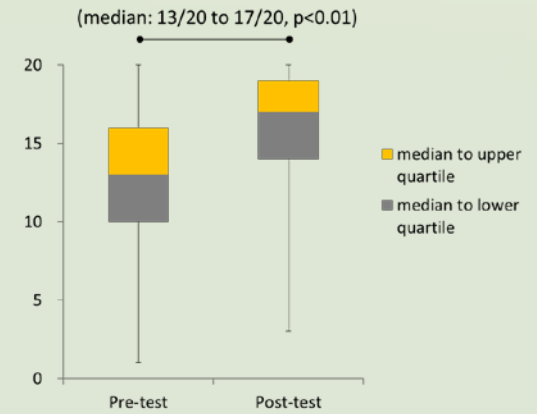




Distribution of walking aids used



Time Up-and-Go test (s)



Elderly Mobility Scale (20-pt)

Conclusion: The NTE-CRDC serves as part of a community-based solution for enabling and engaging chronic orthopedic patients through a seamless integration of medical, rehabilitation and social supports in a cross-sector clinical pathway. CBR puts emphasis on **lifestyle adjustment, social and community reintegration, and competence building of both patients and their caregivers for optimizing independence.** In the long run, it enhances the overall effectiveness of the local healthcare systems and facilitates aging in place.

