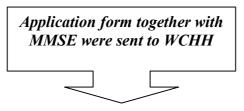
<u>Services of Hospital-Community Collaboration Project in Dementia</u> <u>Care for Southern Elders (南區耆趣一條龍)</u>

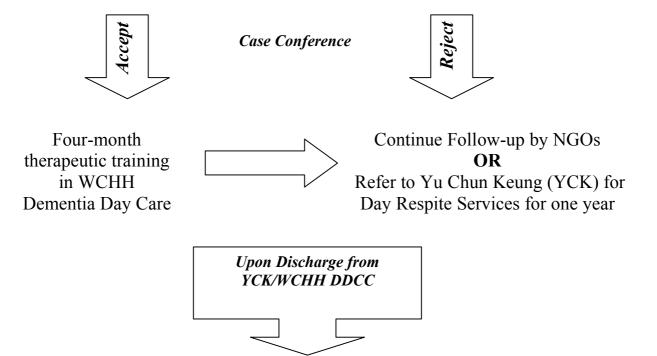
Application via community partners of Non-Governmental Organizations (NGOs)



Conduct MMSE Screening by NGOs Social Workers



Multidisciplinary Assessment by Wong Chuk Hang Hospital (WCHH)



Refer to NGOs for telephone follow-up services Terminate case if the condition is stable Hospital-Community Collaboration Project in Dementia Care for Southern Elders (南區耆趣一條龍) – A Evaluation From Nursing Perspective

> <u>Rebecca Chan (RN),</u> Woo CP (RN), Yvonne Chan (WM), Eva Yim (RN) L Dr Bernard Kong Wong Chuk Hang Hospital

Introduction

- Paradigm shift of patient care focus from inpatient to community setting
- Increasing number of older adults was happened globally
- HK Census & Statistics (2001) showed that nearly 15% of the population with aged 60+.
- In HK, 6% of elderly persons aged 70 or above suffer from dementia (Chiu, Lam, Leung, et al, 1998).

Introduction

- Early detection & intervention for dementia elders is crucial.
- So, one stop service on dementia care & strengthening the partnership with community partners must be amplified.
- Hence, the Hospital-Community partnership for providing one-stop dementia day care services has been commenced since 24 October 2003 in WCHH.

Collaboration Organizations

- Dementia Day Care Centre (DDCC) in Wong Chuk Hang Hospital (WCHH),
- Aberdeen Kwai-fong Welfare Association Social Services Centre (AKWASSC),
- Tung Wah Group of Hospitals (TWGHs) David Trench Home for the Elderly,
- TWGHs Yu Chun Keung Memorial Care and Attention Home (YCK),
- TWGHs Yeung Shing Memorial Long Stay Care Home

III COLUMN

- TWGHs Jockey Club Care and Attention Home,
- TWGHs Wong Siu Ching Centre for the Elderly

Purpose of the Project 1. To depict and promote the onestop services of 南區耆趣一條龍 in providing continuity of care to Southern Elders who suffered from cognitive impairment

2. To explore the effectiveness of day care service for the dementia elderly and their caregivers.

COLUMN TRADE

One-stop services of 南區耆趣一條龍

 Early screening and continuity of care for demented elders can be positively achieved for sustaining their functional and psychological stability without the need of institutionalization.

Therapeutic Services in DDCC

- Staffing:
 - Multi-disciplinary team
- · Environment:
 - Home-like and harmony environment



DDCC Lobby



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DDCC Activity Room



DDCC Activity Room



Therapeutic Services in DDCC

- Range of services:
 - Day care with a wide range of activities are planned, respite services, information and referral, support groups, assistance and counseling
 - Home visit services was provided by RN
 - Direct mobile phone consultation was provided by RN

Program



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Program



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Program



A Evaluation on Effectiveness of Project from Nursing Perspective



Instruments

- Mini-Mental State Examination (MMSE) was used for assessing clients' cognitive functioning with the cut-off point according to educational level (Chiu, Lee, Chung, & Kwong, 1994a):
 - 18 for Illiterate
 - 20 for 1 2 years of education
 - 22 for more than 2 years of education
- And, Geriatric Depression Scale short form (GDS-S) was employed to assess level of depression of clients. The optimal cutoff score of 8+ indicates the presence of depression (Lee, Chiu & Kwong, 1994)

Instruments

- Also, State-Trait Anxiety Inventory (STAI) was employed to measure the present (Astate) and chronic anxiety levels (A-trait) of the carers (Shek, 1988):
 - Score 20 40: Mild anxiety
 - Score 41 60: Moderate anxiety
 - Score 61 80: Severe anxiety
- Besides, Life Satisfaction Scale (LSS) was used for measuring the concept of life satisfaction level of clients and carers. LSS is five-item scale with scores ranging from 5 to 35 with higher scores indicating greater life satisfaction (Diener, Emmons, Larsen & Griffin, 1985)

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Method

- Descriptive statistics were used to examine the baseline characteristics and profiles of the clients.
- Paired sample t-tests were used to measure the effectiveness of the project.

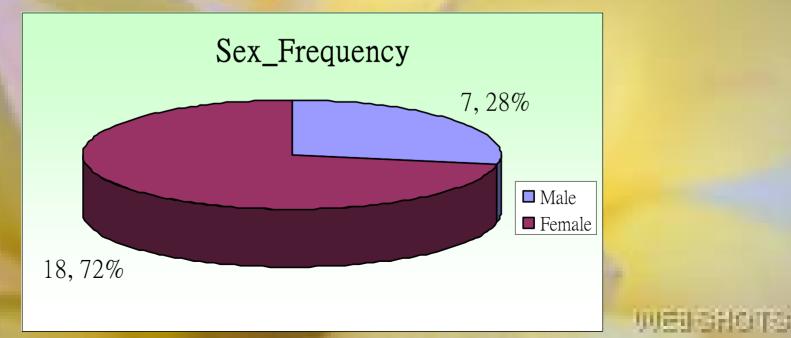
Results

- 52 referrals were received
- 36 clients were arranged for multidisciplinary assessment.
- 25 clients were eligible for therapeutic training.
- 4 of discharged clients received day respite services in YCK and others received telephone follow-up services upon discharge.

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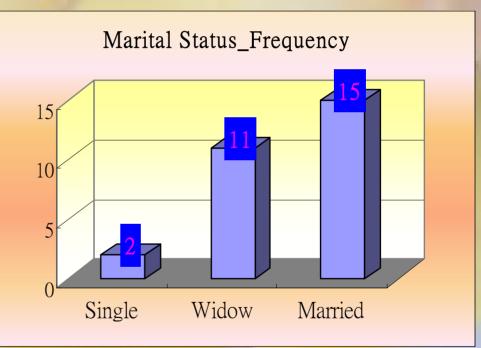
Sociodemographic Data

- Sex of the Subject (Female: 18 and Male: 7).
- Subject aged 62 90 with mean age of 78.4 (SD = 7.24).



Sociodemographic Data

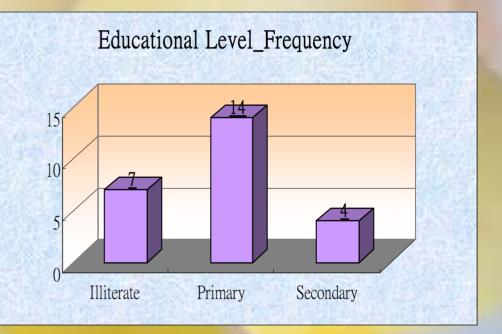
- 2 (8%) of them were single,
- 15 (48%) were married and
- 11 (44%) were widow or loss of spouse.



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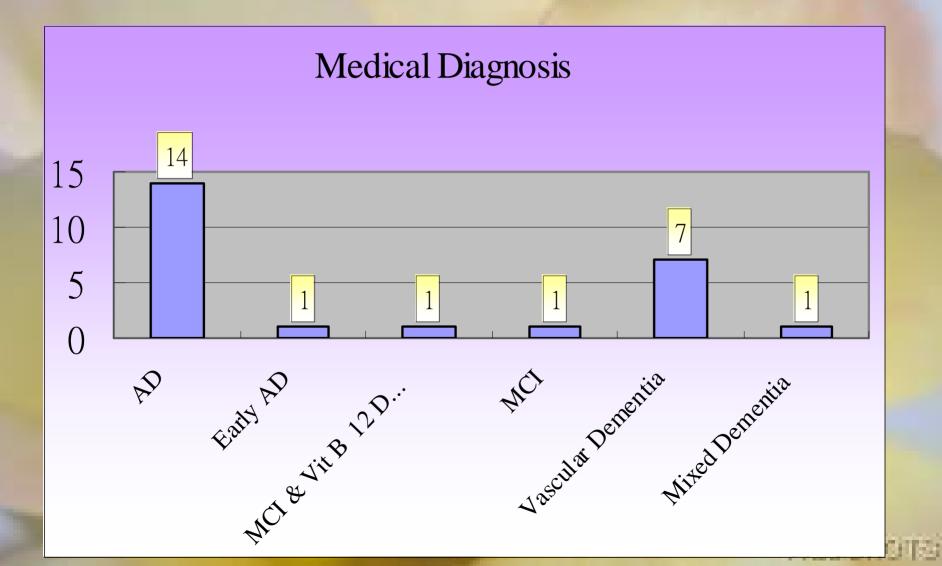
Sociodemographic Data

- 18 (72%) of them received some degree of education,
- 7 (28%) of them received no education at all



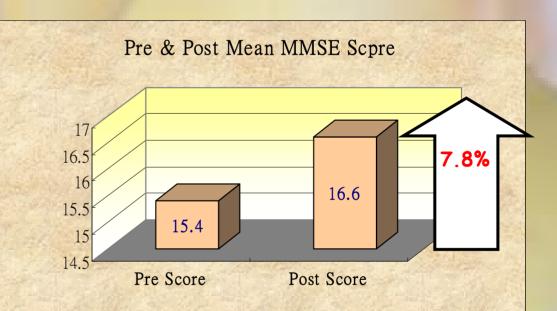
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Medical Diagnosis



Comparison of Mean MMSE Score Pre & Post Intervention Period

Mean MMSE
score changed
from 15.4 to
16.6.



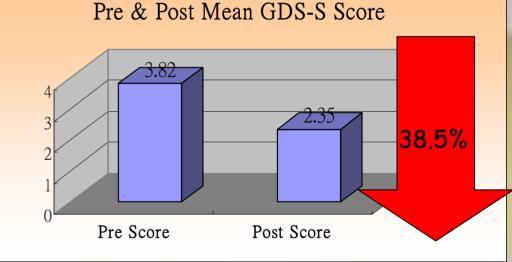
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Comparison of Mean MMSE Score Pre & Post Intervention Period

 By using paired-sample t-test, it was found that there was no significant difference between the mean scores (p > 0.05).

Comparison of Mean GDS-S Score Pre & Post Intervention Period

 Mean GDS-S Score decreased from 3.82 to 2.35.



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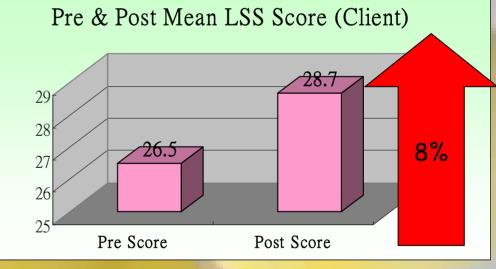
Comparison of Mean GDS-S Score Pre & Post Intervention Period

 By using paired sample t-test, it was found that there was a significant decrease in the GDS-S mean score (p < 0.01).



Comparison of Mean LSS Score Pre & Post Intervention Period

 Mean LSS (Clients)Score increased from 26.5 to 28.7.





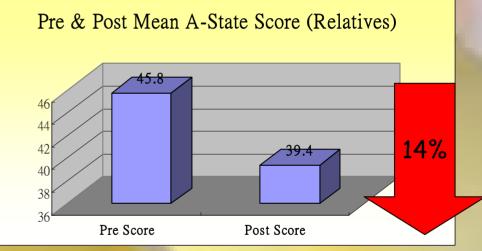
Comparison of Mean LSS Score Pre & Post Intervention Period

 By using paired sample t-test, it was found that there was a significant increase in the mean LSS (Client) score (p < 0.01).



Comparison of Mean STAI Score Pre & Post Intervention Period

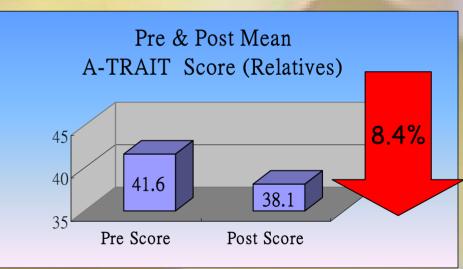
Mean A-State
Score changed
from 45.8 to
39.4.





Comparison of Mean STAI Score Pre & Post Intervention Period

Mean A-TRAIT
Score changed
from 41.6 to
38.1.

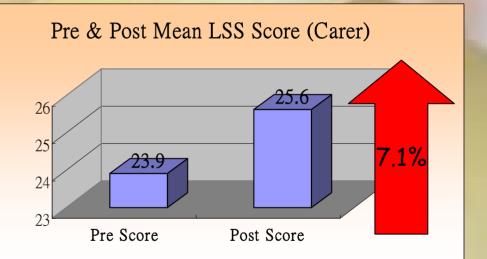


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Comparison of Mean STAI Score Pre & Post Intervention Period

 By using paired sample t-test, it was found that there was a significant difference in the both mean A-state score (p < 0.01) and A-trait score was found (p = 0.025). Comparison of Mean LSS Score Pre & Post Intervention Period

Mean LSS
Score (Carers)
changed from
23.9 to 25.6.



Comparison of Mean LSS Score Pre & Post Intervention Period

 By using paired sample t-test, it was found that there was no significant difference between the mean LSS score (p > 0.05).

Summary of Results

Instruments	Results	Statistical Significance
MMSE	↑ 7.8%	p > 0.05
GDS-S	↓ 38.5%	P < 0.01
LSS (Clients)	▲ 8%	P < 0.01
A-state (carers)	↓ 14%	P < 0.01
A-trait (carers)	↓ 8.4%	p = 0.025
LSS (Carers)	↑ 7.1%	p > 0.05

Conclusion

- From nursing perspective, building a successful Hospital-community partnership enables the demented clients and carers to maintain an optimal psycho-social functioning without the need of institutionalization.
- The carers can continuously take care of their demented elders at home, their anxiety can also be reduced

Conclusion

 Hospital-community Collaboration one-stop dementia services can achieve positive outcomes and improve the quality of life for both the clients and carers.

Limitation & Recommendations

- Limitation:
 - Small sample size and the design is not a Randomized Control Trial.
- Recommendations:
 - A longitudinal study is recommended for evaluation of long-term effectiveness of the project.

References

- Chiu HF, Lam LC, Leung T, et al. Prevalence of dementia in Chinese elderly in Hong Kong. Neurology 1998;50:1002-1009.
- Chiu, H., Lee, H.C., Chung, W.S., & Kwong, P.K. (1994a). Reliability and validity of the Cantonese version of Mini-mental State Examination - A preliminary study. *Journal of Hong Kong College of Psychiatrists*, 4, 25-8.
- Diener, E., Emmons, R.A., Larsen, R.J., & Griffin, S. (1985). The Satisfaction With Life Scale. *Journal of Personality Assessment*, 49(1), 71-75.
- Hong Kong Census & Statistics (2001). Hong Kong Population Health Profile Series. [on-line] Available www site: http://www.info.gov.hk/dh/diseases/phps/c1.pdf
- Lee, H.C.B., Chiu, H.F.K., & Kwok, P.P.K. (1994) 'Cross-validation of the Geriatric Depression Scale Short Form in the Hong Kong elderly', Bulletin Of The Hong Kong Psychological Society, 32/33:72-77.
- Shek, D.T. (1988). Reliability and factorial structure of the Chinese version of State-Trait Anxiety Questionnaire. *Journal of Psychopathology and Behavioral Assessment*, 10, 303-317.

