

Crucial Factors for Effective Collaboration: Experience on Empowerment Projects for People with Chronic Illness

KWOK A, SO A, CHOU F, LI L, IP WK, AU YM

Institution : The Hong Kong Society for Rehabilitation Community Rehabilitation Network (HKSR CRN)

Introduction

Since 2000, Patient Resource Centres (PRCs) and various clinical departments in Hong Kong East Cluster (HKEC) have initiated the collaboration with Community Rehabilitation Network (CRN) and some related patients' organizations, for empowering chronic patients to self-manage their life and mutual help, as well as improving their psychosocial well-being. Some factors are considered as crucial to make the collaboration to be successful.

Purpose of the Project

"Self Management" is recognized as significant and essential for better compliance of treatment and sustaining health-related behaviours. It means chronic patients could manage their life with illness and includes disease, role and emotion management. It requires enhancing patients' self-efficacy, facilitating change in daily life pattern and improvement in problem-solving ability, which is not a short process. Therefore, joint-hand between hospital and community is needed to make it achievable and to better utilize resources.

Material & Methods

Several types of "interfacing protocols" have been mutually developed:

Patient Seminar – PRCs invite medical professionals from HKEC to deliver short lectures, and coordinate all the promotion and recruitment in the hospitals. CRN are usually responsible for organizing these programs. Different seminars and workshops have been jointly organized for many kinds of chronic patients.

Pre-discharged Program – This kind of program are mainly for stroke patients and their caregivers. Stroke patients who will be discharged from hospitals are recruited either by ward nurses or medical social workers. Colleagues of PRCs and CRN co-lead the program with patient volunteers' sharing and sometimes with nurse specialist's lecture.

Direct Referral and "Prescription" – This model is newly developed in this year. Patients are directly referred to join Chronic Disease Self-Management Program (CDSMP) or emotion management course called "心情新角度". These programs are treated as one important part of the treatment pathway and therefore are "prescribed" to those in need. This model is adapted in DM centres, rheumatology and chronic pain clinics. Major referrers are nurses.

Results

Throughout the years, over 5000 patients have participated in seminars and pre-discharged programs. One-third of them have then joined CRN self-management services. For the newly developed "prescription model", the results are encouraging. Since November 2007, 50 patients are directly referred to join the programs.

While crucial factors for effective collaboration can be categorized into macro and micro levels:

Macro-level	<ul style="list-style-type: none"> Partnership with community is recognized as key direction of hospitals. Mechanism for regular evaluation and monitoring. It is often easy to start, but difficult to sustain.
Micro-level	<ul style="list-style-type: none"> Simple and clear materials for promotion: Patients can easily understand the service without much elaboration from clinic partners. User-friendly procedure and tools for clinical partners to make the referral. Content of pre-discharged program must convey the message of self-role and self-management. Clinical partners' involvement and support, as well as their confidence on community services.

Conclusions

With the establishment of Chronic Disease Platform and different disease group panels, a good foundation has been built. However, the factors on micro-level are even more crucial for success of collaboration. More efforts have to be put to improve these factors.