Healthy Community: We Can Make A Difference



Posters Presentation

Extend Medical Care in Residential Care Home for the Elderly in HKEC

Author: Lui S F, Kong Samuel, Au Lina, Tsue Bonnie, Ho Y K

Institution: Department of Psychiatry, Psychogeriatric Team Outreaching Service

Introduction:

This program is an integration of medical and nursing service to cover Residential Care Home for the Elderly (RCHEs), especially those homes with over 200 places for monitor their demented client's drug compliance and improved behavioral and psychological symptoms.

Purpose of the Project:

The program aims to conduct the dementia assessments and to provide platform for holistic rehabilitation of the elderly through participation.

Material & Methods:

- 1. Community education program to increase public awareness in dementia:
 - a. One educational talk hold on 26 Jul 08, around 50 participants including health professionals, social workers and informal carers attended
 - b. Contents including the management of behavior and psychological symptoms of dementia (BPSD) and outcome measures of the program
- 2. Collaborative care model in RCHEs for demented elders:
 - Develop an Electronic Template of Nursing Discharge Summary and Care Plan to facilitate coordinated and establish IT infrastructure and implement hand-held medical records in RCHEs
 - Joint medical appointment with Physician and psychiatric nurse to conduct mental assessment on complicated cases
- 3. Integrated rehabilitation program for demented elderly:
 - Staff training and educational kit on care of dementia, and community resources are distributed to participants
 - 6 sessions of multidisciplinary group intervention on care of dementia is introduced such as memory training, reality orientation and reminiscence provided to newly diagnosed patient with dementia
 - Assessment including Mini-mental state examination, Geriatric Depression Scale and Quality of Life and on-site Followup Nurse Consultation to monitor client's progress

Results:

Primary outcome is build up gradually to around 8 RCHEs in clusters and provide 1,400 home visit attendances at 1Q09.

Conclusions:

The program may better prioritization of resources based on risk levels to shorten the long waiting time in OPD (Psy) and more collaborative care delivery together with RCHEs staffs for earlier interventions of dementia.