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Outcome of Discharge Planning Linked to Long-Term Care plan 2.0 for Elderly Orthopedic Surgery Patient.

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Background

In January 2017, the "10-Year Long-Term Care plan 2.0" policy (Long-Term Care 2.0) promoted by the Government in Taiwan. In response to the long-term care needs arising from the increase in disability, dementia and frailty, Long-Term Care service system has been established in a community-based to alleviate the pressure on primary caregivers to return home and assist patients to return to the community as soon as possible.

Purpose

The purpose of this study was to investigate the effectiveness of the discharge preparation service plan linked to Long-Term Care service 2.0 for the elderly patient in post Orthopedic surgery.

Admission

When the patient admitted in the ward, nurse will evaluate their Activities of Daily Living (ADL), and give the leaflet about Long-Term care 2.0 to them.

Hospitalization

If ADL>2 score, the case manager will recheck their need about home care before discharge.

Discharged

If the patient want to apply for the Long-Term care 2.0, we will help them evaluation and application.

Home

When they discharge, they will receive the Long-Term care service at home in the next day.

Methods

Analysis of hospitalized elderly patients (age >65 years) in 2017 who performed orthopedic surgery in our hospital, the number of cases for the discharge preparation service plan was 79, and only 3 people (3.78%) were included in the Long-Term Care 2.0. Through the focus group interview unit senior registered nurse, the reason for the low number of cases was found to be 1.No dedicated personnel, 2.The public does not understand Long-Term Care 2.0, 3. There is no long-term recipient standard work procedures, etc.; Intervention 1.Set up Long-Term Care 2.0 dedicated personnel, 2.Produce the long-term referral process of the Instructions handout and posters, and arrange schedule about the Long-Term Care 2.0 of group hospital health education, 3.Develop and announce about the long-term recipient standard work procedures, use the communication software to set up a group, and immediately reply to the questions of the nurses in the evaluation and application of Long-Term **Care 2.0.**



長照2.0!關懷在大同 一、什麼是出院準備衡接長照2.07 為環出院成人即時度得所定長照照得資源、每句與 市政府照管中心連結習院出院準備服務的專案整備器 係、提供有長限需求的對象、在出院前完成評估正在	工、長期2.0服務項目有哪個? 1. 照顧及專業股份 2. 交通超近 3. 輔具股份及易家無障礙環境改善服務 4. 電息股份 四、長期2.0的輔助原則? 1.規顧及專業服務			
出程後轉介呈照管中心· 二、哪些是長期照顧服務對東?	10,820-36,180	低收入户	中 也 收入户	一般声
長期照顧差對與職長單(大時仍與以上)及身心時能 障礙者、提供包含長期醫療、護理、生活、個人與私	部分支持北平	0%	5%	16%
會支持之照復・以改易成維持正常生活・	政府税助比率	100%	95%	84%
表別規模提得對象,以目常生活實施人協助者為生; > 日常生活活動功能(ADE)納夫 1. 吃板時需要協助	2. 交通接送联務			
	U.R 1,680-2,400	佐收入产	中极	-80
 仅床上交相及移位到椅子或鞍椅需要協助 上股州进程中需要協助 选择需要協助 	高班市区 部分支援化率	0%	854	25%
5. 平地走動寬養協助 6. 穿胶长排柱或实务监助	福建地區 100.0000年	0%	7%	21%
工具性目常生活活動功能(IAU)納失	3. 辅英服務及否定無障礙環境改善服務			
leaflet about Lor	ng-Tei	m c	are	2.0
T SHINESHIP TO THE	都分身情化率	0%	10%	30%
4. 不作用外交多级处	REHURS	100%	90%	70%

Results

From January to July, 2018, the total number of discharge preparation services for hospitalized elderly patients who performed orthopedic surgery in our hospital was 82, of which 12 (14.63%) were used for the Long-Term Care 2.0, and the number of cases received before the improvement was improved by 4 times.

Background

After the intervention improvement strategy, it showed that the effect of discharge planning linked to Long-Term Care plan 2.0 for elderly orthopedic surgery patient, which were elevated to four times in half a year, although the patients and their families did not understand the Long-Term Care 2.0 plan and had a desired gap in the implementation process. Fortunately, the assistance and support of the Nurse Head, the nurse managers of the nursing department and colleagues have enabled the project to proceed smoothly, to implement the social welfare that the government actively promotes, and it is also possible to allow patients and their families to obtain more complete continuity care when they return to their homes.





