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The Effect of Sharing Decision making in Stroke Rehabilitation— The Preliminary Results



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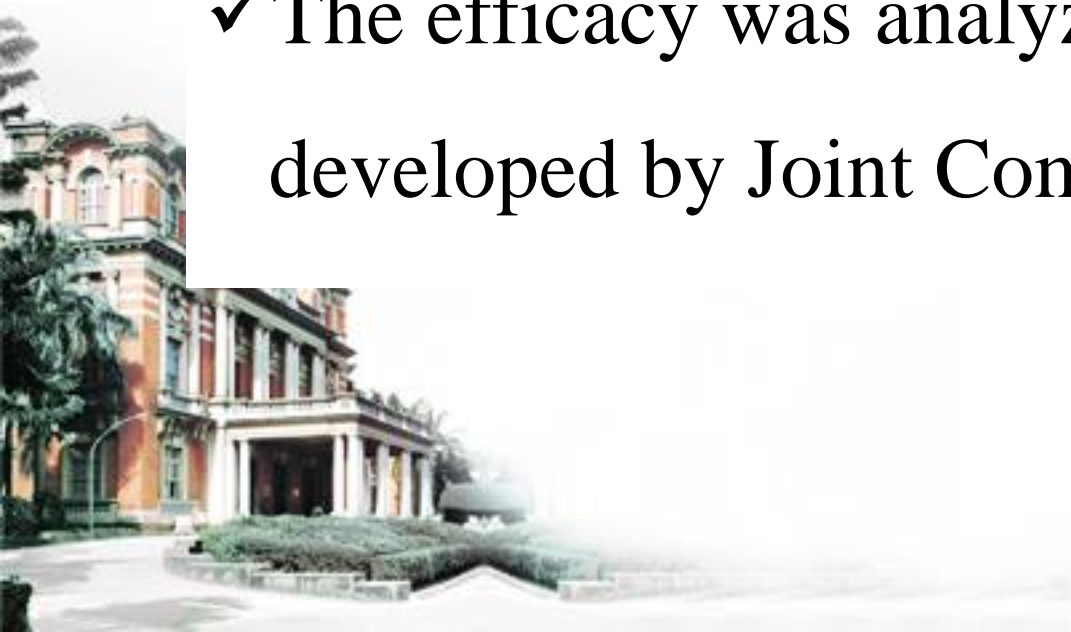
Background

- ✓ Patients with stroke have to decide the rehabilitation plan after stabilization of acute medical management.
- ✓ This study aimed to explore the efficacy of Patient Decision Aids (PDA) for shared decision making (SDM) of rehabilitation after stroke.



Methods

- ✓ From January to December 2020, post-acute phase stroke patients were recruited for investigation.
- ✓ The efficacy was analyzed by the revised questionnaire developed by Joint Commission of Taiwan.



Methods

【Choice Talk】

The processes were initiated by doctors.



【Option Talk】

The discharge planning department use PDA compares differences rehabilitation options, explanation of the advantages and disadvantages, confirmed the understanding of rehabilitation plan of the patients or family.

【Decision Talk】

The optimal rehabilitation plans were, according to the patient's values to make decisions.



Patient Decision Aid of rehabilitation after stroke.

一、Post-Acute Care

This plan aimed to improve functional recovery and provide integrated care. The criteria were within one month after day of acute stroke onset, stable medical condition, Modified Rankin Scale (MRS) level 3 to 4, and has rehabilitation potential could cooperate with rehabilitation patient. Our healthcare workers will help transfer to Post-Acute Care (PAC) service in regional or community hospitals.

二、Inpatient Rehab

Provide post-stroke needs medical care and received hospital rehabilitation. Will arrange rehabilitation programs, including home program education, caregiver training, etc. Our hospital also has inpatient rehabilitation is needed to consult Rehabilitation Department to evaluate indicated and arrange bed transfer.



三、Outpatient Rehab Services

Referred to discharged home with outpatient or local clinic rehabilitation services. Rehabilitation program arranged by the outpatient physician.

The next step to explore the decision-making processes of the healthcare workers involved in referral and acceptance to post-stroke rehabilitation.

Step1 : What are the Rehab services options? How do they compare?

	Post-Acute Care	Inpatient Rehab	Outpatient Rehab
Suggested Object	Meet the criteria, need mild medical care, and expected significant progress on the intensive rehabilitation.	Need medical care and received more aggressive hospital rehabilitation	Need rehabilitation services but able to manage at home due to milder impairments.
Transfer method	Our healthcare workers will help transfer to Post-Acute Care (PAC) service in regional or community hospitals.	*Our hospital : Consult Rehabilitation Department to evaluate. *Other hospitals : Self-registration for an appointment.	Arrange Outpatient or Clinic Rehab
Rehab mode	By case weekly 5 days	By case weekly 5 days	By case weekly 1 to 5 days
Length of Hospital Stay	Principle 3 to 6 weeks	By case	None
Transportation	Inpatient mode		Need transportation to the rehab place
Cost	Ward Fee (standard rooms or higher class wards.) Caregivers need to be involved in the rehab phase.		Outpatient registration Transportation expenses



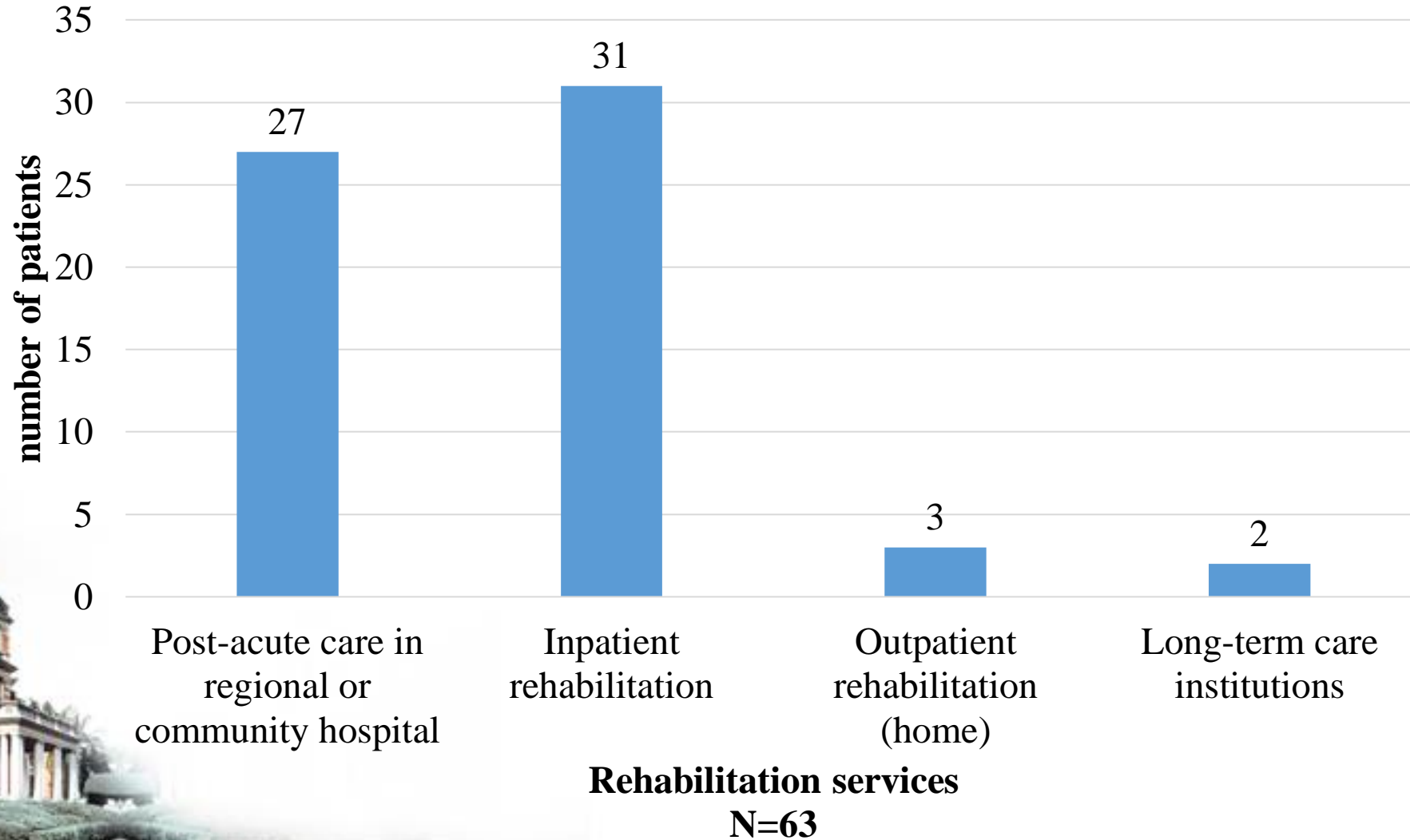
Step2 : When you choose a Rehab services what matters most to you?



Please tick the appropriate box.					
Consider factors	Don't concerned at all.	Concerned level			Very concerned
Transfer to rehab place method	1	2	3	4	5
Weekly rehab mode and times	1	2	3	4	5
Length of hospital stay	1	2	3	4	5
Transportation to rehab place	1	2	3	4	5
Rehab treatment cost	1	2	3	4	5



Results



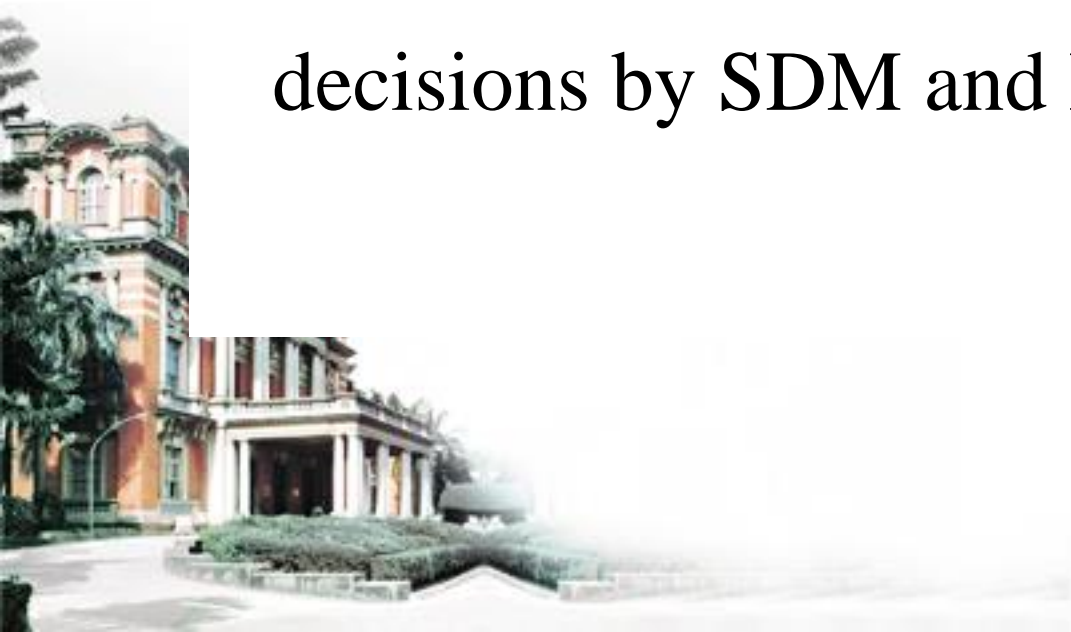
Results

- ✓ The family had better understanding of the rehabilitation plans after sufficient discussion with the healthcare workers, and was more likely to agree with the rehabilitation plans without anxiety.
- ✓ The averaged satisfaction scores of efficacies increased from 3.40 to 4.18 (total = 5).



Conclusion

- ✓ With the process of SDM by PDA, patients were able to choose their preferred and valuable rehabilitation plan. This study suggested the benefit for patients to make medical decisions by SDM and PDA.





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Thank you for your attention.



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