

Using Cross-Team Services To Prevent Disability In Stroke Patients ~ Taiwan experience

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Introduction

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According to the literature, active rehabilitation after stroke can reduce the degree of disability and the burden on families and society. The rehabilitation of stroke patients was also severely affected by the COVID-19 pneumonia epidemic. In addition to intensive rehabilitation in hospitals, patients with stroke need easy-to-use rehabilitation tools that are readily available to maintain their health and prevent disability at home.

Methods and measures

- 1. Established cross-group team project team and executive cross-group cooperation model: Incapacitated due to identification of sick people individually planning and immediately moving cross-group service network (Picture 1).
- 2. Education and training for incapacity to assist and prevent incapacity in employment: Training for occupational health care teachers and occupational exercise training, teaching nurses and caregivers for the sick (picture 2), health ball recovery campaign (picture 3) and earth ball (picture 4), etc. Amusement, increasing/recovery exercise frequency and hobbies.
- 3. Plan for preventive and preventive disability rehabilitation exercise: Regular trainee body educating activities, lawless groups due to epidemics regulations, reform of administrative rules, individual promotion, impact release, parallel provision of exercise aids, increased exercise frequency and muscle strength for disabled persons Come and raise your physical abilities.
- 4. Produced anti-disability educational materials and networked: general earth ball, band strength exercise, and elderly health rehabilitation exercise footage in the sunlight room regular release, parallel footage left on the car, lawless to the sunshine room The car can be viewed by a caring nurse. Also provided by the home security video QR cord for the patient to return to the home for the transmission of the video cantilever to continue the recovery movement.



RESULT

A total of 25 cases were accepted, and the rehabilitation awareness of family members or caregivers increased from 80% to 92%, and the Modified Rankin Scale (MRS) series improved by 92% after rehabilitation. The satisfaction rate of patients discharged from the hospital through the prevention and rehabilitation exercise program during hospitalization can reach 98%.

Conclusion and Discussion

Through this cross-team cooperation model for the prevention of disability, sports aids are used to increase the frequency of exercise and muscle strength to improve the physical function of the disabled, assist the patient to participate in rehabilitation training as soon as possible, improve the self-care ability of daily life, and increase the control ability. Alleviate the sense of hopelessness, strengthen the self-efficacy of the individual case, enhance the motivation of learning, actively face the disease and return to society, allow patients to continue to recover even when they go home, make rehabilitation exercise a habit, and successfully prevent disability and aging.



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