

To evaluate the effectiveness of a discharge-planning program for hip fracture patients

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摘要

Abstract

Aims and objectives. This study aimed to evaluate the effectiveness of a comprehensive discharge-planning service for hip fracture patients, including length of stay, functional status, self-care knowledge and quality of life (QOL).

Background. Hip fractures are the most devastating result of osteoporosis. Care of these patients from the moment they enter the hospital until discharge and postdischarge is a challenging task, requiring a coordinated approach by an interdisciplinary team.

Design. An experimental design was used.

Methods. Fifty hip fracture patients were recruited from a medical centre in Taipei, Taiwan and randomly divided into two groups. The control group received routine discharge nursing care and the experimental group received comprehensive discharge planning. After patient admission, researchers assessed discharge-planning needs, provided discharge nursing instruction, coordinated services and determined discharge placement based on assessment results.

Results. (i) Mean age of 50 hip fracture patients was 78.75 (SD 6.99) years. Mean length of stay was 6.04 (SD 2.41) days for the experimental group and 6.29 (SD 2.17) for the control group. Difference between groups was not significant ($t = -0.394$, $p = 0.696$). (ii) The self-care knowledge of the experimental group was higher than that of the control group ($F = 11.569$, $p = 0.001$). (iii) Significant improvements were observed in functional status of both groups at three months postdischarge, with no significant differences observed between groups. However, the functional status of experimental group patients showed a slightly better trend than that of the control group. (iv) At three months postdischarge, QOL of experimental group patients was better than control group patients.

Conclusions. A comprehensive discharge-planning service can improve hip fracture patients' self-care knowledge and QOL.

