

CLINICAL ISSUES

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

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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.

Relevance to clinical practice. Results of this study can be used clinically as a basis for practical implementation of discharge-planning services in fracture patients.

临床议题

评估髋骨骨折病人出院计划项目的有效性

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关键词：出院计划；髋骨骨折；住院时间；护士；护理；台湾

目的：本研究旨在评估针对髋骨骨折病人的综合性出院计划服务的有效性，包括：住院时间、功能状态、自我护理知识及生活质量。

背景：髋骨骨折是骨质疏松症最具破坏性的后果。从入院起直到出院及出院后，对这些病人的护理是具有挑战性的，需要一个跨学科团队的协作方法。

设计：采用实验设计。

方法：从台湾台北的一家医疗中心招募 50 位髋骨骨折病人并随机分成两组。对照组接受常规出院护理，实验组接受综合性出院计划。在病人入院后，研究者评估其出院计划需求，提供出院护理指导，并根据评估结果协调服务及确定出院安排。

结果：(i) 50 位髋骨骨折病人的平均年龄为 78.75 岁(标准差 6.99)，实验组平均住院时间为 6.04 天(标准差 2.41)，对照组为 6.29 天(标准差 2.17)，两组之间的差异不明显 ($t = -0.394$, $p = 0.696$)。 (ii) 实验组的自我护理知识高于对照组($F = 11.569$, $p = 0.001$)。 (iii) 出院三个月后在两组中都观察到显著的功能状态改善，且两组间无明显差异。然而，与对照组相比，实验组功能状态显示轻度更好的趋势。 (iv) 出院三个月后，实验组的生活质量好于对照组。

结论：综合性出院计划服务可提高髋骨骨折病人的自我护理知识和生活质量。

临床实践相关性：此研究结果可在临床实践中作为对髋骨骨折病人实施出院计划服务的依据。