

### 賽馬會安寧頌第一期計劃成效

#### 1. 安寧照顧服務、培訓及教育活動

<u>社區安寧照顧服務：</u>	
1)	- <b>5,002</b> 名病人及家庭成員接受社區安寧照顧服務
2)	- <b>36</b> 間安老院舍參與計劃
<u>安寧照顧專業培訓：</u>	
3)	- <b>8,192</b> 名社區及醫院專業人員接受培訓
4)	- <b>2,256</b> 名安老院舍工作人員接受培訓
5)	- <b>586</b> 名安寧義工接受培訓
<u>知識與技術轉移：</u>	
6)	- <b>29,025</b> 名人士參與計劃舉辦的 <b>1,377</b> 個社區教育活動
7)	- <b>350,000+</b> 名人士瀏覽計劃的多媒體資訊（包括網站、微電影和個案影片）
8)	- <b>5,600,000</b> 報章閱覽人數（計劃記者招待會報導及計劃撰寫的報章專欄）

#### 2. 計劃成效調查

<u>公眾對安寧照顧的認識：</u>	
1)	- 有聽過安寧照顧：由 <b>30%</b> (2016年) 上升至 <b>39%</b> (2018年)
2)	- 對安寧照顧的接受程度：由 <b>81.7%</b> (2016年) 上升至 <b>83%</b> (2018年)
<u>病人及家庭成員在服務使用前後的改變：</u>	
3)	- 病人身體不適徵狀減少：由 <b>9.7</b> 下降至 <b>7.9</b> (IPOS-不適徵狀指數, 0-40)
4)	- 病人焦慮徵狀減少：由 <b>1.2</b> 下降至 <b>0.8</b> (IPOS-病人焦慮指數, 0-4)
5)	- 病人抑鬱徵狀減少：由 <b>0.9</b> 下降至 <b>0.5</b> (IPOS-病人抑鬱指數, 0-4)
6)	- 家人焦慮徵狀減少：由 <b>1.7</b> 下降至 <b>1.2</b> (IPOS-家人焦慮指數, 0-4)
7)	- 家人照顧壓力減少：由 <b>12</b> 下降至 <b>9.7</b> (照顧者壓力指標, 0-26)
8)	- 病人家庭實務問題減少：由 <b>1.1</b> 下降至 <b>0.5</b> (IPOS-病人實務問題, 0-4)
<u>醫療服務使用情況 (在家寧養病人死亡前六個月)：</u>	
9)	- 病人住院日數減少：由 <b>39.02</b> 日減少至 <b>34.15</b> 日 (減少 <b>12.5%</b> )
10)	- 病人使用急症室次數減少：由 <b>2.75</b> 次減少至 <b>2.43</b> 次 (減少 <b>11.6%</b> )
11)	- 病人使用深切治療病房日數減少：由 <b>0.36</b> 日減少至 <b>0.28</b> 日 (減少 <b>22.2%</b> )
<u>醫療服務使用情況 (安老院舍長者死亡前三個月)：</u>	
12)	- 醫院病床使用日數減少：由 <b>28.9</b> 日減少至 <b>15.65</b> 日 (減少 <b>45.8%</b> )
13)	- 病人使用急症室次數減少：由 <b>1.79</b> 次減少至 <b>1.46</b> 次 (減少 <b>18.4%</b> )
14)	- 平均入院次數減少：由 <b>2.76</b> 次減少至 <b>1.51</b> 次 (減少 <b>45.3%</b> )

## Achievement and Impact in JCECC Project Phase I

### 1. Service Provisions, Trainings and Public Education Activities

<u>Community End-of-Life Care Services Provision:</u>	
1)	- <b>5,002</b> Patients and family members served
2)	- <b>36</b> elderly homes participated in the Project
<u>Professional Capacity Building on End-of-Life Care:</u>	
3)	- <b>8,192</b> health and social care professionals
4)	- <b>2,256</b> professional and frontline staff of elderly homes
5)	- <b>586</b> end-of-life care volunteer
<u>Knowledge and Skill Transfer:</u>	
6)	- <b>29,025</b> participants attended 1,377 public education programmes and events
7)	- <b>Over 350,000</b> views through multi-media channels (i.e. project website, mini-movie and case videos)
8)	- <b>5,600,000</b> readership of newspaper reports (i.e. press conference and regular newspaper columns)

### 2. Survey Result Highlight:

<u>Public Awareness:</u>	
1)	- Heard of End-of-Life Care: <b>increased from 30% (2016) to 39% (2018)</b>
2)	- Receptivity of End-of-Life Care: <b>increased from 81.7% (2016) to 83% (2018)</b>
<u>Change of Patients and Families (Before and after service)</u>	
3)	- Reduction of Discomforted Symptom: <b>from 9.7 to 7.9</b> (IPOS- Symptoms, 0-40)
4)	- Reduction of Patients' Anxiety: <b>from 1.2 to 0.8</b> (IPOS-Patient's Anxiety, 0-4)
5)	- Reduction of Patients' Depression: <b>from 0.9-0.5</b> (IPOS-Patient's Depression, 0-4)
6)	- Reduction of Family's Anxiety: <b>from 1.7 to 1.2</b> (IPOS-Family's Anxiety, 0-4)
7)	- Reduction of Caring press of Family: <b>from 12 to 9.7</b> (Caregiver Strain Index, 0-26)
8)	- Reduction of Patients' Practical Concern: <b>from 1.1 to 0.5</b> (IPOS-IPOS-Patient's Practical Concern, 0-4)
<u>Medical Utilisation (6 months before death of homecare patients):</u>	
9)	- Reduction of Medical Service Usage: <b>from 39.02 days to 34.15days (decreased by 12.5%)</b>
10)	- Reduction of Emergency Unit Usage: <b>from 2.75 times to 2.43 times (decreased by 11.6%)</b>
11)	- Reduction of Intensive Care Unit Usage: <b>from 0.36 days to 0.28 days (decreased by 22.2%)</b>
<u>Medical Utilisation (3 months before death of elderly from RCHes):</u>	
12)	- Reduction of Bed Day Usage: <b>from 28.9 days to 15.65 days (decreased by 45.8%)</b>
13)	- Reduction of Emergency Unit Usage: <b>from 1.79 times to 1.46 times (decreased by 18.4%)</b>
14)	- Reduction of Hospital In-take: <b>from 2.76 times to 1.51 times (decreased by 45.3%)</b>