

# SAHK

Citation: Choi, M. T. and Lui, K. C. (2010). *A Case Sharing on Community-Based Rehabilitation (CBR) for the Total Paralyzed – from the Longitudinal and Transverse Perspectives*. Abstracts of the Int Conference on Promoting Chronic Care. Hong Kong.

**Context:** Lifelong disability requires a spectrum of intervention and support at different recovery stages. CBR encourages service users to play an active role in their disease management. Its intrinsic value lies on holistic care and transdisciplinary approach.

**Objectives:** This presentation discusses a longitudinal CBR model at two different settings with different foci but common objectives of preparing a totally paralyzed individual return home. It also compares and contrasts the programs of the two centres transversely.

**Key Messages:** The key to the process is the central involvement of the paralyzed individual and his family members. Rehabilitation team should work with both parties in goals setting and administer expectation management. Its primary role is to educate and empower them to establish achievable and sustainable social and community re-integration plans. A case manager system is adopted in both the Continuing Rehabilitation Centre (CRC) and the Jockey Club New Page Inn (JCNPI) to coordinate input from different specialists in a holistic manner. CRC provides integrated out-patient services while the individual is still hospitalized. Through engaging and enabling the individual and his family, both are motivated to take charge in the lifelong and strenuous process of rehabilitation. JCNPI provides transitional residential services for bridging from hospital stay to living at home. It put emphasis on psycho-social adjustment, financial issues, health concept and daily routine establishment at home for well-preparing both the individual and his family to re-integrate into the post-morbid home and community life.

**Conclusion:** This longitudinal model falls in line with the contemporary CBR which places emphasis on activity and participation in society. Comprehensive consideration of contextual factors including both the environmental and personal factors is crucial to a successful outcome.



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