

# SAHK

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## **Question**

Can the principles of Conductive Education (CE) be employed to help people with tetraplegia and their families during the transition from professional care in hospital setting to self-management at home?

## **Objectives**

The aims of this project were to develop a whole-day CE-based rehabilitation and reintegration programme in a transitional service centre and evaluate its effectiveness on independence and self-efficacy for people with tetraplegia.

## **Methods**

New Page Inn (NPI) was a 5-year pioneer project funded by the Hong Kong Jockey Club. NPI was established in 2008 offering time-defined residential training in an environment conducive to post-morbid lifestyle adjustments. These included re-establishment of daily routine and engagement in adaptive activities with social and community participations. A tripartite partnership between staff, clients and families were adopted for shared responsibility and decision making with ongoing communications. The Goal Attainment Scale was employed as an intervention process rather than an outcome measure for setting mutually-agreed realistic goals with plenty of opportunities for clients to experience success and take ownership of their successes. Pedagogical methods were used with emphasis on expectation management and self-awareness and acceptance. Clients with spinal cord injury (SCI) were evaluated by Spinal Cord Independence Measures (SCIM) and Moorong Self-efficacy Scale (MSES). Others, like traumatic brain injuries, were evaluated by Functional Independence Measure (FIM). Repeated measure design was adopted with assessments at admission, mid-stay, discharge, and 6-month post-discharge.

## **Results**

NPI served a total of 57 clients (46 SCI and 11 others) during March 2008 and September 2012. They were admitted right upon discharge from the hospitals and the average length of stay was 10 months. All except 1 (passed away before discharge) clients were successfully returned home with sustainable reintegration. As of March 2013, none of the discharged clients required institutionalization. For independence, significant improvements were found in all 3 SCIM domains ( $p < 0.01$ , Friedman) and in all 5 MSES domains among SCI as well as in 5 out of 7 domains of FIM among others ( $p < 0.05$ , Wilcoxon signed-rank). For self-efficacy among SCI, significant improvements between admission and discharge in personal, leisure, and productivity domains of MSES were reported ( $p < 0.05$ , post-hoc pairwise). However, slight decline from discharge to 6-month post-discharge was observed in all MSES domains.

## **Conclusions**

The whole-day CE-based programme of NPI is effective in maximising the capacity of self-care and mobility for all clients, both SCI and others, and in promoting self-efficacy for SCI which are crucial for a sustainable home and community livings. Continuing work on self-efficacy after

discharge is recommended. NPI has received full subvention from the Government upon the completion of its 5-year's pioneer project.



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