

Measuring patient change during rehabilitation

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Introduction / Background

Outcome measures are routinely recorded during rehabilitation to track patient change. However, inconsistent data collection limits clinicians' ability to measure treatment effectiveness and cost efficiency, and identify areas for quality improvement and research. The purpose of this study was to collect data using a standard set of outcome measures, examine their responsiveness to patient change during rehabilitation, and to confirm inclusion of outcome measures in a national dataset for Ramsay Rehabilitation.

Methods

Intervention

- Multi-disciplinary rehabilitation at Donvale Rehabilitation Hospital
- Inpatients: 3 sessions x daily, 6-7 days per week
- Outpatients: 1-2 visits/week

Data collection

- Treating clinicians trained
- Admission and discharge

Data analysis

- Descriptive statistics
- Responsiveness: Wilcoxon Signed Rank Tests or Chi-squared, $p < .05$
- Effects sizes: $Z > 1.96$, $p < .05$

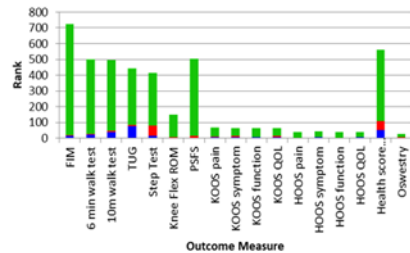
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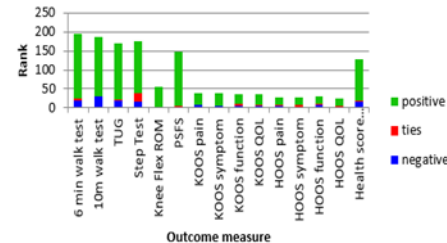
Results

	Inpatient	Outpatient
Admitted	1373	919
Recruited	769 (56%)	258 (28%)
Females	473 (65%)	172 (68%)
Age (years), mean (SD)	74 (11)	73 (11)
Length of stay, mean (SD)	12 (4.3) days	8 (3) visits

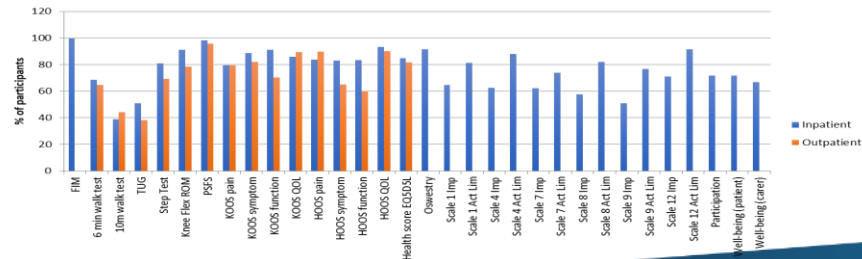
Inpatients improved, worsened or the same



Outpatients improved, worsened or the same



Percentage of participants \geq MCID and +ve rank



Conclusions

- The responsiveness of a standard set of outcome measures to demonstrate change as a result of participation in rehabilitation was examined
- The clinical utility and inclusion of fourteen outcome measures in the data set for future use was confirmed
- These measures capture outcomes across health domains that matter to patients and their family such as level of impairment, independence, and participation
- The national use of these outcome measures will positively impact Ramsay Rehabilitation services

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