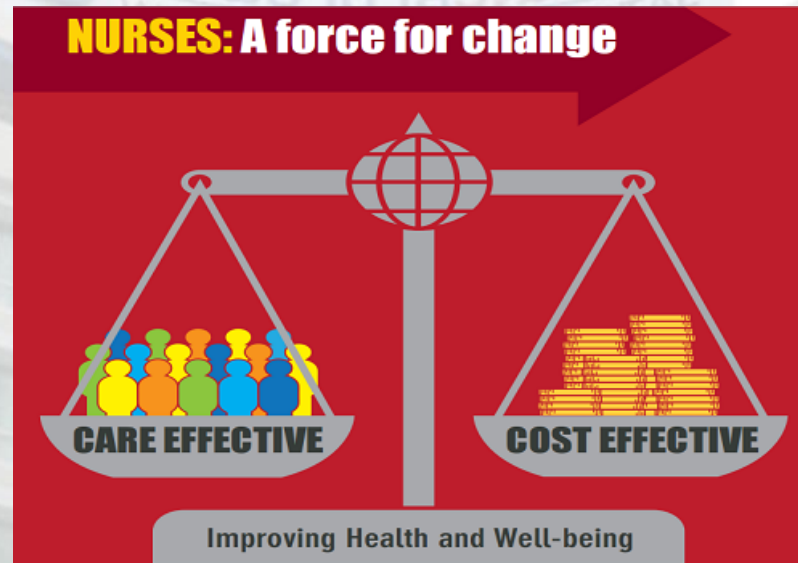


Value of nursing

Care
effectiveness



Cost
effectiveness

พว.ภรณี ผ่องนพคุณ,RN,MSN

Clinical nurse specialist 7

โรงพยาบาลวัฒโนสถ โรงพยาบาลมะเร็งกรุงเทพ

มุมมองของลูกค้า

truemove H

4G | 3G+ | WiFi

- สมราคา
- เนื้อความคาดหมาย
- ฟังพอใจ

เพียงเปิดเบอร์ใหม่ หรือ
ย้ายค่ายเบอร์เดิมในนามนิติบุคคล



พระองค์ภาเตรียมประทานเสื้อสามารถให้ฮีโร่ชาวกระบี่

เรื่องโดย Nation TV |
ภาพโดย fb: Theerasak Saksritawee
19 ตุลาคม 2558 15:52 น.

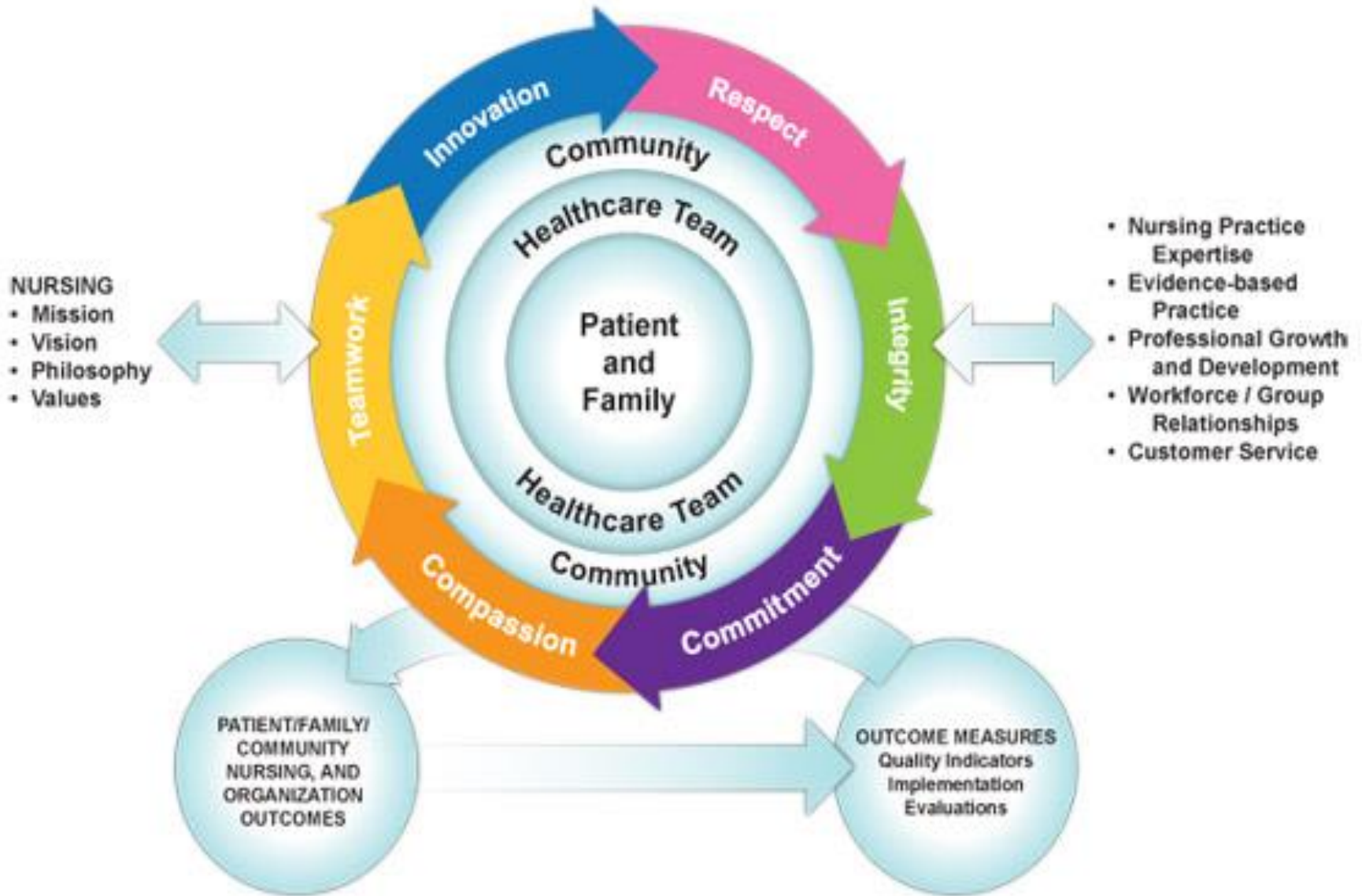
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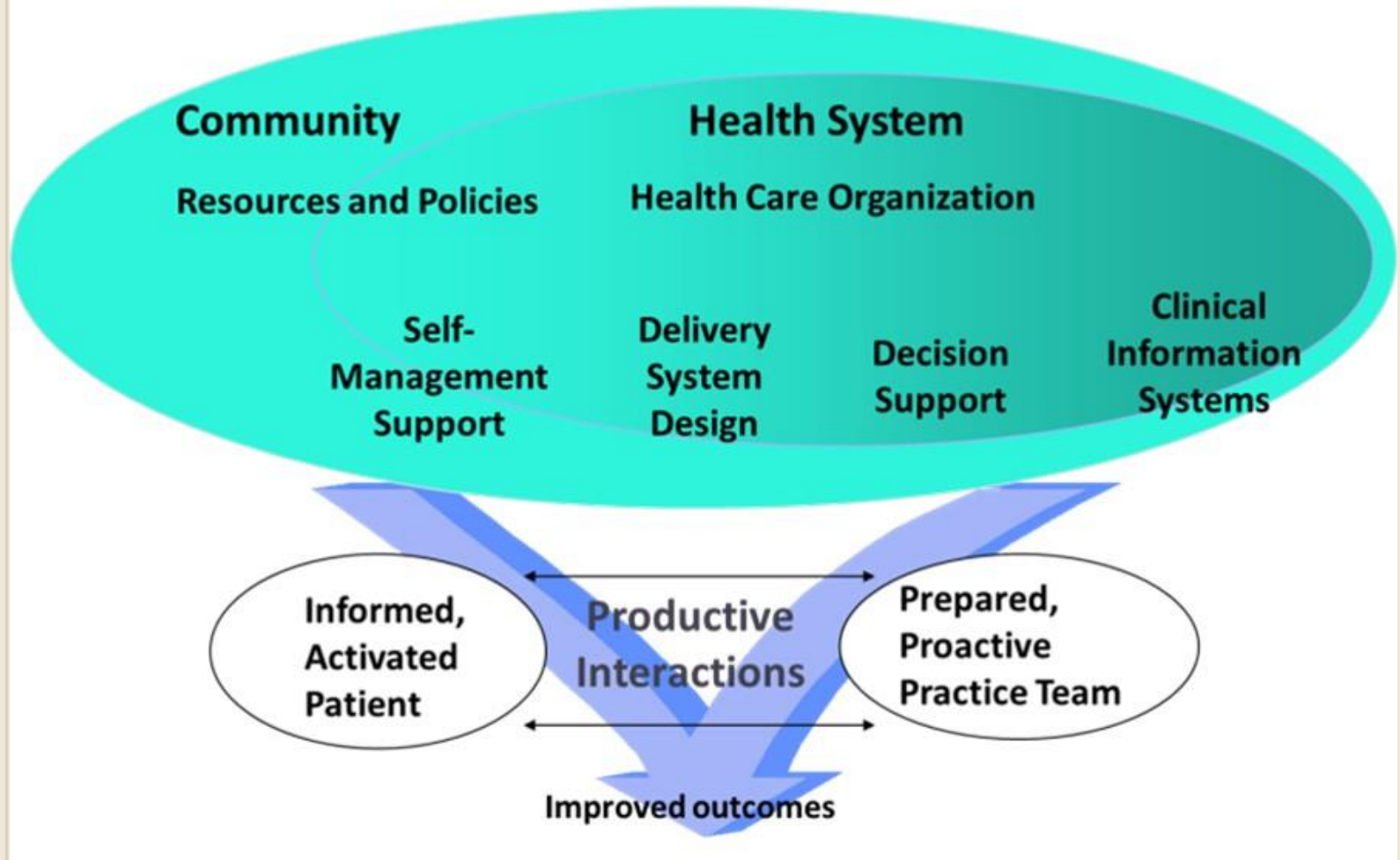
กระบี่ - พระองค์ภาเตรียมประทานเสื้อสามารถให้ฮีโร่ชาวกระบี่ ขณะที่เหล่ากาชาดนำแพทย์ตรวจอาการเจ็บหลังพร้อมเดินทางพบนายกรัฐมนตรี เทียบบิน ที่FB 3228 แอร์เอเชีย เย็นนี้



DYNAMIC NURSING CARE MODEL



Chronic Care Model



Supporting self management

Research report

The effectiveness and cost effectiveness of a national lay-led self care support programme for patients with long-term conditions: a pragmatic randomised controlled trial

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Accepted 16 October 2006

Abstract

Objective: Supporting patients' self care could have a major effect on the management of long-term conditions, which has led to worldwide interest in effective self care interventions. In England, self care support is being developed through the "Expert Patients Programme", which provides lay-led generic courses to improve patients' self care skills. However, the clinical and cost effectiveness of such courses remains unclear.

Methods: Two-arm pragmatic randomised controlled trial design with waiting list control in community settings in England. 629 patients with a wide range of self-defined long-term conditions were studied. The lay-led self care support group involved 6-weekly sessions to teach self care skills. Primary outcomes were self-efficacy, reported energy and routine health services utilisation at 6 months. A cost-effectiveness analysis was also conducted.

Results: Patients receiving immediate course access reported considerably greater self-efficacy and energy at 6-month follow-up, but reported no statistically significant reductions in routine health services utilisation over the same time period. The cost-effectiveness analysis showed that patients receiving immediate course access reported considerably greater health related quality of life, and a small reduction in costs. If a quality adjusted life year was valued at £20 000 (\$39 191; €30 282), there was a 70% probability that the intervention was cost effective.

Conclusions: Lay-led self care support groups are effective in improving self-efficacy and energy levels among patients with long-term conditions, and are likely to be cost effective over 6 months at conventional values of a decision-maker's willingness to pay. They may be a useful addition to current services in the management of long-term conditions.

The case for investing in self care and self management for people living with long term conditions

- **Evidence of effectiveness**

- A study of more than 550 systematic reviews, randomized controlled trials and large observational studies concluded that; 'the totality of evidence suggests that supporting self-management can have benefits for people's attitudes and behaviors, quality of life, clinical symptoms and use of healthcare resources.'

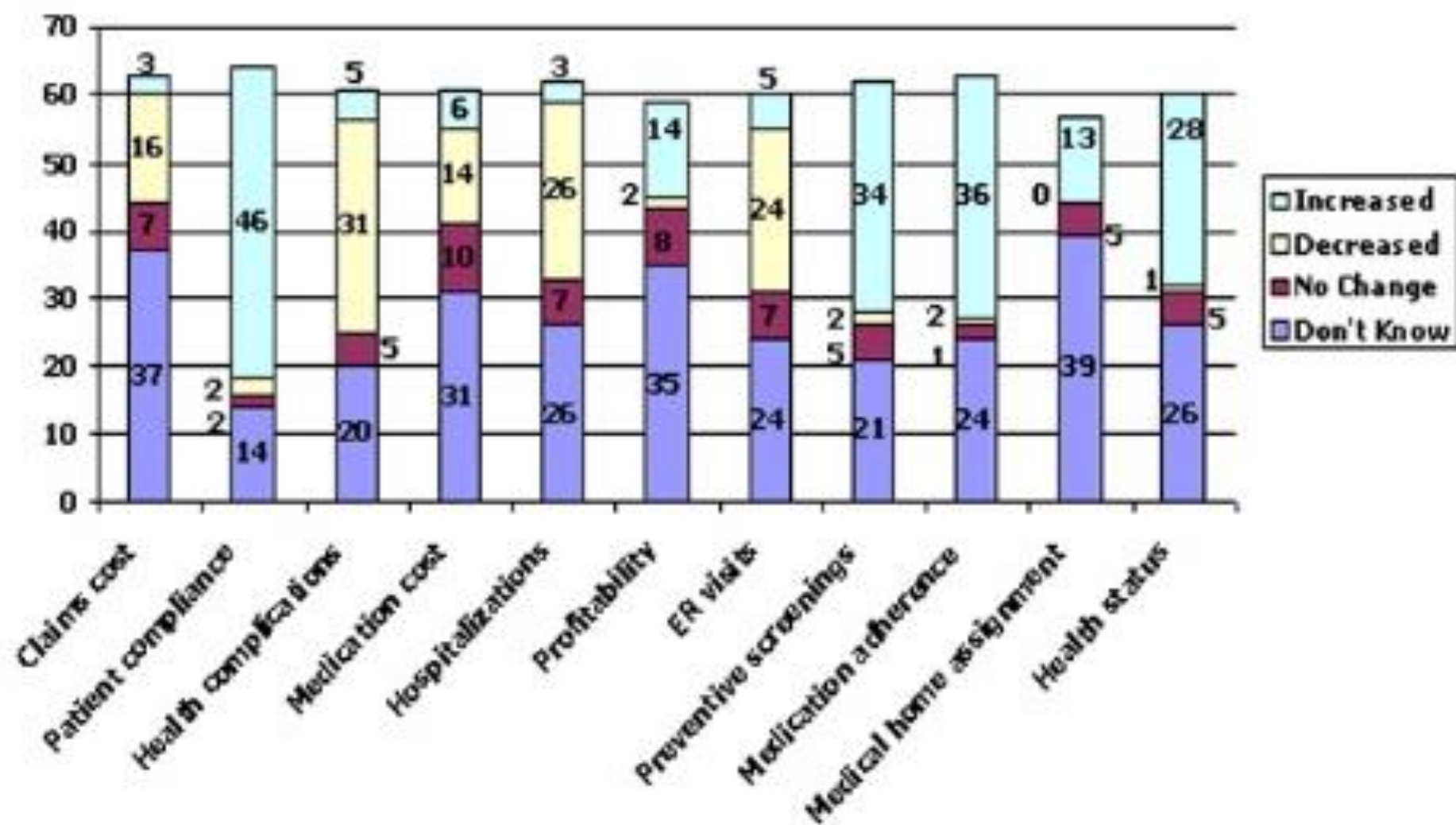
<http://www.talkinghealth.org/uploads/The> ,May 2013

The case for investing in self care and self management for people living with long term conditions

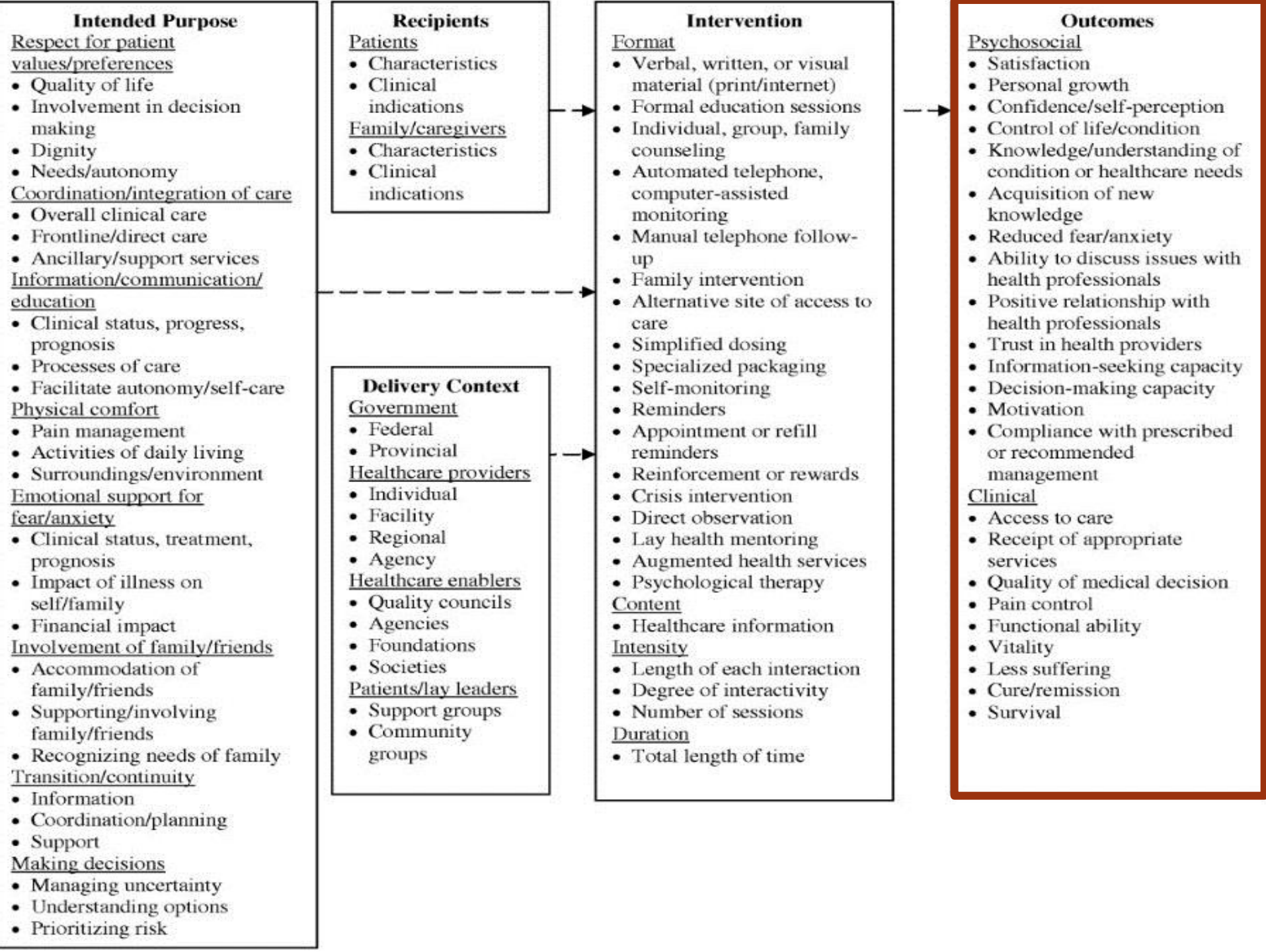
- **Evidence of effectiveness**

- Department of Health internal evaluation of the Expert Patients Program (EPP) demonstrated
 - 7% reduction in GP consultations
 - 10% reduction in outpatient appointments
 - 16% reduction in A&E visits
 - 9 % reduction in Physiotherapy appointments
 - Improved adherence to treatment and medication
 - Reduced unplanned hospital admissions

Impact of Patient Education Programs

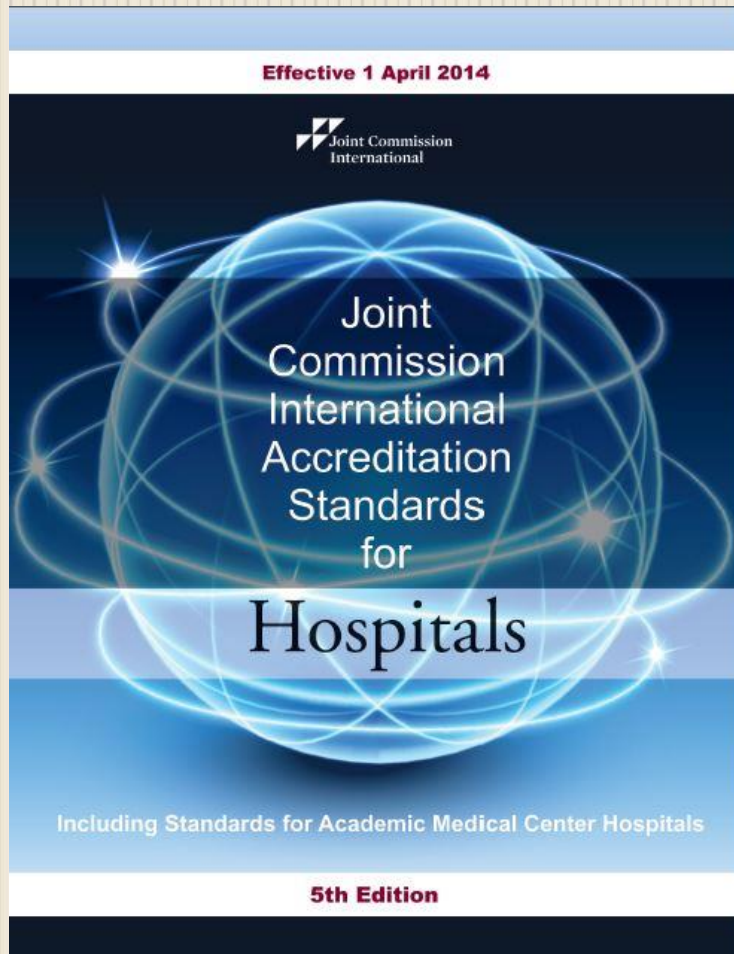


Source: HIN Patient Education Survey
August, 2009



International standard accreditation

JCI 5th edition



Standards, Intents, and Measurable Elements

Standard PFE.1

The hospital provides education that supports patient and family participation in care decisions and care processes.

Intent of PFE.1

Hospitals educate patients and families so that they have the knowledge and skills to participate in the patient care processes and care decisions. Each hospital builds education into care processes based on its mission, services provided, and patient population. Education is planned to ensure that every patient is offered the education he or she requires. The hospital chooses how it organizes its educational resources in an efficient and effective manner. Thus, the hospital may choose to appoint an education coordinator or education committee, create an education service, or simply work with all staff to provide education in a coordinated manner.

Measurable Elements of PFE.1

- 1. The hospital plans education consistent with its mission, services, and patient population.
- 2. There is an established structure or mechanism for education throughout the hospital.
- 3. The education structure and resources are organized in an effective manner.



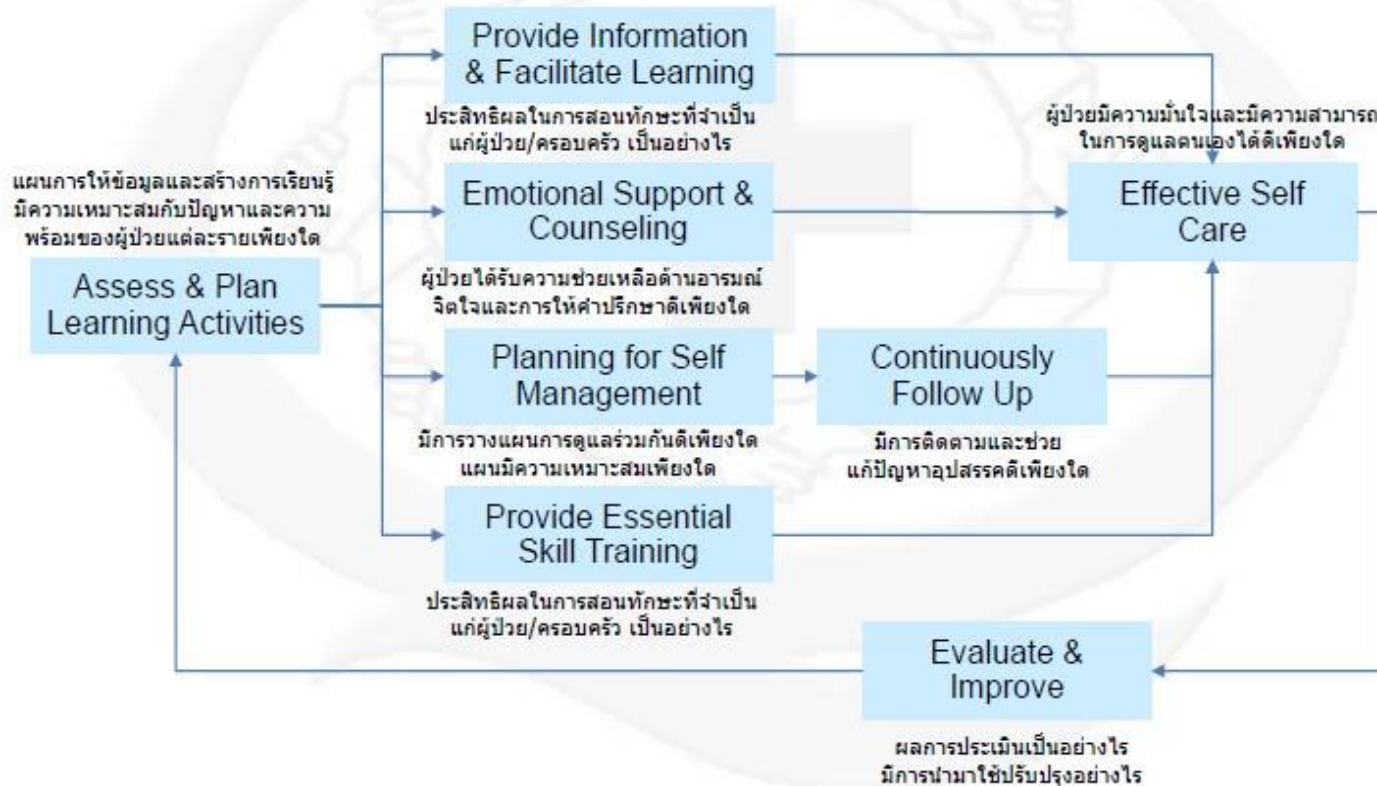
HA Standards Part III

Framework for Evaluation & Sharing



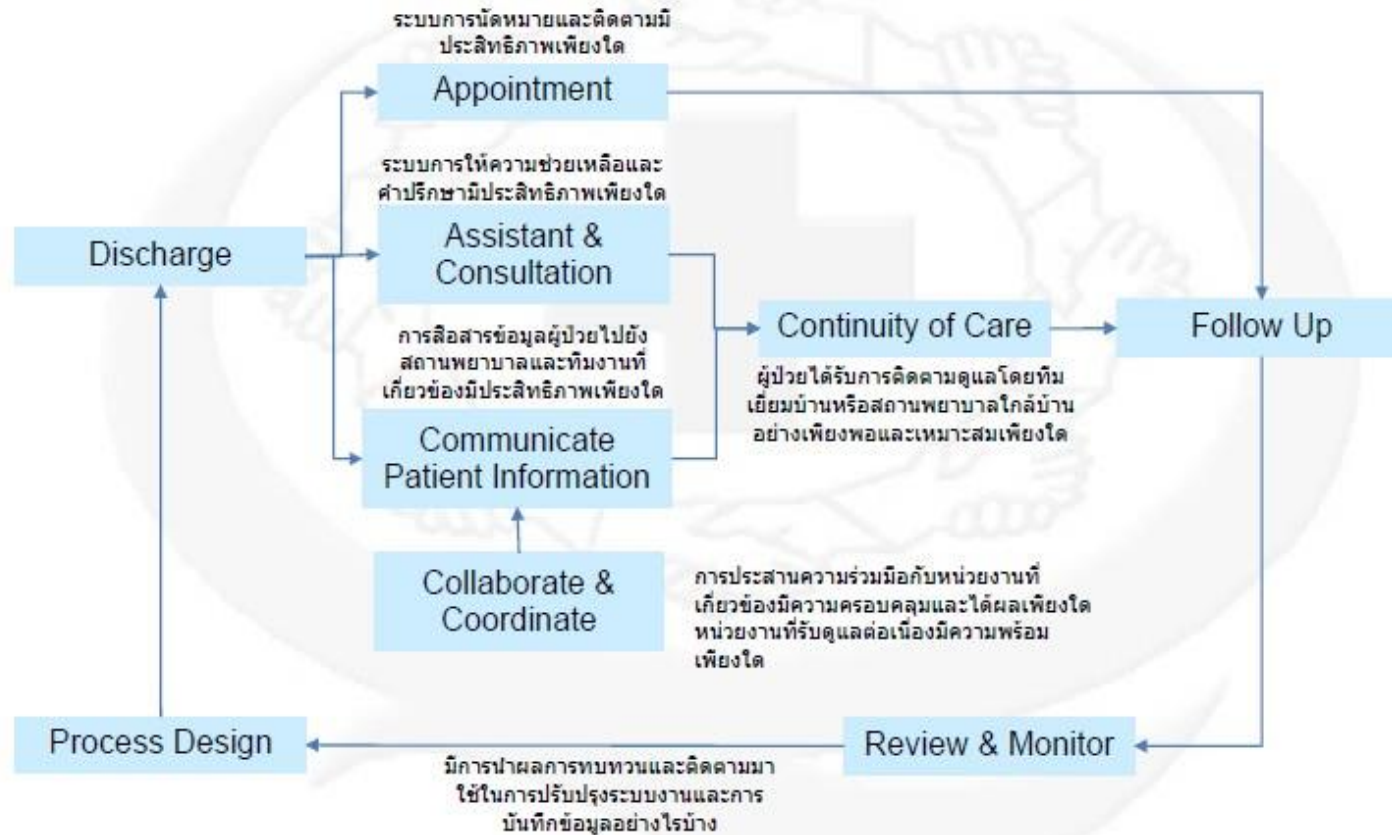


III-5 การให้ข้อมูลแก่ผู้ป่วยและครอบครัว (Information & Empowerment)





III-6 การดูแลต่อเนื่อง (Continuity of Care)



Video

Thank you

