

The Effect of Early Assistive Technology Intervention in Discharge Planning on Client Satisfaction

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Purpose and Background: The purposes of this study were: investigate the use of Assistive Technology (AT) in clients on the discharge planning program at a hospital in central Taiwan; and to study the effect of early AT intervention on client satisfaction. **Method:** The study was a quasi-experimental study. The control group subjects (n=40) were randomly selected from the discharge planning clients who needed AT intervention prior to the implementation of early AT intervention at that hospital. The experimental group subjects (n=40) were randomly selected from the discharge planning clients after the implementation of the early AT intervention program at that hospital. The validated research tool, a QUEST 2.0 scale (Quebec User Evaluation of Satisfaction with Assistive Technology, contains 12 items) with a Cronbach's value of 0.827 was used. **Results:** The subject characteristics of the control group and the experimental group subjects were similar. About 40% of discharge planning clients required AT intervention. The average AT utility rate was 1.88 items per person. The most common type of AT used in these subjects was ambulating aids. In 84% of the subjects, AT has been used for more than one month. 74% of the subjects obtained their AT from medical supply stores, and 78% of the subjects continued using AT after they were discharged from the hospital. Personnel at the medical supply stores were the most common known instructors for AT application (62.64%). 61.3% of the subjects purchased AT on their own expenses. Using non-parametric analysis, patients with early AT intervention were found to have a significant higher satisfaction score than patients without early AT intervention ($p < .001$). In particular, the satisfaction score is significantly higher in the experimental group than the control group among questions related to AT services. **Conclusion:** In conclusion, clients receiving early discharge planning services with emphasis on AT service scored higher on the satisfaction questionnaire than the control group. Thus this mode of early screening and service provision could benefit patients in the future in hospitals providing discharge planning. (FJPT 2007;32(5):267-274)

Key Words: Discharge planning, Assistive technology(Assistive device), Early intervention, Satisfaction

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