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Review

Development of the Transitional Care Model for nursing care in Mainland China: A literature review



Zeng-Jie Ye ^a, Mei-Ling Liu ^b, Rui-Qing Cai ^b, Mei-Xia Zhong ^b, Hui Huang ^b, Mu-Zhi Liang ^a, Xiao-Ming Quan ^{c,*}

- ^a Guangzhou University of Chinese Medicine, Guangzhou, Guangdong Province, China
- ^b Affiliated Tumor Hospital of Sun Yat-Sen University, Guangzhou, Guangdong province, China
- ^c Nursing Department of The First Affiliated Hospital, Guangzhou University of Chinese Medicine, Guangzhou, Guangdong province, China

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ABSTRACT

Background: The Transitional Care Model (TCM) for nursing care has yet to be implemented in China despite its success in Western countries. However, rapid social changes have demanded an upgrade in the quality of nursing care; in 2010, the Chinese government has acknowledged the need to implement the TCM in China.

Objective: This study has the following objectives: (1) perform a thorough review of the literature regarding the development and implementation of the TCM in Mainland China within the past 5 years; (2) provide a comprehensive discussion of the current status, problems, and strategies related to the implementation of the TCM in Mainland China; and (3) suggest strategies pertaining to the future of the TCM in China.

Design: The current pertinent literature is systematically reviewed.

Data sources: Systematic and manual searches in computerized databases for relevant studies regarding the TCM led to the inclusion of 26 papers in this review.

Review methods: Abstracts that satisfied the inclusion criteria were reviewed independently by the two authors of this manuscript, and discrepancies were resolved through discussion. The same reviewers independently assessed the paper in its entirety for selected abstracts. Results: The present English literature review revealed a paucity of updated information about the development and implementation of the TCM in Mainland China. Nevertheless, the dramatic growth of the TCM in the past 5 years has had a vital impact within the society and in nursing development. This review also revealed numerous issues regarding the focus of the TCM. Overall implications for practice and recommendations for future research are discussed. Conclusion: Despite the potential of this nursing model to have a successful and beneficial impact in Mainland China, it remains an under-researched topic. Further research on education and training as well as premium policies for nurses under the TCM are needed. Copyright © 2016, Chinese Nursing Association. Production and hosting by Elsevier B.V.

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E-mail address: 1047052548@qq.com (X.-M. Quan).

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^{*} Corresponding author.

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1. Introduction

The industrialization and urbanization of China have considerably affected the lives of people in terms of both lifestyle and disease burden. The Ministry of Health of the People's Republic of China reported that approximately 114 million adults aged 65 or older were living in China at the end of 2012; this figure accounted for 8.5% of the total population [1]. This proportion is predicted to reach 22.7% by 2050. Furthermore, the "Chronic Disease Prevention and Control Program in China (2012–2015)" has stated that 260 million people are currently diagnosed with a chronic illness; this number represents approximately 70% and 85% of the total disease burden and total deaths in China, respectively; serious social and economic problems are expected to arise if measures to combat this issue are not undertaken by the government [1]. However, chronic diseases require long-term treatment and rehabilitation, often necessitating long-term hospitalization. Such requirements are unsustainable with the current public hospital system because of many reasons, including policies held by medical insurance companies. Thus, several patients are prematurely discharged from hospitals before they have fully recovered, resulting in a high risk for disease recurrence and health deterioration; these implications often result in their inevitable readmission [2]. Existing health care and nursing systems definitely need restructuring. In the traditional model of nursing care, the nurse-patient relationship ends upon patient discharge [3]. An integrated health care model with subsequent treatments and continuous care is needed [4]. Following the "Notice on Promoting Care Nursing Project in 2010" by the Ministry of Health of People's Republic of China (2010) [5], nursing specialists in Mainland China have started to adapt the Transitional Care Model (TCM) in nursing care on the basis of their counterparts in both Hong Kong and Taiwan. The TCM concept was first proposed in 1947 based on a research paper by the American Joint Committee; the concept emphasizes that treatment and nursing care should not be interrupted when hospitalized patients return to their community [6]. Following the initial proposal of the TCM, many scholars with different scientific backgrounds attempted to define this model and introduce their own perspectives. For example, Coleman [7] believed that the TCM is designed to ensure that patients receive coordinated and continued services from one place to another. Brooten [8] regarded the TCM as a comprehensive discharge planning that combines advanced nursing practices in the healing process with family follow-ups. The more widely accepted definition of the TCM is as follows: a series of actions that is designed to ensure that patients in different health care locations receive collaborative and continuous services, including discharge plan, transfer treatment, follow-up, and guidance [9]. The TCM is a patientcentric approach in which the overall care promotes patient recovery and disease deterioration, thereby reducing the overall readmission rate and medical resources [10].

2. Aims and methods

2.1. Aims

The evolution of the TCM in Western countries has been well documented by many researchers. However, literature in

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