



Kingdom of Bahrain  
Ministry of health



## Ebrahim Khalil Kanoo Community Medical Centre

2009



Together for better life



### العنوان البريدي:

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## Foreword from Minister of Health

### Dr. Faisal Y. Al-Hammar

The Ministry of Health is aiming to upgrade the level of preventive, curative and rehabilitative health services through planning clear health policies and directions according to the priorities of providing the best health care to nationals and residence of Bahrain.

The Ministry of Health gave special importance to health program directed towards improving the quality of life of individuals through expanding its role of patients care after they pass the critical period of their illness and provides comprehensive post acute services including medical, nursing, rehabilitation and social services through a multidisciplinary team. This leads to decreasing the percentage of dependency and morbidity which has a financial, psychological, and social burden. The cooperation of all efforts and best utilization of resources decreases those burdens and increases the quality of medical system.

The Ministry of Health believes that keeping good health is the responsibility of all, and sharing this task with private sector, governmental and non governmental sectors is essential in health reinforcement and improvement of the individual, family and community health.

Based on this principal, the family of Ebrahim Khalil Kanoo had several contributions in the health field, one of which is the construction of this center which provides comprehensive health and social services for the Bahraini community.

This center is providing a unique medical services, it accepts patients referred from Ministry of health hospitals after they had completed their acute phase of their treatment.

## Vision

To have a center of excellence for post acute care that caters high quality, flexible and appropriate medical, physical and social services to enhance best achievable quality of life.



## Mission

To provide comprehensive medical, nursing, rehabilitation and social care of high quality through a multidispensary team for cases who completed the acute phase of their treatment.

## Objectives

1. To provide additional post acute care services for patients referral from M.O.H Facilities.
2. To provide a comprehensive medical, nursing and Rehabilitation services by mulidisipenary team.
3. To minimize the level of patients dependency to be able to live safely in his home and community after hospital discharge.
4. To improve the discharge planning for patients.
5. To improve the link between M.O.H Facilities and other health and community care provides.
6. To utilize the available resources effectively at discharge.



## Admission Process

### **Criteria of admission:**

1. Age is 18 years old and above
2. Patients to be admitted to EKKCMC should be transferred from the acute beds in MOH facilities.
3. Required duration of stay for patients should not exceed 2 months.
4. Patients with post-surgical and / or medical conditions that need short term subacute medical care after the evaluation of the referring team responsible for the acute care from MOH facility, and EKKCMC team to ensure that they will be eligible for EKKCMC care.
5. Patients who need a long course of antibiotics not exceeding two months.
6. Patients who need nursing care of wound or bed sores not to exceed two months and then can be discharged to the community.
7. Patients who needs rehabilitation (especially geriatric, stroke Patients, post surgery) and this will depend on the arrangement available at the EKKCMC.
8. Disability is of a recent onset or recent regression.
9. Patient is medically stable for transfer and fitting available resources for medical care in EKKCMC.

10. Patients should have a reasonable social support, so they can be transferred easily to home after care. The social workers in the MOH acute care referring facility should make sure of the social resources before referring the patient to EKKCMC.
11. A full evaluation report should be submitted ahead of time which should be written by the evaluation team (discharging physician, social worker, nutritionist, physical, occupational therapist with a complete wound care and plan for the equipments that will be needed and the probable duration of care).
12. Patient has been screened and approved for admission via the pre-admission screening assessment process of EKKCMC team.
13. A written consent should be signed by patient or patients' responsible person in order to ensure commitment to go with the EKKCMC admission and discharge rules and regulations.

### **Exclusion Criteria:**

1. Psychiatric patients and / or mental cases with restless, aggressive and with escaping tendencies.
2. Medically unstable patients.
3. Alcohol or substance abuse as the first problem.
4. Acute medical condition that needs continuous medical attention.
5. Danger of self-harming or harming the others.

6. Communicable diseases that need special isolation precautions and MRSA and pan-resistant organisms' carrier.
7. Social problems or unknown patients.
8. Severe bed sores not responding to treatment.

#### **Process of referral**

1. The treating consultant (Firm) should request transfer of the patient through filling of the form designed for that reason. The form should be clearly filled with all problem lists of the patient and course during hospitalization, medications and suggested plan of management with a clear schedule of follow up by the treating firm/s in EKKCMC all through



his period of stay.

2. Ward sister and/or social worker in MOH referring facility should provide the patient and/or relatives by the decision of patient's transfer and clear information about EKKCMC and reason of referral.
3. EKKCMC referral forms 1 and 2 should be filled by concerned firm members clearly signed and stamped.
4. Consent should be signed by patient or his next of kin, care giver or responsible person.
5. The MOH referring facility, nurses and/or social worker should inform EKKCMC about the referral request including patient's full name, CPR number, location of the patient, treating consultant's firm and short summary about patient's condition.

#### **Process of Accepting patients to EKKCMC**

1. Within 24 hours of the transfer request the patients will be visited by concerned team members of EKKCMC basically physician, physiotherapist and social worker for patient evaluation.
2. The evaluating team should make sure that the patient is fulfilling criteria of admission to EKKCMC and does not have any of exclusion criteria.
3. EKKCMC team should then fill in their part in the referral forms and give

their initial evaluation. The evaluating team should either accept or reject the case through clear written justification in the referral form 2.

### **Process of moving the patient to EKKCMC**

1. If the patient is accepted the referring MOH acute ward nurse incharge should arrange patient transfer to EKKCMC by notifying the ambulance and EKKCMC nurse providing time of transfer, patient's personal data (Name, CPR, Care giver's and relative's phone number) and brief about the case.
2. Cases should be transferred during regular duty hours; patients can be accepted during afternoon and night shifts and weekends if the situation is suitable in EKKCMC (a covering physician and adequate number of nurses available).
3. The discharging team from the referring acute MOH facility should revise the case just before transfer and make sure of the followings:
  - a. The case is stable with no new acute events since final assessment
  - b. The discharge process is complete and the patient is provided by his final reports, results of investigations, prescriptions for adequate medications enough till his next follow up appointment with his treating physicians in the acute care facility, and the follow up appointments needed. (The discharge process should be completed and finalized as if the patient is going home).
  - c. If for any reason the process of transfer was not completed before one week of the initial EKKCMC team evaluation, the team should be called again for re-approval of patient transfer. Rejection and transferring the patient back to the acute care facility will take place for such delayed

## **The sections of the center**

### **Medical services section:**

- Follow up of patients and delivering medical care to them.
- Working with the treating group to specify patients needs and to facilitate nursing, rehabilitative, social care and other needed care.
- Coordinate with the concerned parties in order to accomplish the treatment plan.

### **Nursing section:**

- A complete nursing care is provided including:
  - Personal cleaning care.
  - Follow up of dietary system appropriate for the patients.
  - Providing treatments and medications needed for the patients.
- Working with the treating team in deciding the treatment plan.
- Provide counselling for families of cases admitted in the centre in order to ensure best quality of services during admission and after discharge.

### **Social Care Services:**

- Conducting a social network evaluation and case studies for patients admitted to the centre.

- Contributing in patient management related to social care and support.
- Providing family and social counselling for patients.
- Follow up of patients through home visits.
- Discuss cases with the treating group in the centre and the options for solutions with close involvement of patients and their families.

#### **Physiotherapy section:**

- Improving and strengthening the normal body functions and preventing skeletal and muscular deformities.
- Gradual recovery of partially disabled parts of the body as much as possible, depending on the type of injury with strengthening the muscles of the body so that the patients become dependent on themselves in their daily life activities.
- Training patients on the best ways of using aids for movements when needed.
- Improving the respiratory system functioning for all patients by breathing exercise.
- Giving advice and counseling for the best use of aids and equipments used for movement.
- Work with the treating team in the center in planning, implementing and following the treatment plan for patients.



#### **Laboratory and Pharmacy sections:**

The laboratory section is concerned with conducting the need investigations for patients.

The pharmacy section is concerned with supplying the needed medications for patients.

The two sections work with coordination with the concerned sections in the ministry of health including the laboratory and pharmacy section of Salmaniya Medical Complex.

#### **The nutrition services:**

- Evaluate the nutritional status of patients and advice the needed dietary modifications.

- Share the health care team in planning, conducting, and follow up of the patient management plan.
- Share with the elderly mobile units team in the follow up of patients through home visits and providing nutritional counselling.

### **Beauty Saloon**

Aspecial saloon was equipped to provide beauty care for both male and female patients.



### **Elderly mobile units**

- Follow up of cases through home visits.
- Providing nursing and personal care for patients at home.
- Providing counselling regarding elderly patients care.
- Coordinating with the concerned parties in order to provide elderly patients needs and supported mobility equipments.

### **Recreational Activities**

The center is aiming to provide some recreational programmes and activities for the patients in order to minimize thier suffering and maxmize their participation in different social ocasions.

Inorder to achieve those objectives, Ebrahim Khalil Kano Family has donated two Minibus with automatic lift suitable for patients transportation.

