Overview of the BRIDGE-program

On admission

- Prepare the goal setting process. Engange the patient in health behaviour change or maintenance of healthy behaviours.
- Use the conversation manuals. Strengthen self-efficacy and result expectation.

during the stay

- Focus on specific areas for change.
- Formulate 3-5 patient specific rehabilitation goals by using the PSFS (Patient Specific Functional Scale).

during the stay

- Introduce the patient to the electronic portal as a potential evaluation tool for the individual goal setting process
- Carry out the first data entry in the electronic portal (P).

during the stay

- Plan measures to achieve the goals.
- Make a written rehabilitation plan, including strategies for potential barriers.

during the stay

- Implement measures to achieve the rehabilitation goals. Facilitate mastery experience and achievement of sub-goals.
- Evaluate the progress towards goal achivement along the way. Adjust sub-goals and measures if necessary. Provide positive feedback on performance in line with goals and rehabilitation plans.

during the stay

- Define goals for the time after discharge
- Plan for self-management, telephone follow-up, and follow-up from other services after discharge, included services needed to achieve the goals.
- Collaborate on follow-up across lecels of health service.

on discharge

- Evaluate the progress and the goal process by means of a new data entry into the electronic portal (P).
- Provision of guidence on the use of the electronic portal and a summary report for feedback and evaluation during the period after departure.
- Record individual plans independently of healthcare personnel in the electronic portal (P). Record your own needs / spesific agreements with municipal services in the electronic portal (P).

after discharge

- Carry out planned telephone follow-up. Support the establishment or maintenance of health behaviour change and goal directed measures. Strengthen coping beliefs (self-efficiacy). Evaluate the goal progress. Evaluate the goals and goal achievement.
- Contribute to the necessary contact and cooperation with other services in the local community and municipality.
- New data entry/summary report/feed back on progression at 2, 7 and 12 months, in the electronic portal (P).