

# Exploring the Impact and Challenges of Personalized and Group Reablement Services for Day Care Staff : A Preliminary Study



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## Introduction

- Past evidence has shown that reablement services are effective in improving the health of older adults. Daycare centers have also adopted this concept, however, due to limited time during activities at the daycare center, physical therapists or care workers are unable to attend to everyone's needs.
- Therefore, a county in Taiwan initiated an innovative pilot program, testing it in nine daycare centers. Besides the original group reablement, care workers also provided additional individual reablement sessions, aiming for more comprehensive care. It remains unclear whether this change will burden the units and personnel involved.
- Thus, this study preliminarily interviewed five daycare centers participating in the pilot program to understand the challenges this innovative change poses to the daycare center staff.

## Objective

The research aims to assess the impact and challenges of this innovative approach on day care center staff.

## Method

- Using a qualitative study approach, interviews were conducted with CEOs, physical therapists (PTs), and care workers from five daycare centers in Taiwan.
- The interview guide, developed based on the Canadian Interprofessional Health Collaborative (CIHC) Framework, focused on role clarity, collaborative leadership, team functioning, communication, patient centered care and interprofessional conflict resolution (CIHC, 2010).
- The data collection period from December 2023 to February 2024. This study was approved by Chang Gung Medical Foundation Institutional Review.

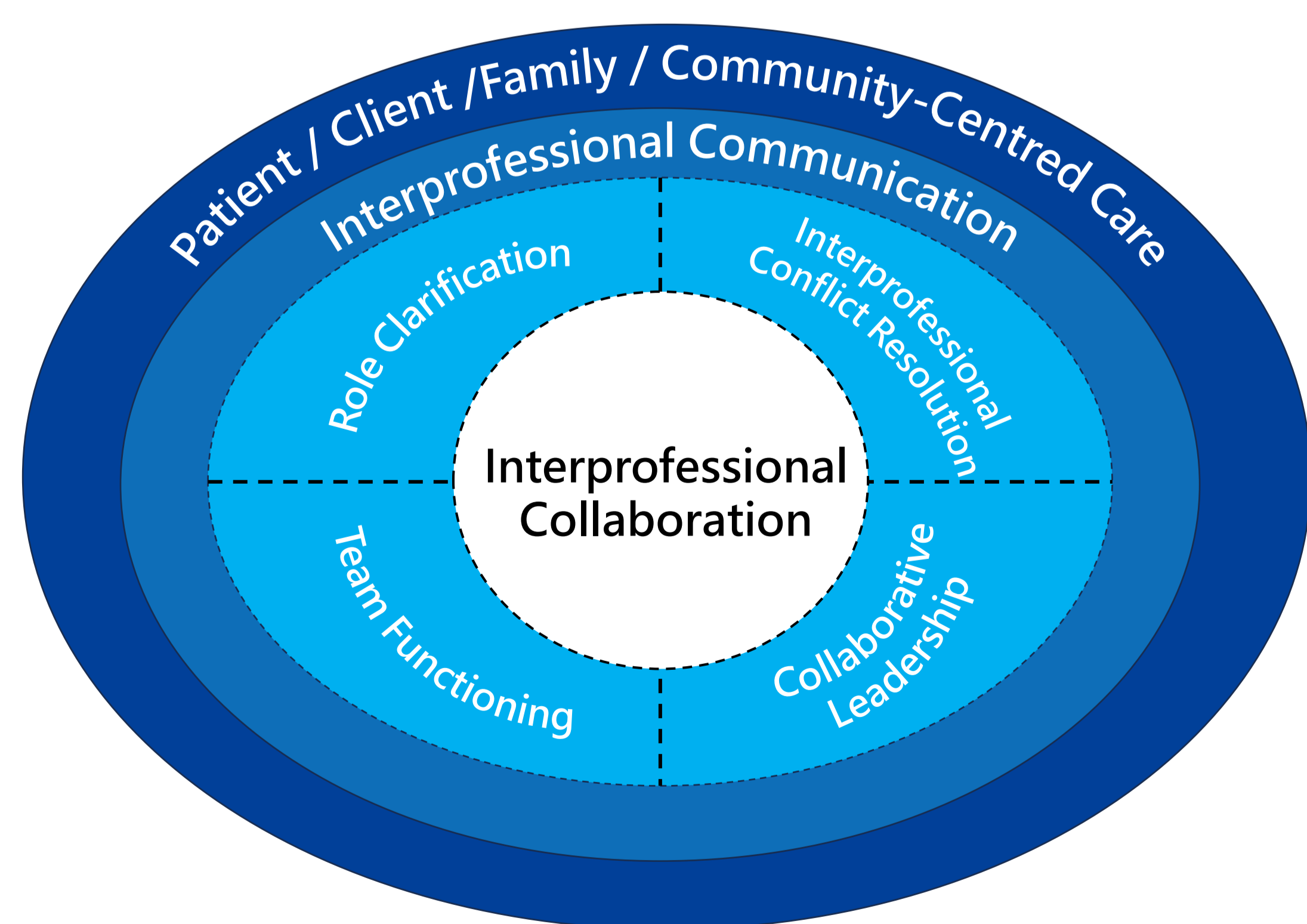


Figure 1. Canadian Interprofessional Health Collaborative (CIHC) Framework

## Result

We interviewed members from five daycare centers that implemented group and individual reablement interventions.

### ● Role Clarity

Physical therapists (PTs) observe older adults and design personalized reablement activities. Care workers assist PTs, implement activities, monitor seniors, and encourage participation by highlighting health benefits.

### ● Collaborative Leadership

Initially, care workers found PTs' goals too ambitious, especially for those with cognitive impairments. Through communication and collaboration, goals were aligned, standardized assessment forms were established, and consistent scoring criteria were emphasized for long-term validity.

### ● Team Functioning

Care workers closely support each other, ensuring seamless task coverage. They adapt interventions based on their understanding of the seniors' abilities, fostering greater participation through diverse activities.

### ● Communication

Team members regularly meet to address challenges and adjust collaboration. When seniors resist activities, care workers persist in persuasion and adapt interventions, with PTs stepping in to communicate with families if needed. Peers also positively influence each other.

### ● Patient-Centered Care

Simplifying complex terms and conducting home visits improve older adults' understanding and help tailor care plans to individual needs.

### ● Interprofessional Conflict Resolution

Conflicts may arise from differing family expectations and care processes. Initial reluctance from care workers and family members was overcome with time, improving the situation after one to two months of adjustment.

## Conclusions

- This preliminary study provides valuable insights into the implementation of personalized and group reablement services in day care centers, emphasizing the significance of addressing collaboration challenges and recognizing the essential role of care workers.
- Further research is warranted to refine care delivery for older adults in day care settings based on these findings.

To the best of our knowledge, the author have no conflict of interest, financial or otherwise



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# Developing a Tool for Assessing Financial Health Literacy Among Older Adults: A Preliminary Study



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## Introduction

The World Health Organization (WHO) states in its report for the Decade of Healthy Ageing 2020–2030 that promoting healthy ageing in the next decade requires special attention to personal financial security. This includes efforts to improve financial literacy, ensuring that the financial security of older adults is protected at all stages of their lives.

The financial security of older adults is crucial for healthy aging, highlighting the importance of financial stability in later years. However, a review of the literature reveals that no relevant financial health assessment tools have been developed to date. In view of this gap, this study aims to understand financial health literacy among Taiwanese people and develop a relevant empirical solution to enhance overall financial security and health in Taiwan.

## Objective

During the initial stage, we performed a literature review, crafted a financial health literacy (FHL) assessment tool, with the following objectives:

- Utilize content validity to assess the suitability of FHL items.
- Conduct a pilot test to ascertain the preliminary reliability and validity of the assessment tool.

## Method

By referencing the Financial Health Literacy (FHL) framework and existing financial and health literacy questionnaires, we designed a questionnaire suitable for assessing the financial health literacy of the Taiwanese population.

- The questionnaire items in this study were formulated based on the financial health literacy frameworks proposed by scholars. The questionnaire is divided into five domains: management of medical bills, money management, understanding health insurance, deciding appropriate health services and planning long-term care needs.
- The questionnaire content underwent review by six experts through two rounds of evaluation. These experts' backgrounds included financial practice, health insurance, and long-term care. The expert review was completed by the end of 2023.
- The Financial Health Literacy Questionnaire's Content Validity Index (CVI) was rated on a five-point scale: 5 points for essential items, 4 for necessary, 3 for items needing revision, 2 for inappropriate items needing deletion or major revision, and 1 for meaningless items to be deleted.
- A higher score indicates greater appropriateness of the item. Items receiving scores of 3–5 were retained, and the proportion of total responses from the experts was examined to obtain the Item CVI (I-CVI).

## Result

The first round of expert evaluation yielded an item Content Validity Index (I-CVI) score ranging from 0.67 to 1, with a Scale-level Content Validity Index (S-CVI) of 0.92, indicating high agreement among experts. The CVI-related data met the content validity criteria (Polit & Beck, 2006), so all items were retained with only minor textual revisions based on expert feedback. A second round of expert review was conducted, resulting in I-CVI scores ranging from 0.98 to 1 and an S-CVI of 0.965. Objective indicators confirmed that all items had an Interquartile Range (IQR)  $\leq 1$  and a median  $\geq 4$ . Consequently, all items in the Financial Health Literacy Questionnaire aligned with the financial health literacy concept (de Villiers et al., 2005; Hasson et al., 2000; Polit & Beck, 2006).

Table 1. The second round of content Validity of FHL assessment

| Domain                               | Mean(min-max) | I-CVI |
|--------------------------------------|---------------|-------|
| Management of medical bills          | 4.67-5        | 1     |
| Money management                     | 4.67-5        | 0.988 |
| Understanding health insurance       | 4.67-5        | 1     |
| Deciding appropriate health services | 4.67-5        | 1     |
| Planning long-term care needs        | 4.67-5        | 0.991 |
| S-CVI/Ave                            |               | 0.965 |

This study collected preliminary data through a pilot test of the questionnaire with several participants. The statistical results showed that the initial internal consistency ranged from 0.84 to 0.97, and the split-half reliability ranged from 0.8 to 0.96. These preliminary findings indicate a high level of response consistency. Based on actual feedback from participants, minor textual adjustments were made.

Table 2. The pilot reliability of the FHL assessment

| Domain                               | Cronbach's Alpha | Split-half reliability |
|--------------------------------------|------------------|------------------------|
| Management of medical bills          | 0.84             | 0.93                   |
| Money management                     | 0.90             | 0.96                   |
| Understanding health insurance       | 0.96             | 0.96                   |
| Deciding appropriate health services | 0.84             | 0.80                   |
| Planning long-term care needs        | 0.97             | 0.88                   |

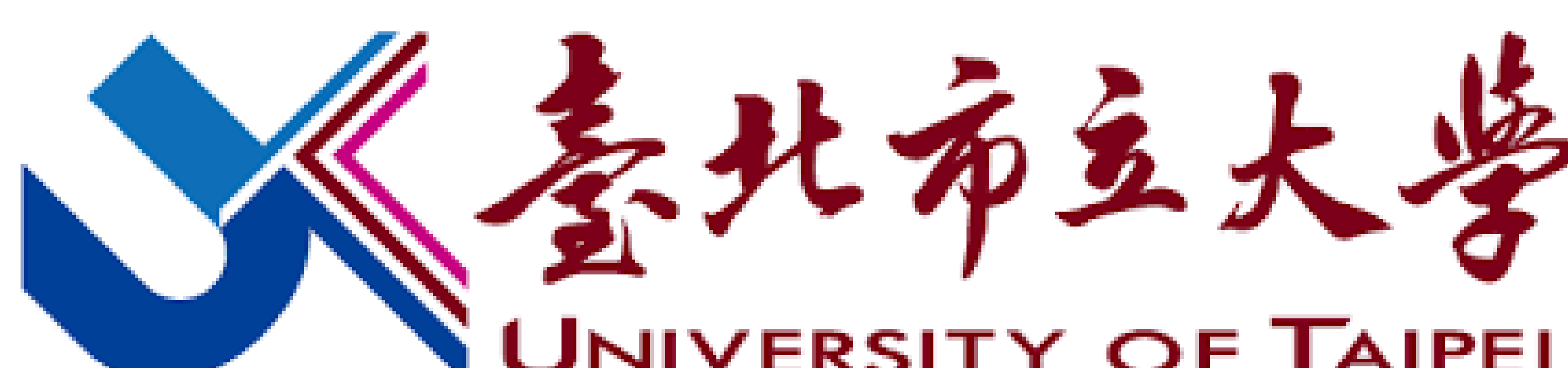
## Conclusions

- Through expert validation and questionnaire pre-testing, it was found that the items in the Financial Health Literacy (FHL) questionnaire align well with the concept of financial health literacy.
- However, these reliability scores are based on a small sample. A comprehensive reliability and validity analysis will be conducted after the full-scale data collection is completed.

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