Service Priorities and Programmes

Electronic Presentations

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Innovation for better care - a multi-national calendar for culture-sensitive appointment booking to enable patient attendance

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Introduction

Hospital Authority (HA) is taking care of an ethnically diverse population, about 6% of which are from ethnic minority (EM) groups. Good understanding of cultural needs will minimize patient stress and foster harmonious client-staff collaboration. It is understandable that patients would like us to avoid elective radiologic appointments, operation or clinic dates that clash with their festivals, e.g. Ramadan for Pakistani. Past experience showed that appointments are often missed because patients were reluctant to attend hospital during their cultural events. We devised an integrated calendar to serve the needs of 3 ethnic minority groups. Its application allows appointment booking while respecting traditional festivals. We would like to report our success and spread the tool to other HA hospitals.

Objectives

To invent a multi-national calendar to facilitate elective appointments booking avoiding clash with festivals of ethnic minority patients.

Methodology

A team was set up in Tuen Mun Hospital to coordinate the support to ethnic minority clients – COME Concept team [COME – Care Optimization for Minor Ethnicity]. The team examined patient nationality and ethnicity characteristics and determined that citizens of Nepalese, Pakistani and Indian ethnicity are our major EM clients. They mostly retain their cultural practices and are using traditional calendars to plan events. We enlisted the support from Hong Kong Christian Service to provide us with traditional national holidays or festivals of these countries annually and have been producing a one-page integrated calendar since 2009. They were sent to clinical departments, clinics and wards in New Territories West Cluster (NTWC) hospitals for

display at booking areas, like reception counters, ward nurse stations and doctor's consultation room in clinics. Staff may try to avoid booking on these days which is socially unacceptable for them to visit the hospital. If the appointment date cannot be altered, staff would discuss the essentiality of that appointment while acknowledging the social inconvenience. This fosters better trust and understanding between client and provider. Non-attendance and delay in care would therefore be minimized. Staff are informed by emails whenever a new calendar is made. It is uploaded onto COME Concept webpage at Intranet: "Ethnic Minority Corner" for easy access. Any HA user may access the site at NTWC webpage and make use of the calendar.

Result

The EM Calendars have been prepared continually for 7 years already. Our team started with TMH and soon involved all hospitals in NTWC. Colour scheme and design is slightly changed annually and photographs were displayed after consent from subjects. They were posted out in work stations at the beginning of every year. However, the relatively late announcement of Pakistani Ramadan renders the calendars not being completed earlier, say December of a passing year. We hope this tool may be incorporated into future Clinical Management System (CMS) versions so that staff may view the e-version of EM calendar readily with an icon at CMS during appointment booking.