



Service Priorities and Programmes
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Implementing paperless consultation in a Specialist Out-patient Clinic of a regional hospital, a Win-Win situation for staff and hospital!

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Introduction

Hard copies of clinical notes are accumulating with consultations conducted by specialist out-patient clinics (SOPCs). Not only storage space but also the transportation of medical records to and from and within clinics poses a heavy burden on manpower and resources. Moreover, Injury-on-duty is not uncommon among staff of different ranks during handling of heavy medical records. Since most of the clinical information is available on electronic patient record (ePR) of Hospital Authority, we implemented paperless consultation since May 2015 for the benefit of our staff and the hospital.

Objectives

To implement paperless consultation in the Family Medicine Specialist Clinic of a regional hospital and review the benefit after implementation.

Methodology

Kotter's 8 steps change model was taken as reference in leading the change: 1. Create urgency : Too many non-value added steps in handling patient record and number of related injury-on-duty was rising 2. Form a powerful coalition : Doctor and nurse in-charge to lead the change 3. Create a vision for change : More efficient consultation and less injury risk for staff 4. Communicate the vision : During clinic meetings and staff gatherings, address views from frontline 5. Empower action : Introduce electronic patient queuing system and drills for contingencies 6. Create quick wins : stepwise implementation with successful trial runs in individual consultation room 7. Build on the change : Fine tuning of the workflow after trial runs with ideas from all levels of staff 8. Anchor the change : Paperless to become a culture in our clinic

Result

Benefits noted after implementation of paperless consultation: 1. Happy staff with more efficient consultation process without the handling of medical records and consultation notes printouts. There is also less printer breakdown and paper jam during consultations as well as less staff complaining of musculoskeletal pain as a

result of medical record handling. 2. Saving resources. Manpower to handle and transport around 50000 medical records a year, Printer cartridge and paper (around 100000 A4 paper a year) were saved. 3. Efficiency gain in other area: No need to circulate the medical record to our clinic for medical report writing and hence hasten the process of medical report handling in hospital level. Discussion: With the migration to electronic storage of medical information, paperless consultation is feasible in SOPC. It is welcomed by staff due to more efficient consultation, manpower saving and less injury induced. It was also environmental friendly.