

Service Priorities and Programmes Electronic Presentations

Convention ID: 425

Submitting author: Mr C Y NG

Post title: Registered Nurse, United Christian Hospital, KEC

How "APPS" of Nursing Informatics works to improve delivery and continuity of respiratory care

Ng CY(1), Ng SW(1), Tsang WY(2), Chan YY(1), Poon CL(1), Chong YY(1), Tse KC(1), Tang SK(1), Poon W(3), Chan YK(3)

(1)Respiratory division, Department of Medicine and Geriatrics, (2)Integrated Care Team, Department of Medicine and Geriatrics, (3)Nursing Service Division, United Christian Hospital

Keywords:

Respiratory Nursing Care Delivery Nursing Informatics Continuity of Care

Introduction

Nursing Informatics (NI) under Health Informatics (HI) can be a robust clinical system to comprehensively support and improve care delivery. This paper is to share how it works for patients from admission, hospitalization, discharge to post-discharge in a specialty unit with support from management and IT professionals of our hospital.

Objectives

To establish a mechanism with support of NI to enhance quality and continuity of clinical services for disease specific program.

<u>Methodology</u>

Assessment on admission "Patient Assessment Form" (PAF), an electronic interface, provides computer-based and standardized platform to promote data sharing among different disciplines, and across specialties and hospitals. The key components of the interface include assessment on patient's physical examination, social history. high-risk items and functional status. Patient registry It is a system for creating, validating and updating a register of people with specific respiratory diseases. The registry is stored in sharing-point in hospital intranet. It also facilitates data collection, updating, analysis, and synthesis of clinical information for healthcare planning, risk stratification, etc. Patient Care Clinical Dashboard (CDB) is a clinical information system provides the relevant and timely information on the master electronic dashboard at workstation displaying patient care activities, high-risk items, laboratory & radiology requests, drug allergy alerts, etc. Summary on discharge A nursing discharge summary is an electronic template to summarize patient's functional status, discharge plan and follow up issues in order to facilitate continuity of care when patient was referred to other healthcare setting. Besides, disease specific information could be summarized in the "Nursing note" with preset templates shown in discharge summary and retrieved via electric Patient Record (ePR).

Result

The PAF has been used for more than 2000 of admissions a year in the respiratory unit. The Patient Registry has been established for 528 patients with specific respiratory diseases since 2009. The CDB has been successfully piloted since 2008. The Nursing Discharge Summary has been established since 2007 for around few hundred of patients every year. Finally, in a CQI project, the Nursing note helped to update clinical information for 70.1% of specific cases in 2009. Conclusions The "APPS" approach in Nursing Informatics for respiratory care could promote and improve clinical information sharing among different disciplines, and across specialties and hospitals and thus, delivery and continuity of care.