Reduction and Streamline of Outpatient Follow-up of Residents in a Long-term Care Hospital
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Introduction
Residents in a long term care hospital have multiple medical illnesses that have to attend various out-patient follow up appointment on a regular basis. It creates an impact on the service demand of Specialist Outpatient Department (SOPD), pharmacy and NEAT services. Moreover, relatives need to spare their time to accompany residents for attending the appointments. As our in-house doctors could provide medical consultation to the residents, some of the follow-up could be taken over by our doctors. Even though they still have to follow-up some of the special clinic, follow-up medication can be issued through Medication Administration Record (MAR) that the waiting time can be minimized afterwards. The idea of the project is beneficial for all the parties involved.

Objectives
1. To review outpatient follow-up appointment of existing residents and new admission cases by doctor in-charge for the possibility of appointment reduction. 2. Liaise with pharmacy from hospital level to streamline the medication supply process.

Methodology
1. Totally 97 residents with 195 follow-up appointments were reviewed to consider the possibility for cancellation. 2. All newly admitted residents with OPD follow-up appointment would be screened on the necessity.

Result
- Analysed by the number of follow-up appointments, 52 out of 195 appointments have been cancelled and taken over by our in-house doctors from Sept, 2011 to Jun, 2012. Crude reduction rate of appointment is 26.7% as this is not weighted by specified resident - Out-patient appointments related to SOPD include social hygiene (13), family medicine (12), integrated clinic (12), geriatric (8) and general medical (7) were deducted. Notes: Figures in brackets() refer to the number of follow-up appointment - Analysed by the scope of services group, 5 out of 21 OPD manpower
and services can be reduced - This program reduced the out-patient attendances that not only beneficial for shorten waiting time of OPD, utilization of NEAT services and minimization of clerical work of nurses, but patients and their relatives.