HAC 2016 ABSTRACT for Oral Presentations

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Project title

Healthcare Innovation Project - Develop Defaulter Management System to Improve Psychiatric Follow-Up Compliance

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Introduction

Recent tragedies raise public concerns on the current tracing mechanism for psychiatric appointment defaulters – the lack of follow-up consultation in Hospital Authority Specialty Out-Patient Clinic (SOPC) may possibly lead to relapse of serious mental illness and bring harm to the society. High risk defaulters are tracked by Community Psychiatric Team. For the 50,000 psychiatric patients with medium risk, however, efficient follow-up strategy may not be in place.   SOPC staffs attempt to contact psychiatric appointment defaulters for re-booking of follow up appointment. With increased number of defaulter, repeated outbound calls may induce additional workload to SOPC. To tackle this issue, HA initiates a healthcare innovation project to improve psychiatric patients' follow-up compliance. Information Technology and Health Informatics Division develops a Defaulter Management System (DMS) to support defaulter tracing service provided by Mental Health Direct (MHD) under Community Health Call Centre.

Objectives

The aims of developing DMS: 1) to identify patients who have defaulted psychiatric specialist follow-up service; and 2) to facilitate case referral and tracing outcome sharing between SOPC and MHD.

Methodology

There are three phases of developing DMS: • In discovery phase, problem is identified: HA needs a systematic defaulter tracing mechanism for medium risk patients who do not attend their psychiatric appointment. Through collaborating with SOPC staffs from different clusters, working cultures are blended and potential solutions are co-created.   • In incubation phase, rapid cycle prototyping is done to identify the best-suited method. SOPC staffs generate the defaulter list from Out-Patient Appointment System (OPAS) and facsimile the defaulter list to MHD. MHD staff would call patients via Call Logging System (CLS) and re-book appointment for patients whom they manage to contact. Tracing outcome would be forwarded to SOPC for necessary follow up action. Through the trial run, the workflow is simplified and barriers are recognized and eliminated.   • In acceleration phase, the successful model is implemented through developing Defaulter Management System (DMS) to replace communication by facsimile.

Result

DMS connects to two external systems - OPAS used in SOPC and CLS used in MHD which serves as an electronic centralized platform between two health institutions. With DMS, psychiatric defaulters can be identified and being referred to MHD by SOPC staffs. For the tracing outcome, MHD can share to SOPC staffs via DMS. DMS is launched to 5 clusters with over 1500 referred cases per month and almost 70% defaulted

psychiatric appointments can be re-booked. Feedback from SOPC and MHD are positive and the DMS is regarded as a useful mean to support psychiatric defaulter tracing service.   Future refinement of DMS will be made: firstly to enable re-booked appointment details to be sent direct to patients via SMS for better patient engagement and secondly to further integrate DMS with Patient Program Summary in Clinical Management System so as to enhance communication with other clinical teams for continuous patient care.