



## Service Priorities and Programmes Electronic Presentations

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### **Implementing Paperless Consultation in a Specialist Out-patient Clinic of a regional hospital, a Win-Win situation for all!**

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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, paperless consultation is one of the ways to solve those problems. We therefore started as the first SOPC of our hospital to implement this in May 2015.

#### **Objectives**

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

#### **Methodology**

Stepwise implementation of paperless consultation in our clinic: 1. Discussion and obtain consensus among clinic staff 2. Drafting workflow and contingency plan 3. To further increase the efficiency of consultation room allocation for patients, we employed a locally developed web-based computer software (UQ system) for room assignment and queuing of patients during consultation 4. Stepwise trial run, from single consultation room to whole clinic level 5. Informing other clinical departments and relevant parties before actual implementation 6. Carrying out drills for different contingencies. 7. Evaluation and fine adjustment of the workflow during regular clinic meeting among all staff.

#### **Result**

Benefits noted after implementation of paperless consultation: 1. 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 well as less staff complaining of musculoskeletal pain as a result of medical record handling. 2. Saving paper and printer cartridge. Assuming two A4 papers of medical

notes for each consultation, our clinic can save around 100000 A4 paper a year. 3. Saving manpower. Around 100000 medical records per year for handling and transportation saved both to and from medical record office and within our clinic. 4. Reducing risk of medical record loss and hence privacy information leakage during record transportation. 5. 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. Conclusion: With the migration to electronic storage of medical information, paperless consultation is feasible in SOPC. It has a lot of advantages including more efficient consultation with less manpower used and was much more environmental friendly.