



Service Priorities and Programmes

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Streamline Patient Flow from Acute Hospital to Rehabilitation Hospital

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Introduction

Orthopaedic patients from Alice Ho Miu Ling Nethersole Hospital (AHNH), North District Hospital (NDH), and Prince of Wales Hospital (PWH) are transferred to Tai Po Hospital (TPH) if requiring rehabilitation. These patients, when transferred to Department of Orthopaedic Rehabilitation (DOR), will be with 3-day stock of medications. But if patients arrive to TPH before 5pm during weekdays, medication will be dispensed again by TPH pharmacy. These unused brought-in medications would be returned to TPH Pharmacy, and most of them will be discarded. If patients arrived to DOR after 5pm in weekdays, the admission procedure will be done by AHNH on-call MO. And, if patients arrived DOR after 6:30pm, ward nurse could use these 3-day medications which prepared by acute hospital staff.

Objectives

1.Patient arrival to TPH ASAP and before 5PM. 2.Patient is ready for earlier transfer to match availability of NEATS.

Methodology

Pre-program survey was conducted and revealed that average time for patient ready for transfer and arrival to TPH was 12:35pm and 3:40pm respectively. The average total time was 5 hours 52 minutes. 23.1% patients were late arrival. Also, total cost of 3-days medications in 2388 transfer patients in 2014 was \$139,220 per year. The step of preparing 3-day medication at acute hospital during weekdays is identified as non-value added. It would increase workload of pharmacy and overproduction type of drug waste in the situation that patient “just in case” arrived late to TPH. Problems had been identified as following: When patients were late to arrive to TPH, there would be unnecessary blockage of acute beds and increased workload for on-call doctor. Besides, 3-day medications would be wasted if patients arrived before 6:30pm. For NEAT service, it was under-utilized at 10:30am period and lower demand before 12 noon. These data and findings were shared and discussed with Pharmacists of AHNH, PWH, TPH and NDH, and with Department Operations Managers of O&T in PWH and NDH. They agreed we could suspend to bring 3-days

medications to TPH during weekdays. This new initiative was commenced on 5 October 2015.

Result

Post-program data collection was done in PWH and NDH O&T wards from 9 November to 15 November 2015 after implementing the change. The average time for patient ready for transfer and arrival to TPH was 11:43am and 2:31pm respectively. No case was late arrival. Improvement was 1 hour 9 minutes per case in average. To monitor the sustainability, follow-up audit will be conducted after 6 months.