Turning a Tight Corner into a Positive Venture - the Community Geriatric Assessment Team (CGAT), Tai Po Distric

CHAN SY (1), LEE JSW(2), LO KM(3), MAK KP(2), LAI KS(2, YIP SM(1), CGAT(1)
(1)   Community Outreach Services Team, AHNH
(2)   Department of Medicine & Geriatrics, TPH
(3)   Department of Medicine, AHNH

Keywords:
safety
prescription
geriatric

Introduction
Prior to 2017, all CGAT notes and prescriptions were hand-written, which had at times posed communication breaks between outreach and hospital-based teams and risks of prescription errors. Right before Winter Surge 2016, both of our visiting medical officers resigned. Part-time doctors and the entire AHNH Geriatrics team were involved to continue service for the 32 Residential Care Home for the Elders (RCHE) with 3695 residents. As the majority of these doctors were comfortable using the CMS, we grasped this opportunity to change our documentation method to the safer and more up-to-date mode of electronic input / records.

Objectives
To revamp clinical documentation from hand-written to computerized method

Methodology
Repeated efforts were made to promote the advantages of electronic entry and prescription to RCHE in-charge persons. Safety and timeliness of prescription collection was emphasized. Improved legibility and hence better communication between outreach and hospital teams, as well as for other clinics and private visiting doctors were stressed.
CGAT assisted in the sourcing and liaison between hospital IT department and RCHE in-charge persons for either set-up of an off-site CMS station, or if not feasible, at least of an affordable HA Citrix-compatible on-site printer, which can be connected to a HA-Citrix notebook computer. This allows on-site prescription printing which minimizes delays in medication collection.
Workflow on collection of medications from hospital pharmacy was revised to promote timely drug dispensing to residents of RCHE.

Result

Citrix-compatible printers were installed in 100% of RCHEs within 3 months from April 2016. Between April-Jan 2017: 7582 CGAT prescriptions were made via CMS-MOE; there had been nil medication incident due to prescription errors for these residents, and this system revamp had eliminated 330 hours of extra work which would otherwise been necessary for the transporting, inputting, filing and storing of handwritten prescriptions in COST, Medical Record Department and Pharmacy. Communications and clarity in clinical handover has been much enhanced for patients being seen concurrently in other clinics in the HA, as well as by private doctors serving the area.

Way forwards:

Light-weight notebook computers with better hardware performance have been purchased and pending software installation to further improve portability and efficiency.