

Service Priorities and Programmes Electronic Presentations

Convention ID: 198

Submitting author: Ms Yin Ling WONG

Post title: Ward Manager, Prince of Wales Hospital, NTEC

Streamlining handovers from A&E for urgent eye consultation in PWH Eye Centre

Ng J(1), Cheung WY(1), Tong A (1), Yip W(1), Young AL(1) (1) Department of Ophthalmology & Visual Sciences, NTEC Cluster

Keywords:

Streamling Handover A&E Urgent Eye Consultation

Introduction

There is no denying that urgent eye consultations need to be handled immediately. However, it will not be of any help to patients from the A&E Departments to the Eye Centre without any prior notice or miscommunication. Current problems: occasionally, patients from A&E were directly sent to eye clinic without prior notice or booked appointment. Eye clinic nurses have to spend much time to call different parties (A&E nurses, Eye on call doctor & A&E doctors) to clarify if there is any "agreed" arrangement to them. Such miscommunications may result in series negative impacts. First, it may lead to delayed treatments and increase potential risks. Second, it will be doubtful whether the patients should be discharged or sent back to A&E afterwards. Third, the patients will be frustrated when Eye MO consider their conditions not that urgent for immediate consultation. Fourth, conflicts between the two departments may arise. As such, streamlining the handovers from A&E deems necessary.

Objectives

To improve inter-department communication, optimize utilization & efficiency of urgent eye consultations, and enhance the care and safety of patients.

Methodology

Taskforce group formed to include senior Medical & Nursing Staffs from both departments (A&E & O&VS). Meeting was held in Oct 2015 to discuss possible measures to improve the workflow of A&E urgent eye consultations & clinical handover issues. First, it was agreed that there would be a designated phone number to reach the counter nurse of O&VS. Second, a colored handover slip would be used to alert both A&E & O&VS nursing staffs of patient's status quo so as to eliminate misunderstandings. Third, patients would come on wheelchairs or stretchers for safety sack. Forth, outreaching consultation would be provided if patients' clinical condition were not suitable for transfer. Fifth, A&E staff could fax referrals to O&VS for appointments if the cases were not urgent. Lastly, to get a consensus, there would be internal briefings in both departments on the new measures.

Result

Since the implementation of these new measures, the care & safety of patients have enhanced. 100% of referred A&E urgent eye consultations have been timely and properly triaged & arranged. 75% of them are seen by Eye doctors as "urgent consultations", 8% of them are seen by eye doctors in A&E as "outreaching services" and 17% of them with eye appointments given. At last no unnecessary case sent to O&VS, patients' expectations are well managed without any complaints. Such a success can be attributed to the greatly improved communication & clinical handover between all the parties concerned.