

# Better Together

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NNSW INTEGRATED CARE MADE POSSIBLE BY STRONG LOCAL PARTNERSHIPS:



# eMR – Safe Transfer of Care

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# eMR-Safe Transfer of Care

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**JULLUMS**  
LISMORE AMS

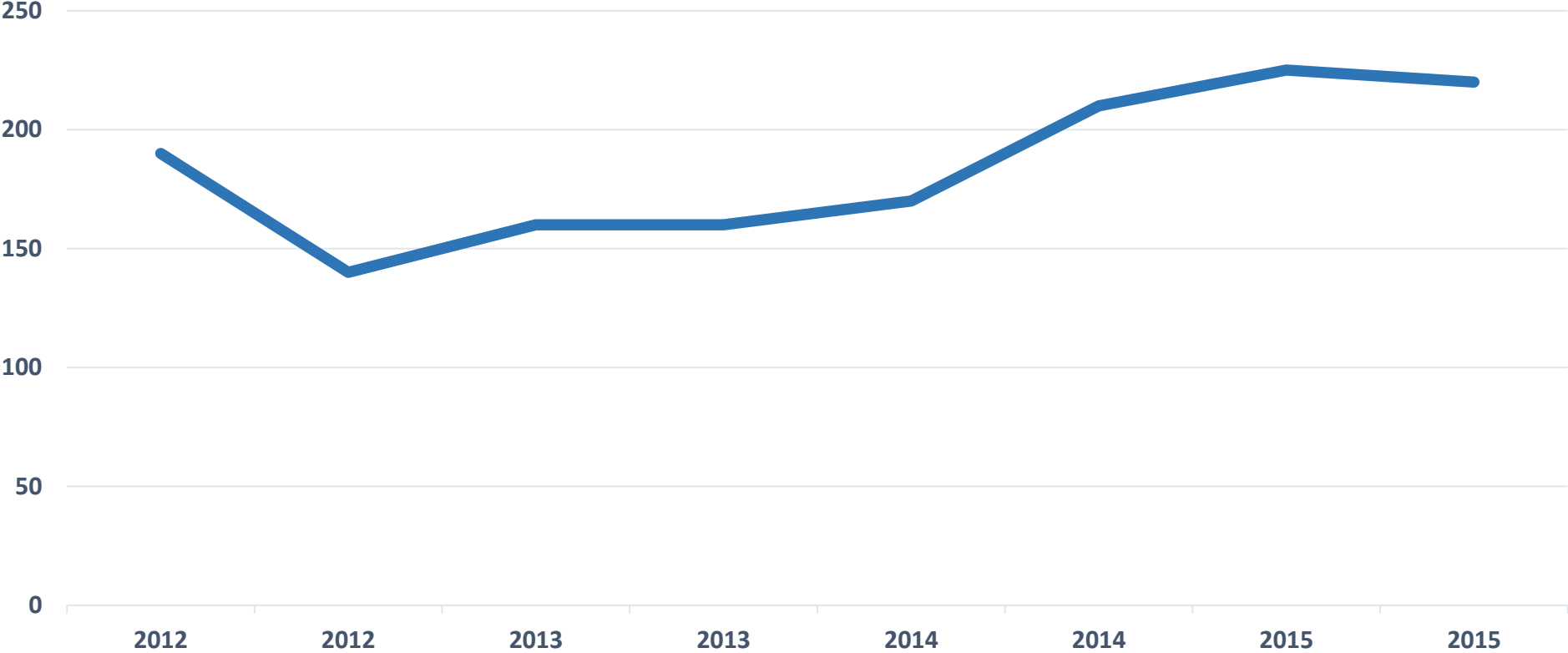


# Project Scope



1. Optimise clinical documentation to support best quality patient care
2. Improve timeliness and quality of Electronic Discharge Summary (eDS) to support Safe Transfer of Care
3. Improve Electronic Medical Record (eMR) documentation to support funding and accountability for performance

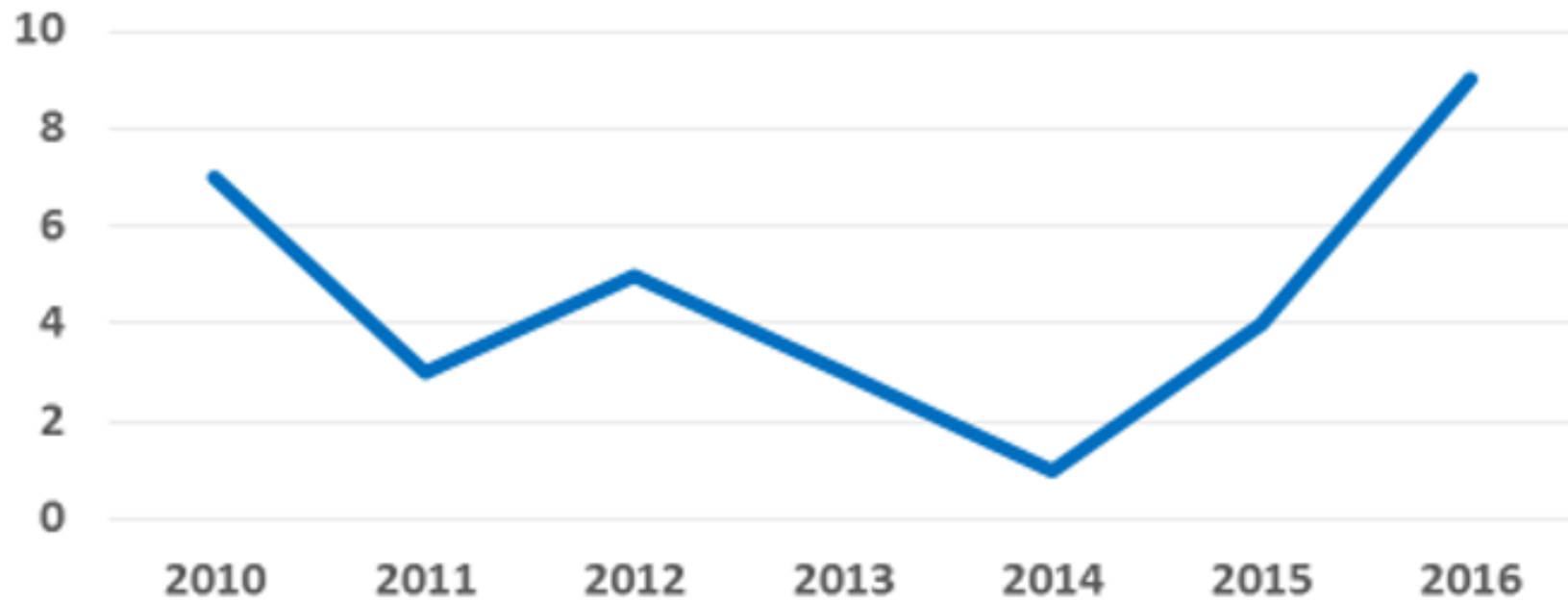
# NEW SOUTH WALES



**RCA – Relating to Communication/Handover**



# NNSWLHD



**RCA – Relating to Communication/Handover**

# How did we begin?



- Our NNSWLHD Executive highlighted key areas of concern
- LHD Workshop November 2016
- Live demonstration by Clinical Coder and Medical Officers using eMR
- Common themes- eMR workflow and design / knowledge
- Consensus and enthusiasm within the room.....

# What did our junior doctors say?



- Priority – patient (unwell) vs discharging patient (well)
- Tools – do they help or hinder the task?
  - too many options / can't find the option that I want
  - Training → is it appropriate to help facilitate the task
- A printed copy for the patient ?
- The most inexperienced person caring for patient is often responsible for the discharge summary



# What did our medical coders say?

- Medical Coders require documentation and information to be supportive:
  - Information should be accurate and concise
  - Notes need to be labelled correctly. “Copy and paste “ is to be used with discretion
  - Often it is difficult to find information to support coding

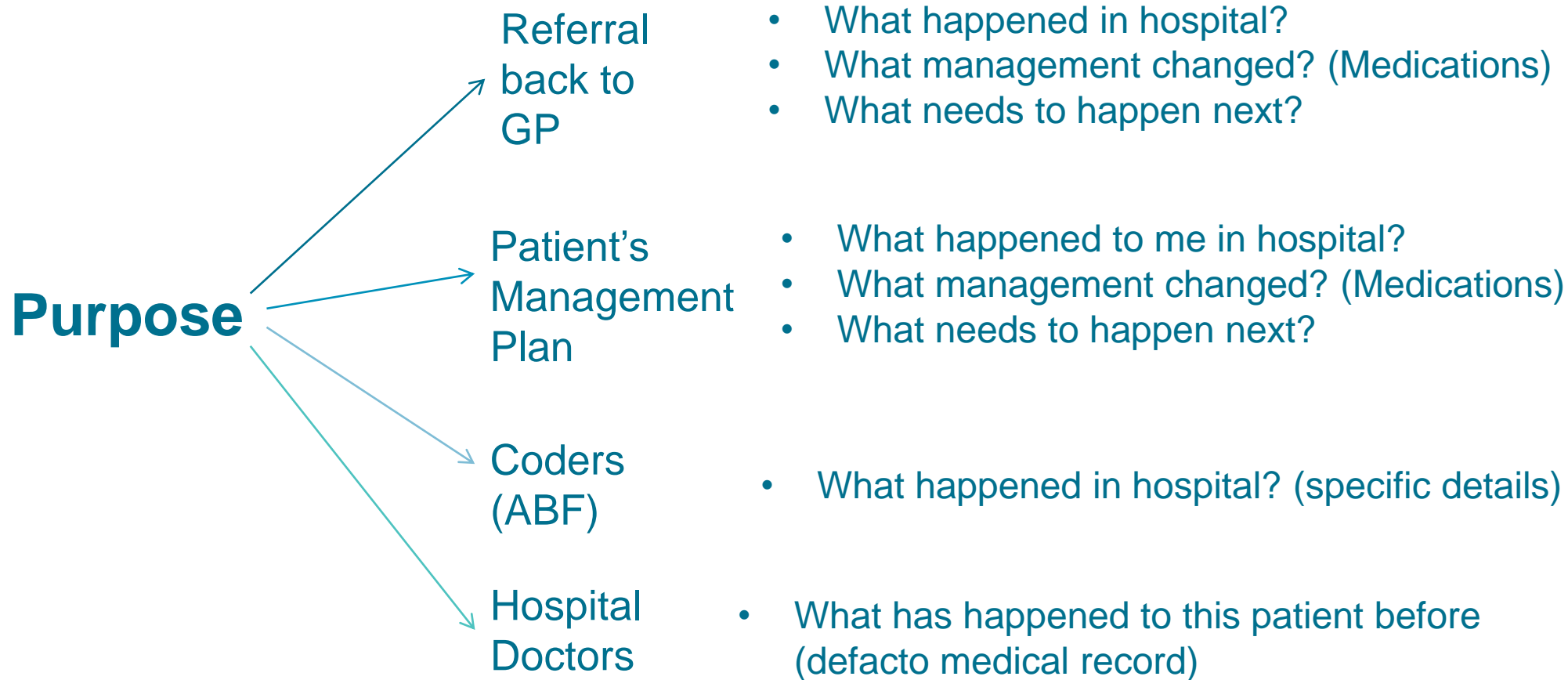


# What did our GP partners say?

- GPs request discharges that are:
  - Received in a timely manner
  - Accurate and concise
  - Medication changes with rationales
  - Clear and simple plans for next steps in management
  - Improved system for follow up of pathology and investigations



# The Discharge Summary purpose(s)



# Safe Transfer of Care

“Safe transfer means that our patients move with the security that their story is clear, care planning is shared and we avoid duplication of results and avoid unnecessary presentations at all healthcare facilities”



“Yes Jane, I received your discharge information, the surgery went well”

“I am so sorry Gwen, I had no idea that you had been so unwell !”



“Harry, so sorry I did not know that your wife Jill had died in hospital”





# Safe Transfer of Care Sounds Simple

The patient  
receives a  
printed copy

The GP is  
registered  
to receive  
eDS

Electronic  
Discharge  
Referral is  
completed and  
submitted

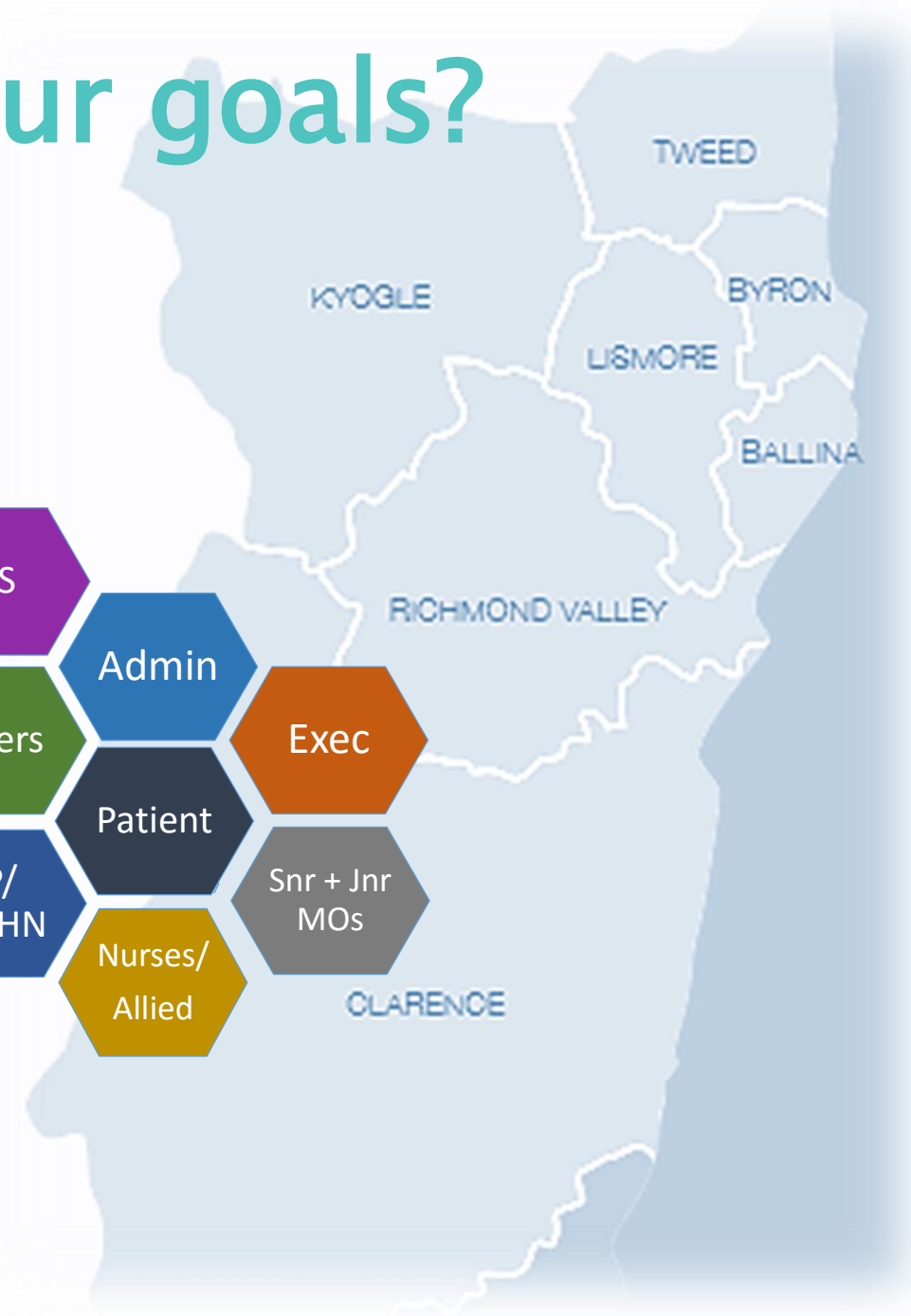
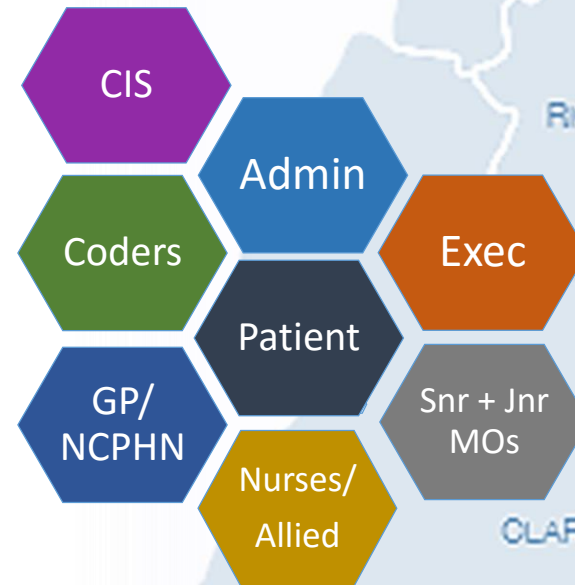
The patient  
has a GP and  
this is correct  
in eMR

The  
information is  
accurate and  
concise for  
the GP to use



# How will we achieve our goals?

1. Collaboration & Networking
  - All partners at the table
  - Facilitates rich and timely feedback
2. Listen to our patient's stories
  - unpack system issues
3. Develop relevant and targeted training packages
4. Promote culture change across our whole LHD/PHN
5. Continue to monitor trends around eDS completion and delivery



# Thank you for your support

Together we can provide our community with coordinated and integrated care in a health and social system that works



# Thank You

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