Management of Clinical Notes in Specialist Outpatient Clinic P

A/Prof Arjandas S/O Mahadev
Eunice Cha Mui Noi
Isabelle Deng Qian Hui
Lee Worn Jiun
Ong Ling Ling

Background & Opportunities

Over the years, a lot of manpower and time were spent on managing hardcopy patients’ medical records (requesting, transporting, adding entries etc). Without these records, consultations would be delayed or not be able to take place which then resulted prolong waiting time for the patients at the clinic.

As time went by, these records also “grew” in pages and weight. This made it difficult and ergonomically hazardous for staff to transport them from the medical records office to consultation rooms and back.

Missing pages/records was also an issue as clinicians were not be able to refer to these notes for patients' medical history.

Aim

To reduce the time that staff spent on managing casenotes for pre and post consultation at Specialist Outpatient Clinic P (SOC P) within 3 months.

Root Cause

Root Cause Analysis (Figure 1) was conducted and the team found that the clinicians will require a platform to record patients’ medical history and to replace with an alternative platform.

![High number of casenotes](#)

- Patients with high number of consultations and admissions
- High volume of patients seeking consultations
- Clinicians’ hard write to record patients’ medical condition on hardcopy forms/files at each visit
- There are no other platforms to replace patient’s condition

Solutions

The project team brainstormed for solutions and collaborated with the technology enabling team. With the support from the senior management, we would like to embark on electronic medical record project.

The plans for trials and implementation were discussed extensively, involving a comprehensive Enterprise Risk Management was conducted to ensure that mitigation plans are in place to tackle any issues arise from the new electronic medical records system.

Results and Conclusions

After implementing the new EMR, the average time spent per staff in managing casenotes improved tremendously from 165 minutes to 36 minutes. (Figure 2)

Workload of DDMS has also significantly decreased from a monthly average of 4891 casenotes traced to 266 casenotes for a period of 9 months. A total of 490 mins were saved on managing hardcopy casenotes by staff at DDMS with the implementation of EMR. (Figure 3)

In addition to the tangible savings on resources, more than 95% of users agree/ strongly agree that there is an easier retrieval of clinical notes, better tracking of patient’s medical history and provide treatment in a timelier or more timely manner. The Users also agree/ strongly agree with 100% Positive satisfaction rate on timely accessibility to patients’ electronic notes. (Figure 4)

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