



To reduce the incidence of creating Duplicate Medical Records in Specialist Outpatient Clinics

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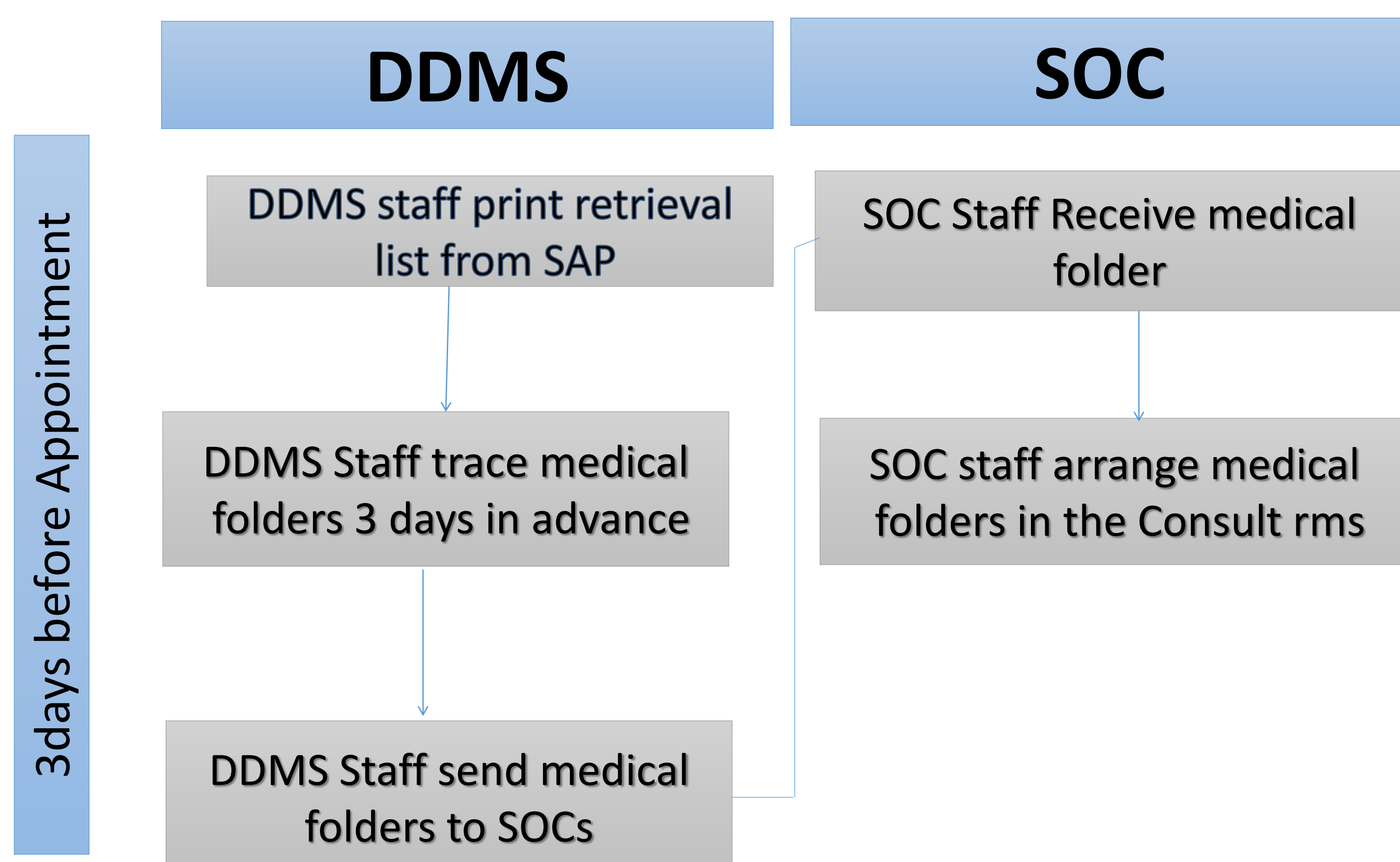
1. Aim

The aim of the paper is to reduce the creation of Duplicate medical record by 50% in SOC C by end May 2017

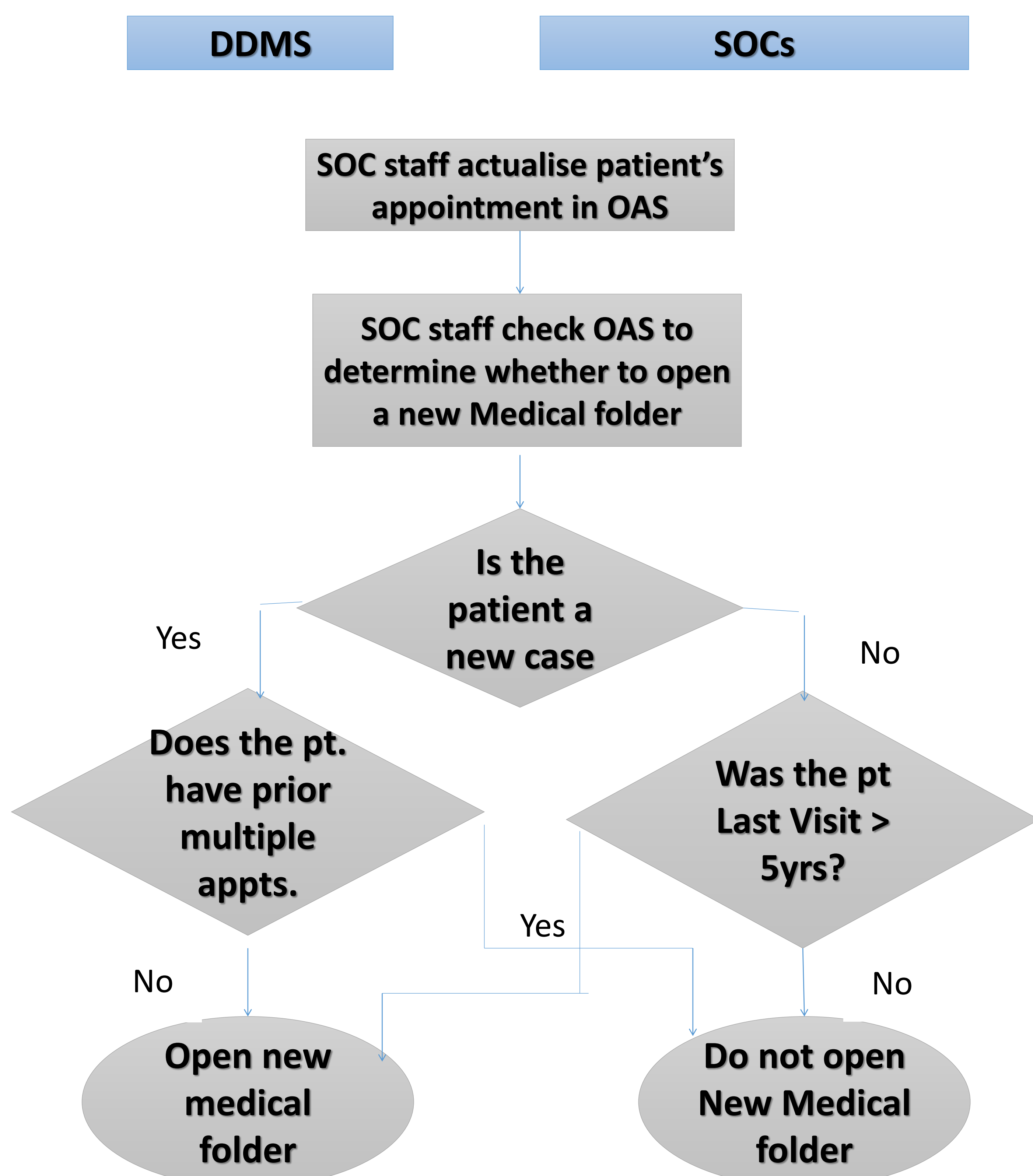
2. Methodology

The process flow map was used to depict the medical Records journey between DDMS and SOC C. This has enabled the team to find out how duplicate medical records could be created.

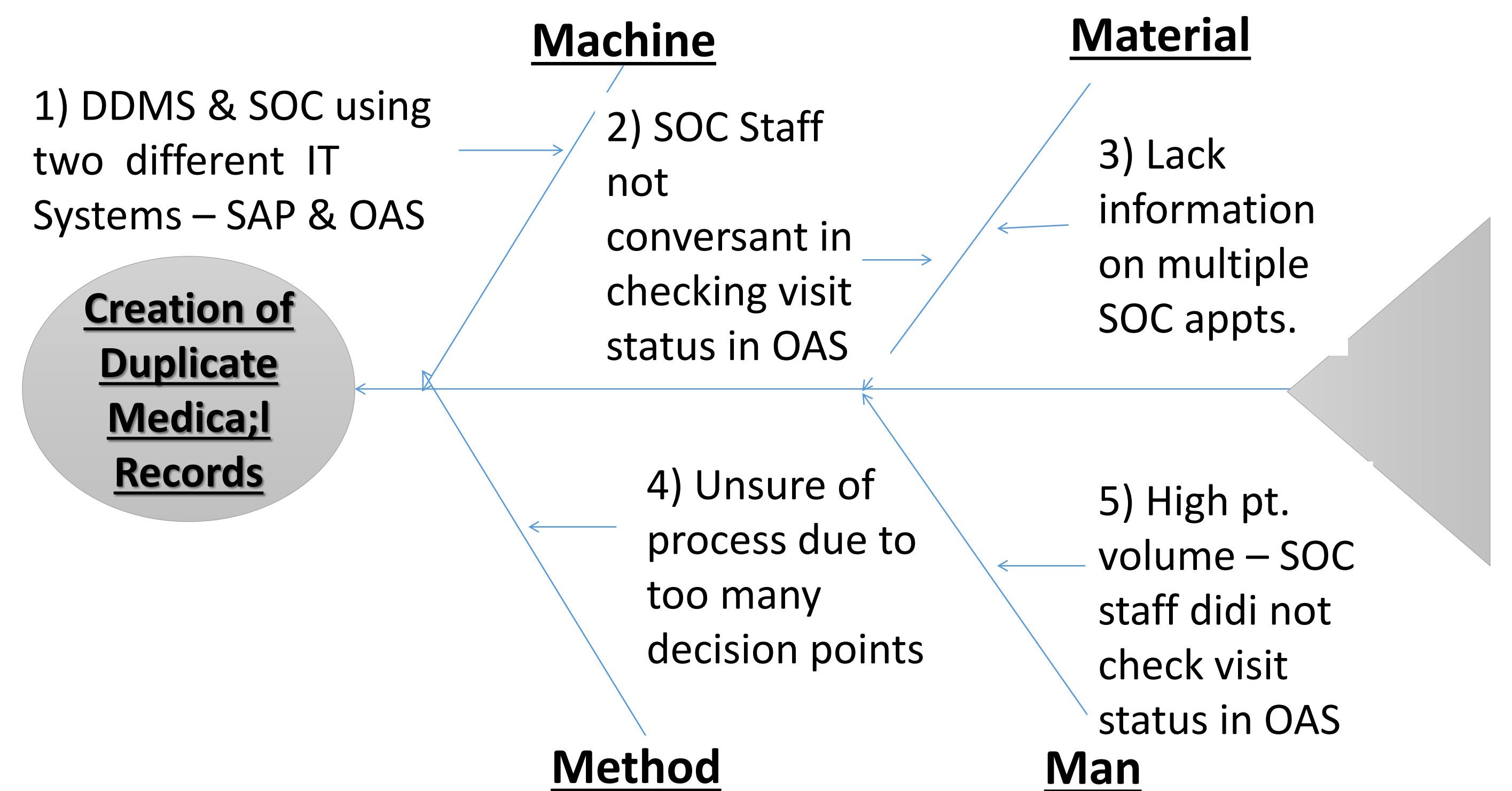
A) Process Flow Map (3 Days before Appointment)



B) Process Flow map (on Day of appointment)



C) Cause & Effect Diagram - determine the Root Cause

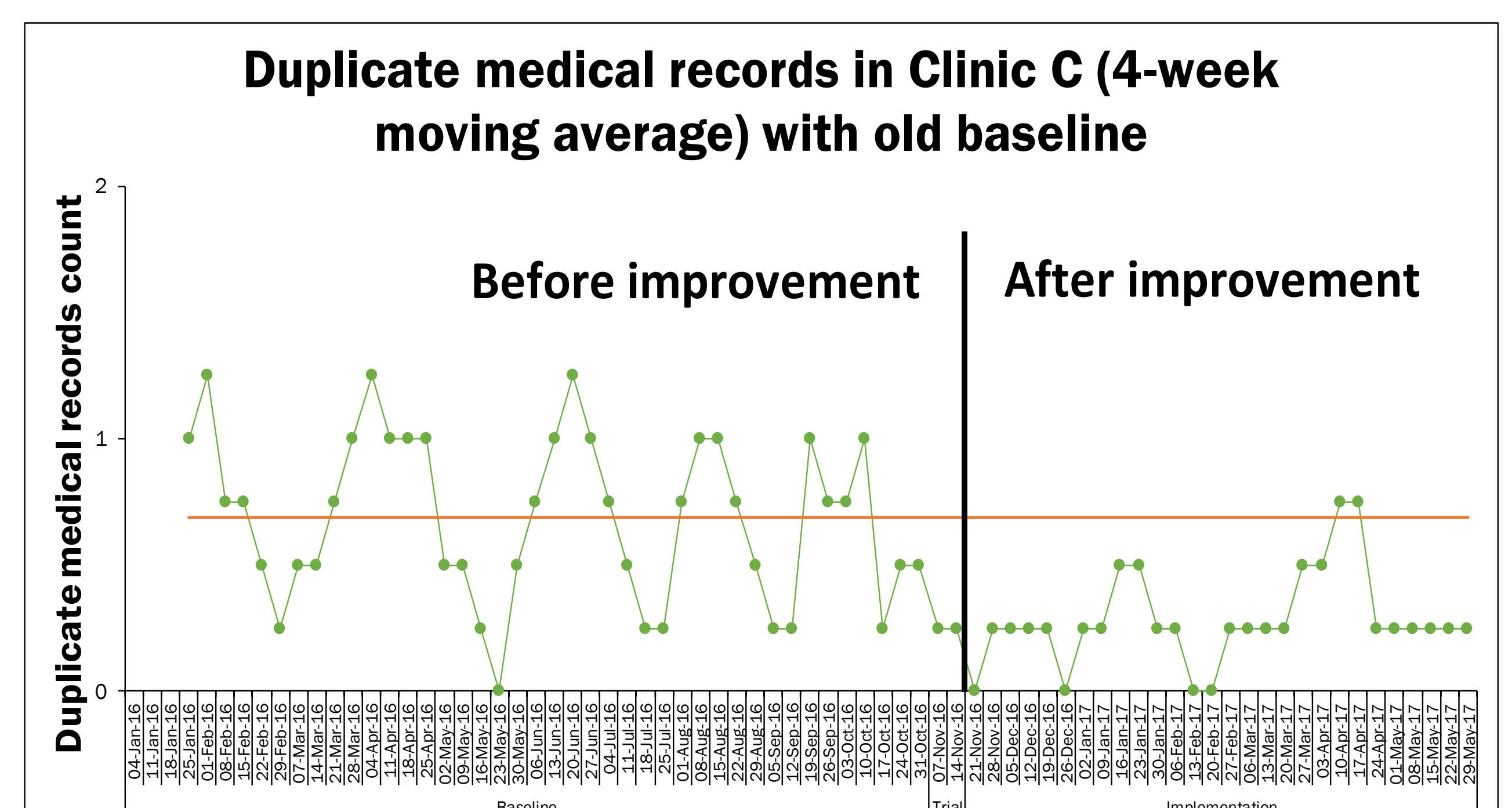


D) Solutions

1. DDMS to highlight on the retrieval list to SOC the need to create Medical records ( Pilot in SOC C on 31 Oct 2016 – to address Root Cause 2, 4, & 5

2. DDMS to indicate on the multiple appointments list of all SOC's to be visited and PSA has to check OAS if patient has visited other SOC's (on going in SOC C) - to address Root Cause 3

3. SAS to create alert in OAS to prompt PSA on need to create Medical records (piloted in SOC C on 13 February 2017



Conclusion:

The team concluded that the implementation of the 'Alert tagging' in OAS had enabled the project to meet its aim but we are not able to eliminate the creation of Duplicate Record totally as all the solutions to the problem are done manually, including the Alert tagging and errors could occur with any of the processes that were put in place. The team will continue to monitor the incidence of Creation of Medical Records and hope that with time, staff will be familiar with the total process and the problem will be eliminated eventually.