



TOPIC #1 - Clinical Handover and Discharge Summary (Transfer of Care)

Dr. David Rosengren, Acting Executive Director of Medical Services at Gold Coast Health (GCH), updated the Clinical Council (CC) on Gold Coast Health’s initiatives to tackle the issue of hospital-to-GP discharge documentation.

<p>CHALLENGES FACED BY GOLD COAST HEALTH</p>	<ul style="list-style-type: none"> • The process of creating transfer of care documentation is manual, and involves double handling and is often left to junior medical staff or medical students • Given the volume of patients in public hospital, senior clinicians prioritise incoming patients over completing discharge documentation. • The hospital’s integrated electronic medical record (ieMR) lacks the functionality to automatically process and produce transfer of care documentation. (Queensland Health is currently developing this functionality, but it will not be available for some time). • Legislation concerning patient privacy significantly limits the sharing of information with practices in northern New South Wales.
<p>GOLD COAST HEALTH INITIATIVES</p>	<ul style="list-style-type: none"> • Until the ieMR can automatically produce transfer of care documentation, short-term measures to be explored include automatically advising GPs when one of their patients has been admitted to hospital. • The emergency departments have a system where each patient leaves with treatment notes and information for a GP follow-up. This is a manual process. • A new system where registered GPs of patients admitted for day-surgery procedures such as endoscopes and colonoscopies receive a same day report including notes from the surgeon and follow-up care recommendations. GCH is investigating the use of this technology for other procedures. • In outpatients, around 70 clinicians at GCH are participating in a trial of Lyrebird's ambient listening technology which uses AI to capture and transcribe spoken interactions, including clinical summaries. • GCH has plans to develop a patient portal where GPs can upload background information to enhance the patient’s hospital experience.
<p>DISCUSSION</p>	<ul style="list-style-type: none"> • RACH residents discharged from the hospital need updated medication charts as RACH nurses cannot use medication summaries as official orders. A future solution could involve pharmacists taking a more active role in prescribing within RACH settings, a matter currently on the national agenda. • Allied health clinicians do not receive transfer of care information and must either lodge a Freedom of Information request with the hospital or obtain the details from the GP. Queensland legislation restricts access to The Viewer to specific job roles, such as GPs and paramedics. Information should be accessible via My Health Record once it is available on The Viewer. • Indigenous healthcare providers have challenges due incompatible software.
<p>NEXT STEPS</p>	<p>GCPHN will continue to liaise with Gold Coast Health regarding transfer of care developments and will look to support where possible.</p>

TOPIC #2 - Regional Needs Prioritisation

100%

of CC members indicated an interest in participating in future local health needs prioritisation workshops.

The Clinical Council (CC) received an overview of the Gold Coast Regional Needs Assessment (RNA) process, and the progress made so far.

The RNA partners will use a hybrid approach to prioritisation comprising:

- a matrix where needs are scored against a criteria including magnitude and severity - underpinned by evidence and conducted by the partners.
- a series of workshops to establish relative priority according to stakeholder sentiment values and experience. CC will participate in this at the next meeting on 10 October 2024.

CONSIDERATIONS

- This workshop does not place the responsibility of prioritising health needs solely on members of the CC. It is one aspect of the broader prioritisation process involving both assessment against a matrix and prioritisation by a number of advisory groups.
- Pre-reading material will be provided for members on the process and expectations at the workshop, it will not be necessary for participants to read comprehensive, technical material.

NEXT STEPS

Following the workshops, the RNA partners comprising Gold Coast Health, GCPHN, Queensland Ambulance Service (QAS) and Kalwun will review the outputs from both the matrix assessment and the workshops across all advisory groups.

The partners will then use these outputs to determine the relative priority and allocate the health and service needs into levels. The partners will also identify if the priority should be a joint responsibility or allocated to one particular partner. The consolidated list will then be approved within each of the partner organisations.

The final report will be submitted to the Queensland and Commonwealth Governments in November 2024. The priorities in the report will inform local activities, potential new funding and program development, education/training, and promotion.

100%

of Clinical Council members felt their opinions were valued

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GOLD COAST

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