

GP Discharge Communication from Emergency Departments

EMP November 2012

Draft Discussion Document

Background:

The EMP wishes to collaborate with the HSE General Practice Directorate (insert correct title) to develop a standardised approach to communication between EDs and Local Injury Units and patients' General Practitioners. The key recommendations are:

1. All ED patient attendances should be notified to the patient's GP, unless the patient declines permission for this notification to occur.
2. The EMP recommends that this notification should occur electronically, through EDIS linked to the GP Health-link system.
3. A standardised ED discharge letter should be developed with a dataset agreed by the EMP, the HSE Primary Care Directorate and the Irish College of General Practitioners.
4. GP discharge letters should also be used by on-call specialty doctors discharging patients from the ED and reliable systems should be in place to ensure that on-call Consultants are notified of all patient discharges made by their teams.
5. The EMP will liaise with HIQA to derive a dataset that is compatible with HIQA recommendations.
6. EDs will need to develop local protocols to ensure that letters are generated to notify GPs of patients who leave before completion of treatment.
7. A standardised electronic GP referral letter may be developed as a follow-on project.

Project drivers from EMP perspective:

This is not an exclusive list.

Patient safety:

- The HSE requires that all health service organisations have clear access and transfer protocols that are agreed with all partners and that "*We are clear at all times during an episode of care who is the responsible clinician accountable for the service user*" (HSE 2010).
- The Health Information and Quality Authority's (HIQA) Tallaght report states that any communication following discharge "*should ensure that the necessary community services and supports and any further hospital services e.g. OPD are in place for the patient to enable timely discharge*" and that all discharges should "*have the appropriate follow-up*

arrangements organised and communicated to themselves, their GP and appropriate community services' (HIQA, 2012). It also recommends that: "All hospitals providing emergency care must continually manage and review the effectiveness of the patient-streaming, patient discharge arrangements, access to diagnostic investigations and fast-tracking systems in place."

- Good communication is essential for the protection of children and vulnerable adults.
- Letters will facilitate medicines reconciliation across the GP/ED interface.
- Letters will reduce the risk of missed follow-up.

Quality of care:

- Managing the effectiveness of patient discharge arrangements:
 - The College of Emergency Medicine UK has a standard clinical audit template for Discharge communications that the EMP would wish to use on any standardised documents in Ireland. This requires comparable data-fields to be included.
 - Recommendations from the EMP regarding discharge arrangements to follow.

Patient records/ Data management:

- A GP discharge template will be needed for EDIS.
- Hospitals that wish to use standardised paper-based ED patient records may benefit from having the GP letter included in the paper template.
- An electronic copy of the letter should be saved in the EDIS/hospital EPR.
- Generation of letters will support diagnostic coding at the end of the ED episode for future costing models.
- The Programme does not support postage of letters due to the costs involved, but a printed copy of the discharge letter may be made available for patients to bring to their GPs.

Value

- Good communication will reduce the time spent by GP teams trying to access information regarding patients' ED attendances.
- An electronic GP letter system will reduce the workload of GP liaison nurses and administrative staff in EDs.