

Improving Patient Discharge Summary Communication

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Dear sir,

Transitions from one care setting to another represent a high risk point for patient management error¹. Patient discharge summaries are crucial to ensure safe and effective handover for postoperative surgical instructions and plans. Currently, a postal discharge summary service exists for the majority of Irish hospital discharge communication. However, accurate and timely provision of discharge summaries has the potential to optimise patient care, reduce post-operative complications and error, and improve patient follow-up.

A single-centre prospective review of patients undergoing local anaesthetic procedures in the Department of Plastic Surgery in University Hospital Galway was performed. In the first arm of the study, 20 patient discharge summaries were completed via the 'Electronic Discharge Summary' tool. These were routinely sent by via post. In the second arm the study, 20 patient discharge summaries were completed via the same online tool, and were emailed directly to the GPs via healthmail. Practices were then phoned one week after patient discharge to identify when discharge summaries were received.

A total of 40 patients underwent 40 surgical procedures. A total of 35 patients presented for elective skin cancer and hand procedures, and five presented for emergent hand trauma procedures. The overwhelming majority of patients required primary skin closure ($n=34$). However, six patients required a more complex reconstruction with a local flap or skin graft. The mean time for postal delivery of the discharge summaries was 4.9 days (range 2-7 days) compared to the immediate delivery of electronic copies.

When asked, “has your practice had delays with patient discharge summaries sent by the Post?”, 82.5% ($n=33$) of practices agreed that they had. When asked, “do you think COVID-19 has impacted the timely delivery of discharge summaries to your practice?”, 95% ($n=38$) of practices agreed that they had. Finally, when asked, “would you prefer discharge summaries be sent electronically in the future?”, 90% ($n=36$) of practices agreed that they would.

HIQA’s introduction of the ‘National Standard for Patient Discharge Summary’ in 2013 was a mandatory renovation of a previously fragmented discharge protocol nationwide. Previous studies have documented the long standing deficits of the current structure and delivery of discharge summaries from secondary to primary care, both in the Irish healthcare setting and the broader National Health Service of the United Kingdom²⁻⁴. The introduction of ‘Electronic Discharge Summaries’ has allowed for more accurate documentation, but it fails in regards of its dated distribution method to primary care facilities.

Well-designed information technology (IT) systems and solutions will be critical in developing the HSE’s patient pathway. IT allows the immediate delivery of patient data to the primary care giver, and can be integrated directly into GP software systems. Although there is a need for an integrated Irish system, developments are slow to create a cross-border electronic summary in the European Union. Our data demonstrates that there is a continued need for HIQA to further investigate the legal, regulatory and financial burden and benefit of hospital to primary care IT facilities.

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