

CHAPTER IV

DISCUSSION AND CONCLUSION

DISCUSSION

This research is aimed to study the results of the pilot project of managing discharge summary system of the inpatient department at Roi-Et Hospital. By using TQM in the management during the project time, it was found that the solution of overdue and lost summary discharge charts had to depend upon cooperation among personnel from various units. The successful results are as follows.

1. The Internal Medical Record Statistics Unit

1.1 The work system was improved so effective that it had an obvious pattern of work.

1.2 The register of controlling incoming and sending charts was arranged to decrease the repetition of work

1.3 By using the Manual of Job Description, all personnel of the Inpatients Medical Record Statistics know their role precisely.

1.4 There is cooperation in developing work such as arrange meeting for continuous solution once a month, report of meeting results and send them to administrator board every month.

2. Personnel of each wards who deal with charts

2.1 Doctors

After using the policy of summary medical record statistics charts, the Cross Functional Team coordinated with medical staff organization. The medical staff organization informed head of department to realize the importance of summary chart problems which concern the effectiveness of medical cure and the negative effect for the hospital budget. The results were positive. There were more cooperation from doctors. They could summarize charts in time. (There were only two charts

which could not be summarized in time as two doctors had an official work in other provinces.)

2.2 Nurses and other personnel working in each building

Nurses and personnel who work in each wards followed the manual of Job Description according to the hospital order No 61/2000 issued on the 30th of March 2000. This made the work more effective.

However, while running the project, the research team found problems as follows.

1. Personnel

It is clearly seen that bringing various persons together to brainstorm for solving a problem is quite difficult. Every person has different background and nature. Some personnel could be a good listener but some could not accept the others' decision easily. The later case happened generally to doctors and nurses who thought that a meeting was wasteful and it could not solve any problems.

So they needed no meeting nor brainstorming. However, every personnel realized that chart problems were important to patients and the hospital development. Each personnel also has a high degree of education. This helped in the cooperation for solving the problems. The difficulty of asking the cooperation from hospital personnel are as follows.

Doctors

- At first stage, some doctors did not understand their role. They saw no importance of sending charts. Some had no time to send them and some did not know the hospital policy.

Nurses and other personnel who deal with

- Some nurses and personnel were not satisfied when there was a check of overdue charts. They did not want to coordinate with doctors since at first stage doctors did not understand their role and refused to the cooperation.

- Some nurses and personnel did not want to summary charts. They thought that summary charts was under doctors' duty.

- There were sometimes overdue charts because they had to be summarized and checked by a head wards. As a head wards was absent and did not ask other person to take charge, so personnel kept charts at the wards for a head's checking.

- Nurses wards had to use charts for setting standard of nursing. This resulted in numbers of overdue charts.

- At the time when the personnel from Information Center went to check or follow overdue or lost charts in wards, sometimes it took a long time to find them. Nurses or personnel of wards were not satisfied because they had a lot of patients to take care of. They thought that the coming for checking charts disturbed their cure service work to patients.

2. Work system

- It was found that the old work system was complicated and had no obvious methods.

- Personnel did not realize their job description. There were no record of borrowed and returned charts. They did not know why or when charts were lost, or whether charts were summarized.

3. Computer equipment

- Although it seems to be modern in using computer, there was also some restriction of using that equipment. For example there was some problems of program which could not save all the data.

- The steps of saving data were complicated. There were few personnel who knew them. Sometimes these personnel were absent or had their own business.

This spoiled the system of rotation work. The saving data was delay and it could not be sent to the ministry of Public Health in time.

Comparison on the success of the project

The results from the research show that this project acquired the success of using TQM for the management of the inpatient Medical Record Statistics Unit of Roi-Et Hospital. In comparison to the results of the research of Nopparatana Rajthanee Hospital which used TQM, it was found that the two researches showed the same results. For example, the studying of patient cases which overdue 5.75 case per day. After using TQM to solve the problems, it was found that numbers of patient cases decreased to 2.32 cases per day.

The factors which lead to the project success

It was found that the success of the pilot project depends upon teamwork of all personnel. Although they play different roles, they give the importance to the problems and help solve the problems together. All the cited personnel are as follows.

1. The Cross Functional Team

The Cross Functional Team is nominated by the Quality Control Center. The team's duty is to search for the solution of the problem and then present the solution to the director of Roi-Et Hospital so that he will issue an order of working in team.

2. The doctor Team

Doctors have much work than any other personnel. They are honored by every personnel, especially the medical staff organization is respected by everybody. The medical staff organization promotes a teamwork to solve the problem.

3. The nurse team

Normally nurses spend all the time giving several services to patients. When the policy for solving the problem is presented obviously, they are ready to work and devote their time to improve their work. They distribute their duty according to the flow charts and make the record for controlling sending charts systemically.

4. The Internal Medical Record Statistics Team

This team coordinated with inner and outer units. When there was a problem, the team tried to coordinate between units. This reduced daily problems until there was almost no daily problems. The team made the record for controlling borrow and return charts for another unit.

5. The Medical Information Center Team

The team's duty is to check complete and accurate information in each wards and in the Internal Medical Record Statistics Unit. The team also follows any progression of each wards and encourages personnel of each wards to work according to the director's order.

Beside the cited factors that lead to the success, there is another one that plays an important role. It is the leadership. The administrators or leaders of the hospital have to study the concept of TQM to understand and support the changing system. This will make continuous improvement. As for the case of overdue and lost charts, The director of Roi-Et Hospital had issued the Hospital Order No 61/2000 to solve the problem of overdue and lost charts.

As for the hospital personnel, they understand the system of TQM as well. They all had passed the training course. Finally, this improvement process will remain practical if there is a continuity of internal check. This will lead the hospital to achieve its goal of Hospital Accreditation as mentioned Doctor Anuwat Suppachutikool.

CONCLUSION

The conclusion of the research are as follows.

1. There are 0.2% of overdue charts. Numbers of overdue charts are less than 10%.
2. There is no loss of charts. (0%)
3. The important results are as follows.

3.1 The Cross Functional Team was established to be a key person of problem-solving planning.

3.2 The new work system under the hospital order was applied in each wards.

3.3 The new circulation of flow charts was applied to protect loss of charts.

3.4 There is a register control for borrowing and return charts.

3.5 There is a manual of job description for the personnel of wards and Medical Record Statistics Unit.

3.6 The personnel of Information Center worked as an internal inspector to check whether the project could be run without interruption.

4. The hospital could integrate this project into its daily work plan.