

S1.2

Medical and Social Partnership in Services for the Frail Elderly

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Introduction:

In order to render the million elderly with 24-hour emergency support and care service, the Senior Citizen Home Safety Association (SCHSA) has commenced its Personal Emergency Link Service (一線通平安鐘服務) on Sept. 1, 1996 in Hong Kong. Over the 10 years, the Service has rendered support to 82,748 elders living in the community.

Purpose of the Project:

Aimed at enhancing the efficiency of medical intervention through PE Link's timely information about the elders' health status to the A&E Department of public hospitals.

Material and Method:

The partnership started with a communication mechanism between the SCHSA and AED being set up in Jan., 1997. A standardized HR form (see appendix) approved by the two parties has been used and revised several times throughout the 9 years of collaboration.

When confirmed that the user needs to be transferred to AED, the PE Link Centre will activate the communication mechanism by win-faxing the medical history and personal particulars of the patient to the designated AED of the catchment area for their reference and necessary actions.

Results:

For the last 10 years, more than 99,100 records of service users have been transmitted to AEDs of the 18 public hospitals. This has successfully enhanced the efficiency of AED service in triage, and also provided timely reference to the medical doctors or nurses who can better prepare for the coming of the patients. Before this mechanism was in place, medical practitioners have to wake the elders up to ask who they are, what kind of illness they have and the medicines they are taking, etc., as well as carrying out necessary actions only upon the arrival of the patients. With this win-faxed communication mechanism established, such procedures can be minimized.

Upon receiving the reply slip faxed by AED, SCHSA can inform the patients' family carers about the patients' latest situations, which in turn helps saving the family carers in locating the elders. Family carers have regarded this as important support to them in the caring role.

Conclusion:

Both SCHSA and HA agree that the partnership has helped in prioritizing resources and in rendering timely patient care.

Appendix: Communication between the Senior Citizen Home Safety Association and A &

E Department of HA Hospitals according to agreed arrangements

**Communication between
the Senior Citizen Home Safety Association and A & E Department
of HA Hospitals according to agreed arrangements**

Part I (To be completed by Senior Citizen Home Safety Association "the Association")

To : _____ Hospital A & E Department ("HA")

Fax No : _____

1. Patient's particulars

Name _____ (_____) Age _____ Sex _____

ID No. _____

2. Nature of Emergency

3. Personal particulars and medial history are given in the attached form.

4. We confirm that consent has been given by the patient for us to disclose his / her personal details and medical information to you for his / her healthcare purpose. The patient has also given consent for you to disclose information in Part II to the Personal Emergency Link. Please contact our staff at 2338 8312 if you would like to have a copy of the contract.

Cancellation of all the information after use is recommended.

From : _____ (Name)

Control Office
Senior Citizen Home Safety Association

_____ (Date)

_____ (Time)

HR No: _____

Part II (To be completed by Hospital)

To : Control Office
Senior Citizen Home Safety Association
Tel. : **2336 9993**
Fax : **2304 5672**

- The above patient was admitted to _____ ward / bed _____ Hospital.
- The above patient was discharged at _____ (Hr) on _____ (Date).
- Please contact _____ at _____ (Tel. No.).

From : _____ (Name/Rank)

_____ (Hospital)

_____ (Date)

HR No: 84438

送院個案參考資料

A. 服務使用者基本資料

姓 名： (中) _____ (英) _____ 性別： _____
 身份証號碼： _____ 出生日期(年/月/日)： _____
 語 言： _____ 合約編號： _____

B. 醫療紀錄 (只供參考使用)

現時患有疾病名稱	現時服食藥物名稱	對何種藥物敏感
覆 診 醫生/診所名稱	覆診咭編號	電 話

C. 緊急聯絡人資料

姓 名	與服務使用者關係	聯 絡 電 話	
		住宅	
(1)		住宅	
		公 司	
		手 提	
		傳 呼	
(2)		住宅	
		公 司	
		手 提	
		傳 呼	
(3)		住宅	



長者安居服務協會
Senior Citizen Home Safety Association

一線通  **呼援服務**
Personal Emergency Link

PE/Form 2 (B)

		公 司	
		手 提	
		傳 呼	

送院個案參考資料 (附頁)

A. 服務使用者基本資料

姓 名： (中) _____ (英) _____ 性別： _____
身份証號碼： _____ 出生日期(年/月/日)： _____
語 言： _____ 合約編號： _____

B. 醫療紀錄 (只供參考使用)

現時患有疾病記錄

疾病名稱

現時服食藥物記錄

藥物名稱

現時服食藥物記錄

覆 診 醫生/診所名稱 覆診咭編號 電 話

藥物敏感記錄