

中華人民共和國香港特別行政區政府總部食物及衞生局 Food and Health Bureau, Government Secretariat The Government of the Hong Kong Special Administrative Region The People's Republic of China

*Our Ref* : L/M to FHB/H/1/19 *Your Ref* : Tel: 35098959Fax: 21022519

24 November 2017

Ms Maise LAM Clerk to Panel Panel on Health Services Legislative Council Complex 1 Legislative Council Road Central, Hong Kong (Fax: 2185 7845)

Dear Ms Lam,

## Panel on Health Services Follow-up to the meeting on 15 May 2017

I refer to the discussion on Inpatient Medication Order Entry ("IPMOE") system of the Hospital Authority ("HA") at the meeting of the Legislative Council Panel on Health Services held on 15 May 2017. In response to the Members' request for supplementary information on the IPMOE system and the HA's medication order entry system for outpatients, our reply is as follows.

## (a) information on the expenditure incurred so far for the development of the IPMOE system and the estimated costs for the future system enhancements of the IPMOE system

2. The estimated expenditure for the development and implementation of IPMOE system in 15 acute hospitals of HA since 2009-10 is \$172 million. \$142 million was incurred up to 2016-17. In addition, funding requirement

of \$128 million was approved for the implementation of IPMOE in 22 non-acute hospitals of the HA and further enhancement of the system from 2017-18 to 2022-23.

## (b) the report on the interim review of the IPMOE system

3. An interim review of IPMOE system was conducted in 2015-16 to evaluate the implementation of the IPMOE system and to validate its achievement on the expected outcomes, including minimising medication errors and improving efficiency of clinical care process. Summary of the interim review is as follows –

Target	Outcome
Minimise medication error	
Known drug allergy	Reduced by around 40%
Near misses	Reduced by 40%
Transcription error	Reduced by 100%
Effective alert messages	More than 60% system alerts were accepted
Improve efficiency of clinical care process	
Drug turnaround time in pharmacy	Reduced up to 36%
Eliminate transcription and fax tasks	Reduced by 100%
Improve communication with real	Overall 86% satisfied (including
time update & status tracking	doctors, nurses & pharmacists)
Use less paper in hospitals	Saved around 1.6 million sheets of paper in seven acute hospitals for around 5.6 million prescription orders in 2015-16

## (c) information on the workflow of drug prescribing and the relevant monitoring mechanism under HA's medication order entry system for outpatients

4. The Outpatient Medication Order Entry ("OPMOE") system has been implemented in HA hospitals for more than 20 years. It supports the prescription of drugs by doctors, and medication vetting and dispensing by pharmacists for outpatients and discharged patients. Since the need for handwritten prescriptions is minimised, errors associated with transcribing prescriptions and time lag in drug dispensing can be avoided. In addition, the system provides immense support for computerised clinical decision making through timely alerts and warning messages on patients' drug allergy, duplication of drugs and drug-drug interactions, etc. Currently, HA's Medication Orders and Decision Support Work Group reviews and monitors the on-going system enhancements to meet service requirements in delivering quality patient care, and the IPMOE system is developed on the foundation and experiences of the implementation of the OPMOE with a view to improving the medication use processes in the inpatient setting.

Yours sincerely,

(Clarissa Wan) for Secretary for Food and Health

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