



Pioneer Integrated Palliative Hospice Care System (iPAHCs)

**The Society for the Promotion of
Hospice Care**



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Society for the Promotion of Hospice Care



SPHC Tools

About Us

- The Society for the Promotion of Hospice Care (SPHC), established in 1986, is a non-profit charity organisation without government subvention.
- SPHC operates the Jockey Club Home for Hospice, a 30-bed hospice facility in Shatin, and a bereavement service centre at Lai Kok Estate.



Society for the Promotion of Hospice Care

服務單位
Service Centres



賽馬會善寧之家 (JCHH)
Jockey Club Home for Hospice

總部 | 紓緩服務中心及院舍
Headquarters | Hospice Care Home



譚雅士杜佩珍安家舍
Jessie and Thomas Tam Centre

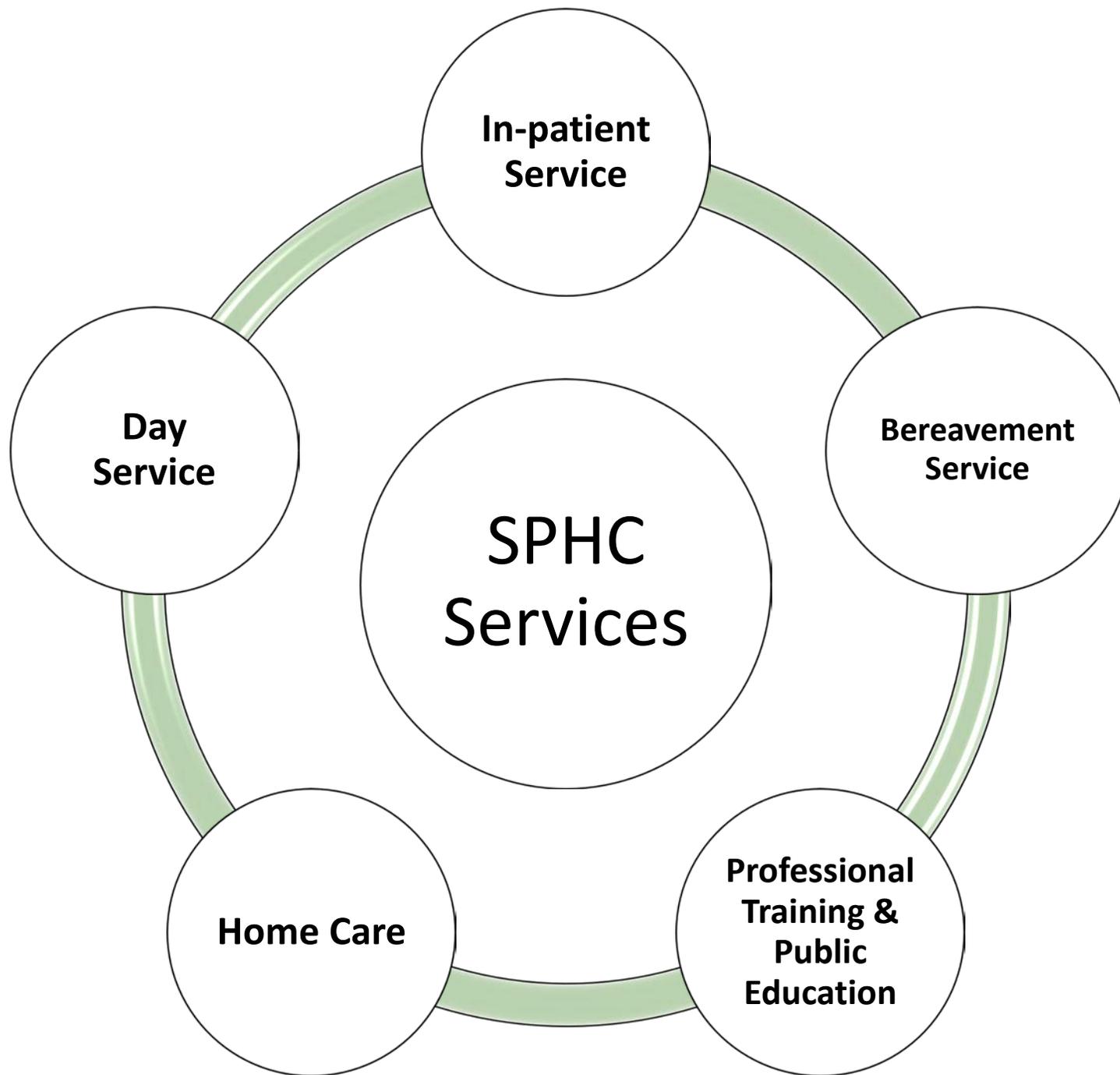
社區哀傷支援輔導中心
Community Bereavement Support Centre

🏠 九龍長沙灣麗閣邨麗蘭樓316至318室
Room 316 - 318, Lai Lan House, Lai Kok
Estate, Cheung Sha Wan, Kowloon

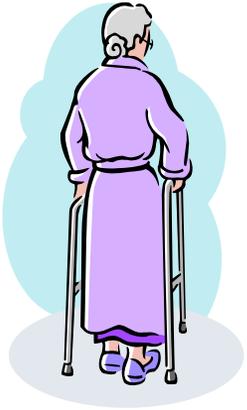


The Society for the
Promotion of Hospice Care

天為生命定壽元 人為生命賦意義
When days cannot be added to life, add life to days



Pain points :



- Medical and healthcare professionals could not make real-time retrieval and updates on the medical records at site
- Patients and carers could not perform self-assessment and monitor the vital signs at home
- Low efficiency and quality of service delivered to the terminally ill patients who stay at home and hospice inpatient setting
- The patient information in home care & inpatient is not integrated

Background

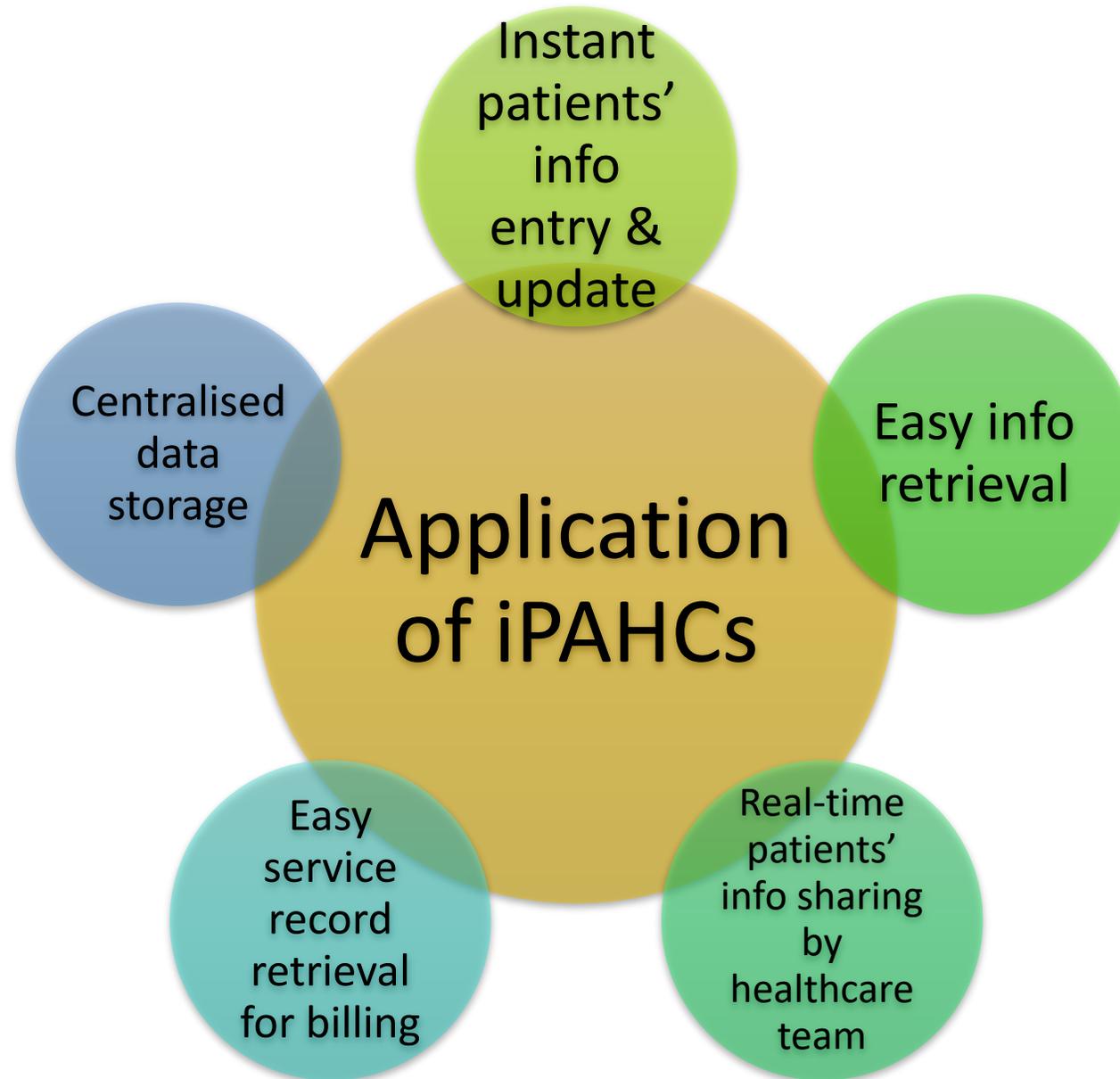
Funding from the Innovation and Technology Fund* for Better Living from 1 April 2018 to 31 March 2021 to develop an integrated healthcare system with **web portal**, **mobile app** and software providing palliative and hospice care service.

**It is a scheme for funding innovation and technology projects which make people's daily living more convenient, comfortable and safer, or address the needs of specific community groups*

Project Objectives

- To enhance the efficiency and quality of service delivered to the terminally ill patients who stay at home and hospice inpatient setting
- To enable patients and carers to perform self-assessment and monitor the vital signs at home
- To allow medical and healthcare professionals to make real-time retrieval and updates on the medical records
- To foster the development of the local palliative and hospice care

Target Beneficiaries: Terminally-ill patients and their carers



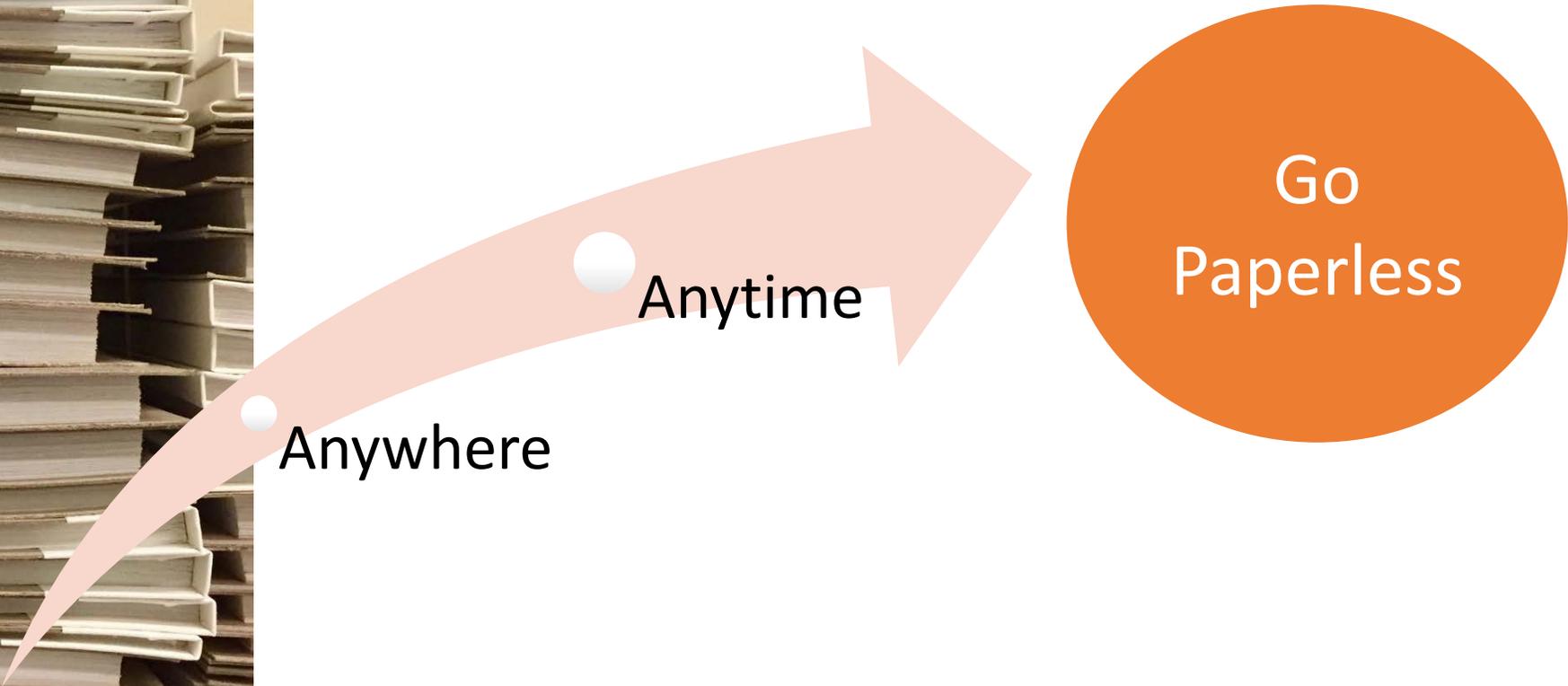
Milestones





Bulky
Paper Base

Phase 1: Home care



Anywhere

Anytime

Go
Paperless

Paper documentation replaced by iPAHCs

Initial Assessment Form

Patient Symptom Assessment Form

Integrated Progress Sheet

Drug Record



iPAHC Dev

Patient No: [REDACTED]
Pt. Name: [REDACTED]
HKID No: [REDACTED]
Sex / Age: Male / 67
DOB: 03/01/1956 Exit

Search...

MAIN NAVIGATION

- Homecare**
- Patient Summary
- Novel Coronavirus Checklist
- Service Record - Covering note
- Palliative Care Consultative Services
- Patient Distress Assessment Form
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- Medical Consultation
- Letters
- RCP Checklist
- Attachment

Homecare Patient Summary

Homecare > Patient Summary

[Print Gum Label](#) (H01)

[Print QRCode](#)

Case Status:

Related record (Case Intake):
Created On: 07/07/2020
Created On: 06/09/2021

Related record (Homecare):

- 21-0450-263P(H01) Created On: 06/09/2021 [Print Gum Label](#)
- 18-0344-263P(H01) Created On: 26/11/2018 [Print Gum Label](#)
- 20-0210-263P(H01) Created On: 07/07/2020 [Print Gum Label](#)

Related record (In-patient):

- 21-0450-263P(A01) Created On: 08/09/2021 [Print Gum Label](#)
- 20-0210-263P(A01) Created On: 17/09/2020 [Print Gum Label](#)

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SPHC Tools

Mobile App



Patient No: [REDACTED]

Pt. Name: [REDACTED]

HKID No: [REDACTED]

Sex / Age: Male / 67

DOB: 03/01/1956

Exit

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Homecare Patient Summary

Homecare > Patient Summary

[Print Gum Label](#) (H01)

[Print QRCode](#)

Case Status:

[Homecare](#) [Inpatient](#) [Closed \(Decline/Decease\)](#)

Related record (Case Intake):

Created On: 07/07/2020

Created On: 06/09/2021

Related record (Homecare):

21-0450-263P(H01) Created On: 06/09/2021 [Print Gum Label](#)

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21-0450-263P(A01) Created On: 08/09/2021 [Print Gum Label](#)

20-0210-263P(A01) Created On: 17/09/2020 [Print Gum Label](#)

Web Portal

iPAHC Dev

Patient No: [REDACTED]
 Pt. Name: [REDACTED]
 HKID No: [REDACTED]
 Sex / Age: Male / 67
 DOB: 03/01/1956

Homecare > Patient Symptom Assessment Form

Patient Symptom Assessment Form

+ Add

Symptoms (0-10)	Date
1. Pain	4
2. Shortness of breath	2
3. Tiredness	7
4. Anorexia	9
5. Nausea/vomiting	0
6. Constipation	5
7. Limb oedema	5
8. Itchiness	0
9. Anxiety	0
10. Depressed mood	3
11. Insomnia	2
12. Drowsiness	0
13. Confusion / delirium	0
14. Choking	0
15. Others	0
16. Others	0
Rated by (Patient / Relative / Staff)	Staff
PPS (0-100)	40
Staff	jackytong

07/07/2020

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iPAHC Dev

Patient No: [REDACTED]
 Pt. Name: [REDACTED]
 HKID No: [REDACTED]
 Sex / Age: Male / 67
 DOB: 03/01/1956

Homecare > Initial Assessment Form

Initial Assessment Form

Homecare

Patient Information | Part 1: Physical Assessment | Part 2: Social Assessment - Family Tree | Part 2: Social Assessment - History of Present Illness | Part 3: Psychological Assessment | Part 4: Spiritual Assessment | Part 5: Family Assessment | Reference: Palliative Care

Reference: Norton Pressure Score Risk Assessment Scale Scoring System

Patient like to be called: [REDACTED] Referring date: 03/07/2020

Medical diagnosis:

6/19 : Lt PCN done
 11/2019 :Lt JJ stent done.
 Jun-2020 : ascitis tapping done. Refer hospice.
 6/7/2020 : FU day clinic in CMC, abdominal tapping done then discharge.

Current complaint:

back pain, anorexia, LL limb oedema, jaundice, constipation

Baseline Parameters

BP	74	/	45	mm Hg	P	86	/min
Temp	36.6	°C					
PPS	40	%	Norton score	NA	Histix	NA	n
RR	20	/min					
SpO ₂	99	%	on room air	/	O ₂		L/min*

Submit and Next Tab

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 Pt. Name: [REDACTED]
 HKID No: [REDACTED]
 Sex / Age: Male / 67
 DOB: 03/01/1956

Homecare > Integrated Progress Sheet

+ Insert Content 20/07/2020 ~

22/07/2020 08:53 HC Nurse Jacky Tong

Last modified by : 15:Jacky Tong on 22/07/2020 08:53

Content

patient passed away in JCHH on 21/7/2020 peacefully. Family acceptance.

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iPAHC Dev

Patient No: [REDACTED]
 Pt. Name: [REDACTED]
 HKID No: [REDACTED]
 Sex / Age: Male / 67
 DOB: 03/01/1956

Homecare > Drug Record (For Homecare)

+Add New Drug Record -- Please select date --

*如要 Copy Prescription, 煩請複製後才加藥!

After modifying/adding drug, PLEASE click "SAVE" button to save the prescription before printing!!

Prescription Date: Created By:

Diagnosis

Drug Allergy

Print Label	Drug Name	Dosage	Route	Frequency	Source	Duration	Remarks
All <input checked="" type="checkbox"/>							

Add Item Save

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Palliative & Hospice Care

OPD

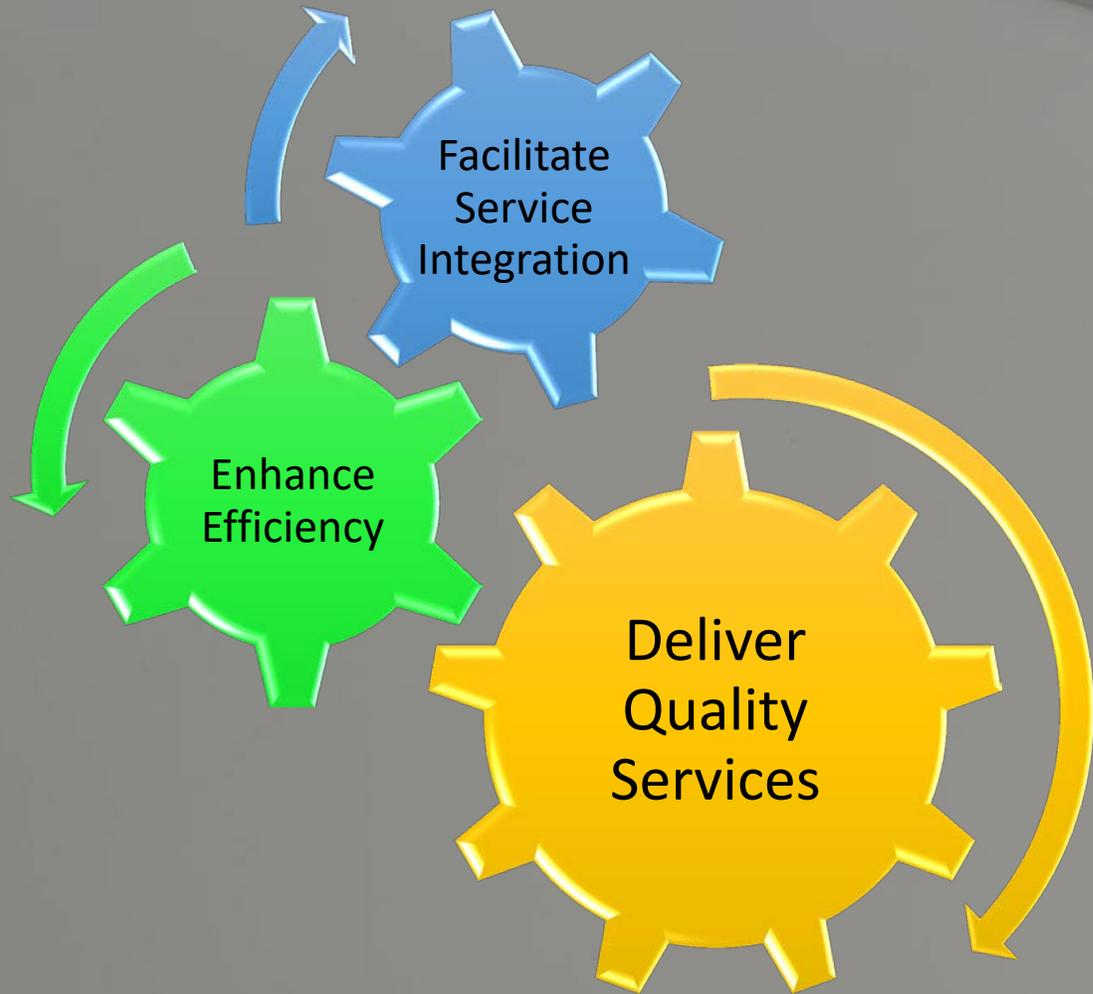
In-patient service

Admin support

Catering service

Dispensary service

Phase 2: OPD & In-patient service



Phase 2: OPD & In-patient service

OPD & In-patient Service

Medical
Consultation
Notes

Drug
Prescription

Medical
Referrals

Nursing
Procedure
Record

IPAHC Dev

Patient No: [REDACTED]
Pt. Name: [REDACTED]
HKID No: [REDACTED]
Sex / Age: Female / 98
DOB: 14/07/1924

Medical Consultation

Homecare > Medical Consultation

+ Add blank form -- Please Edit

Date*
Date of consultation

Form Type

- Admission
- Day Consultation
- Home Visit
- Telecare

Physician
Physician

Source of referral / admission
Source of referral / admission

People to be seen with patient
People to be seen with patient

Social history
Social history

Diagnosis and past medical history
Diagnosis and past medical history

Reasons for referral

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IPAHC Dev

Patient No: [REDACTED]
Pt. Name: [REDACTED]
HKID No: [REDACTED]
Sex / Age: Male / 80
DOB: 18/04/1942

Prescription Sheet

Homecare > Prescription Sheet

+Add New Prescription -- Please select date --

*如要 Copy Prescription, 煩請複製後才加藥!

After modifying/adding drug, PLEASE click "SAVE" button to save the prescription before printing!!

Type:

- Medical Consultation
- Discharge
- Prescribe Only

Prescription Date:
Date

Drug Allergy
Drug Allergy

Copy Drug record from Home care nurse: No drug record data Paste

Prescription

Items	Drug Name	Dosage	Route	Frequency	Duration	Follow Up
Add Item						

Email prescription sheet to Home Care Nurse & Pharmacist staffs

Created by: [REDACTED] Date: [REDACTED]

Last modified by: [REDACTED] Date: [REDACTED]

Save

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IPAHC Dev

Patient No: [REDACTED]
Pt. Name: [REDACTED]
HKID No: C458000(0)
Sex / Age: Male / 80
DOB: 18/04/1942

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Letters

Homecare > Letters

-- Please + Add -- Please Edit

Date*

Title

Letter Content

Paragraph B I

POWERED BY TINY

Last modified by: Date:



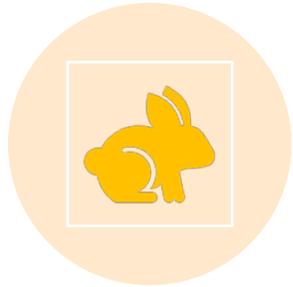


Admin & Catering Service

Room
Assignment
System

Meal Ordering

Room Assignment System



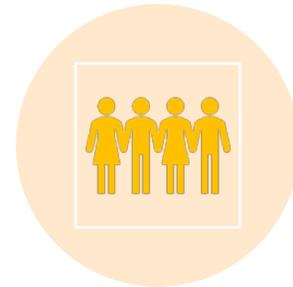
Fast



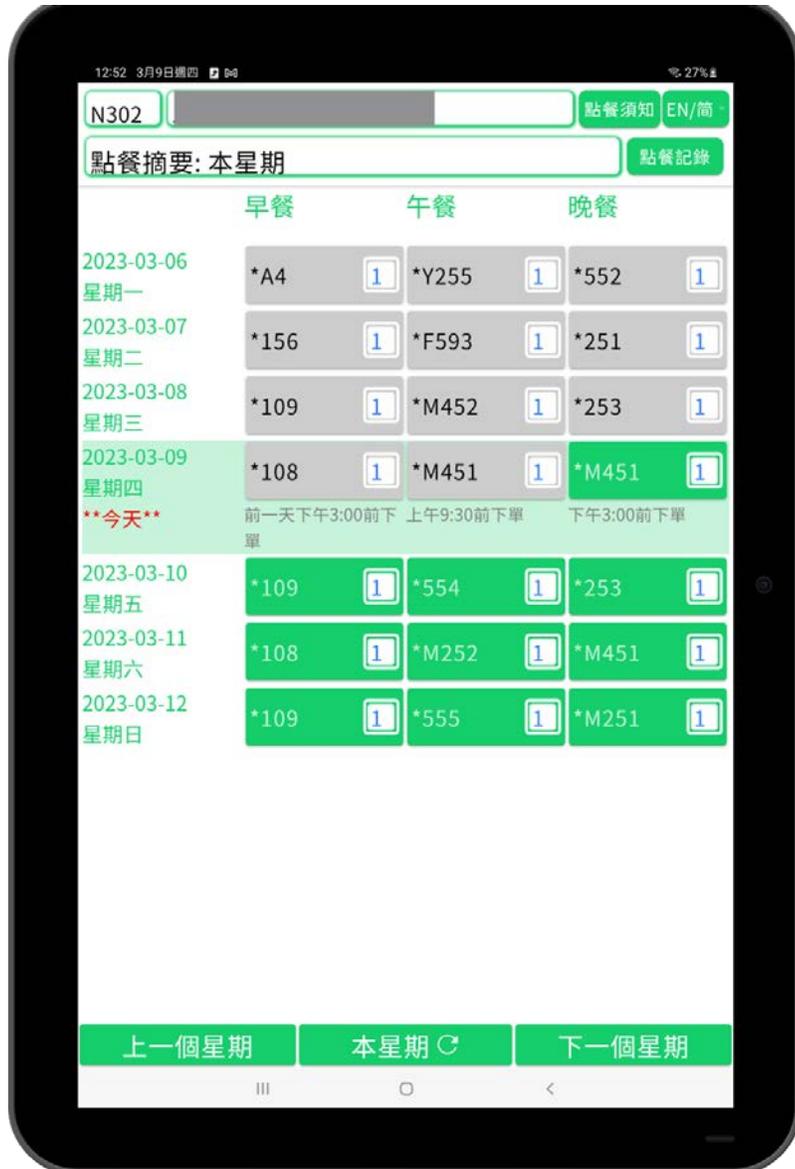
Easy to adjust



Easy to make
alteration



Easily accessible by
multidisciplinary
team members



Meal ordering on Tablet by patients' family

- User friendly
- Easy to make alteration
- Accurate
- Reduce manual work and paper
- Better meal display
- Easy to update

Dispensary Service

- Drug procurement
(quantity / price / expiry)
- Drug label system for HC /
discharged patients
- Billing for drug prescriptions



Demo

- <https://demo.hospicecare.org.hk/DynamicWebStart/login>

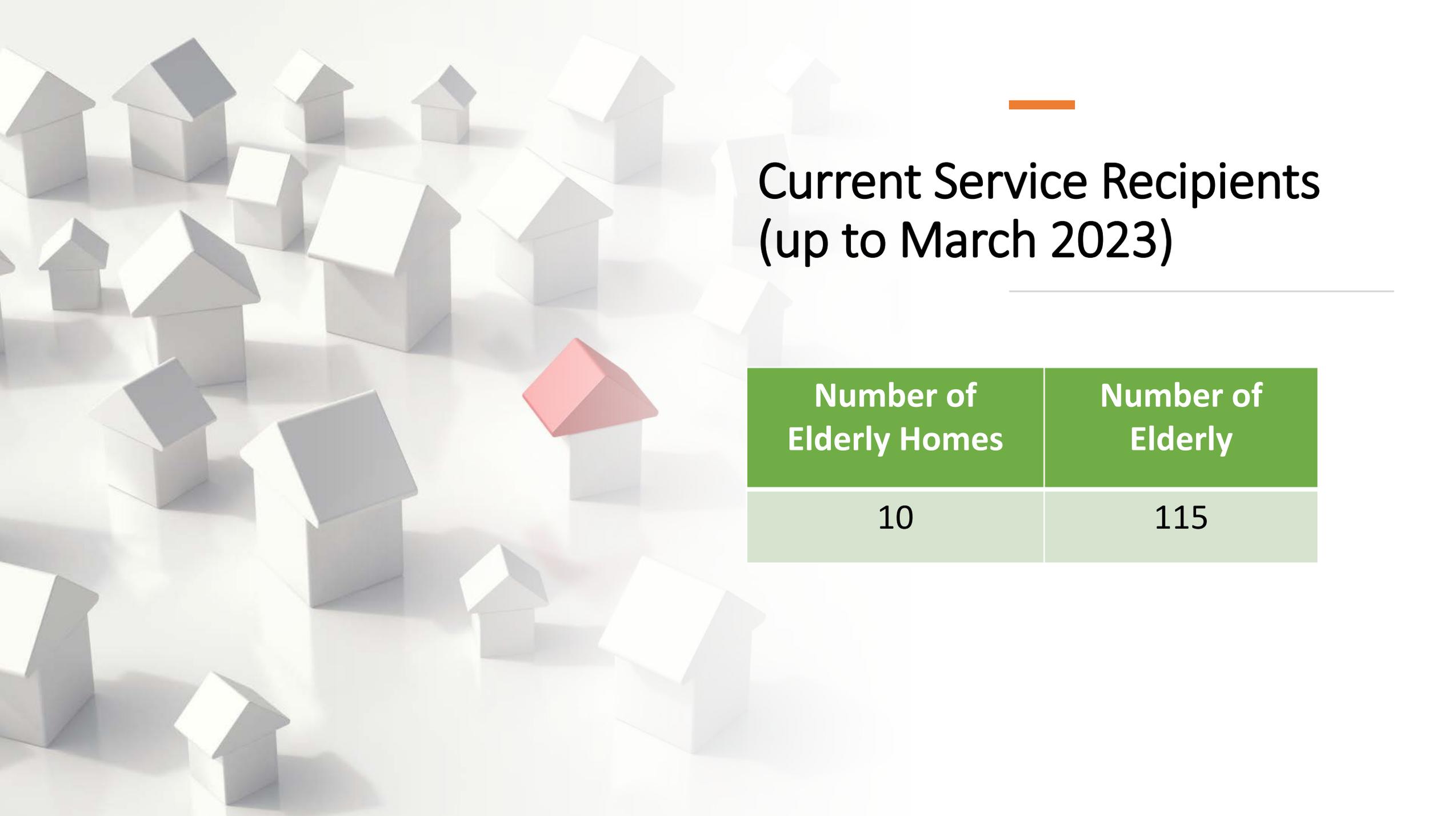


Phase 3: Outreach Service (elderly homes)

User friendly

Initiate service registration

Enhance collaboration with elderly homes



—

Current Service Recipients (up to March 2023)

Number of Elderly Homes	Number of Elderly
10	115

ChatGPT's response to Hospice Care:

- Taking care of a dying patient requires compassion, understanding, and a range of skills to help manage their physical, emotional, and spiritual needs. Here are some general guidelines for caring for a terminally ill patient:
- **1. Comfort and pain management:**
 - Work closely with the patient's healthcare team to manage pain and other uncomfortable symptoms. This may include medications, positioning, or complementary therapies, such as massage or aromatherapy.
 - Keep the patient clean, dry, and comfortable. Regularly change their bedding, clothing, and position to prevent bedsores and maintain hygiene.
- **2. Emotional support:**
 - Be present and listen actively. Allow the patient to express their feelings, fears, and emotions without judgment or offering unsolicited advice.
 - Encourage open communication between the patient, family members, and healthcare professionals to ensure everyone is on the same page regarding the patient's wishes and care plan.
 - Provide reassurance and validate the patient's feelings, acknowledging the emotional challenges they may be experiencing.
- **3. Spiritual care:**
 - Encourage the patient to explore their spiritual beliefs and needs, if they're open to discussing it. This may involve prayer, meditation, or conversations about the meaning of life and death.
 - If desired, facilitate visits from spiritual advisors, such as a chaplain, priest, or other religious leaders.
- **4. Practical support:**
 - Assist with daily tasks, such as bathing, dressing, and eating, as needed. This can help maintain the patient's dignity and quality of life.
 - Coordinate with the healthcare team to manage medications, appointments, and any necessary medical equipment, such as a hospital bed or oxygen supply.
- **5. Create a comfortable environment:**
 - Keep the patient's room clean, well-lit, and at a comfortable temperature. Use soft blankets, pillows, and calming colors to promote relaxation.
 - Play soft music, display photographs or artwork, and use soothing scents to create a peaceful atmosphere.
- **6. Engage in meaningful activities:**
 - Encourage the patient to engage in activities they enjoy or find meaningful, such as reading, watching movies, or spending time with loved ones, as they're able.
 - Offer to help the patient create a legacy project, such as writing letters to loved ones or recording their life stories, if they're interested.
- **7. Support the patient's autonomy:**
 - Respect the patient's right to make decisions about their care, even if you don't agree with those choices. This may include decisions about medical treatments, end-of-life care, or funeral arrangements.
- **8. Self-care for caregivers:**
 - Remember to care for yourself, too. Caring for a dying patient can be emotionally and physically draining. Make sure to take breaks, ask for help when needed, and seek support from friends, family,



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Society for the Promotion of Hospice Care

Thank You