

FACTORS AFFECTING THE DELAY IN MANAGEMENT OF CASES IN THE EMERGENCY DEPARTMENT, NATIONAL UNIVERSITY HOSPITAL, KUALA LUMPUR, 1999

FAKTOR-FAKTOR YANG MEMPENGARUHINYA KELEWATAN PENYELESAIAN KES DI JABATAN KECEMASAN HOSPITAL UKM

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ABSTRACT

A cross-sectional study using qualitative and quantitative method was carried out in the Emergency Department at the National University Hospital, Kuala Lumpur between 1st to 26th June 1999, to study the factors that affect the delay in the management of cases in the Emergency Department. Qualitative method involving in-depth interviews with different categories of staff of the Emergency Department was used to find out problems faced by them in the management of patients and also to study predisposing factors in the management that may lead to delay. Quantitative method was carried out using semi-structured questionnaire on patients and a time-keeping form attached with each questionnaire to note the total length of stay and times spent by patients at different stations in the Emergency Department. The time spent was traced retrospectively at the end of the survey, in order to determine any delays in the management of cases. Results of quantitative survey showed that the majority of delayed cases was seen in triage 2 patients (71%) compared to 42% delay in triage 3 and 35% delay in triage 4 ($p < 0.001$). Patients who attended the Emergency Department on a working day are more likely to be delayed (49.6%) compared to 23% delay in patients who came on a holiday ($p < 0.001$). Patients who came to the department during office hours were much more delayed (55.6%), compared to 33.5% delay in those who came after office hours ($p < 0.001$). Patients who were subjected to diagnostic investigations were significantly more delayed compared to those not needing investigations. Patients who were admitted were significantly more delayed compared to those allowed to go home. Patients referred to specialists were also found to be significantly more delayed than those not referred to specialists. Qualitative survey revealed the problem of lack of staff to manage cases, inappropriate utilisation by non-emergency cases due to the absence of an outpatient department in the hospital and communication problem between doctors and patients due to the employment of foreign doctors.

ABSTRAK

Satu kajian irisan lintang dengan menggunakan kaedah kualitatif dan kuantitatif telah dijalankan di Jabatan Kecemasan Hospital Universiti Kebangsaan Malaysia, untuk mengkaji faktor-faktor yang mempengaruhi kelewatan dalam penyelesaian kes di jabatan tersebut. Kaedah kualitatif melibatkan temu bual mendalam dengan kakitangan Jabatan Kecemasan untuk mengkaji masalah yang mereka hadapi dalam menguruskan pesakit. Ia juga untuk mengkaji sama ada terdapat masalah dalam pihak pengurusan jabatan tersebut yang menyebabkan kelewatan dalam penyelesaian kes. Kaedah kuantitatif menggunakan soal-selidik berpandu bagi pesakit yang hadir ke Jabatan Kecemasan dan juga borang catatan waktu bagi setiap kes yang dikaji untuk mengesan secara retrospektif tempoh masa yang dilalui oleh setiap responden. Hasil kajian kuantitatif mendapati bahawa kelewatan dalam penyelesaian kes lebih banyak didapati di kalangan responden dari triaj 2 (71%), berbanding (42%) triaj 3 dan (35%) triaj 4 ($p < 0.001$). Pesakit yang datang pada hari bekerja lebih lewat diselesaikan (49.6%) berbanding 23% kelewatan lagi pesakit yang datang pada hari cuti ($p < 0.001$). Bagi pesakit yang datang pada waktu pejabat, 55.6% lewat diselesaikan berbanding 33.5% yang lewat pada waktu lepas pejabat ($p < 0.001$). Pesakit yang memerlukan penyiasatan diagnostik dan rujukan pakar lebih lewat diselesaikan berbanding pesakit yang tidak memerlukan siasatan lanjut ($p < 0.05$). Pesakit yang dimasukkan ke wad lebih kerap lewat selesai (67.3%) berbanding pesakit yang dibenarkan pulang ($p < 0.001$). Di antara waktu-waktu menunggu yang dikaji, kelewatan paling tinggi didapati di kalangan kes yang perlu dirujuk untuk pemeriksaan doktor pakar. Hasil kajian kualitatif mendapati bahawa terdapat masalah kekurangan kakitangan, banyak kes bukan-kecemasan yang membanjiri jabatan ini untuk mendapatkan rawatan dan juga masalah komunikasi antara pesakit dengan doktor kerana pengambilan doktor asing.