

Computer screening could help patients and healthcare

April 23 2014, by David Ellis

A trial of a new patient care model, which uses over-the-phone consultations and computers to help better understand the needs of the patient, has begun this week, led by researchers at the University of Adelaide.

The new model, known as Computer Health Assessment by Telephone (CHAT), aims to reduce the need for patients waiting for surgery to travel to outpatients clinics, while also providing a more consistent level of care.

"With CHAT, surgery patients will have an initial 20-minute consultation over the phone with a non-clinical but trained healthcare worker," says the leader of the project, Professor Guy Ludbrook, Head of Acute Care Medicine at the University of Adelaide and a Specialist Anaesthetist at the Royal Adelaide Hospital.

"Information provided by the patient is derived using a clinically proven questionnaire and entered into a computer database, which helps to determine the comprehensive needs of the patient, including any risks to their health. A detailed analysis is then sent to anaesthetists, nurses, doctors and pharmacists for their action.

"This means that each patient is treated based on their specific needs, with a checklist approach which assists clinicians ensure their care is precise and consistent," Professor Ludbrook says.

The CHAT pre-screening model is based on a pilot study by Professor Ludbrook and colleagues at the University of Adelaide, Royal Adelaide Hospital, Royal Perth Hospital and the University of Western Australia. They studied consultations with more than 500 patients scheduled for elective surgery and found that the quality of assessment provided by a non-clinician telephone interview was comparable to a face-to-face interview by trained anaesthetists, and often more comprehensive.

"Studies indicate that [hospital](#) visits can be more streamlined, with reduced waiting and consultation times when this type of computer support is available. In the future, around 50-90% of patients won't need to spend time travelling to an outpatient clinic and waiting for consultation if they really don't need to," Professor Ludbrook says.

"Those patients who have complex needs will of course require a face-to-face assessment. However, knowledge of their circumstances and medical conditions before admission allows us to develop options, such as patients receiving prescriptions at home, having blood tests in their local neighbourhood, and even referral to a hospital that has particular expertise for their condition.

"This reduces the burden on outpatient clinics, and eases the stress and waiting time for [patients](#) themselves," he says. "CHAT could also contribute to significant savings for the health budget."

The new trial has begun at the Royal Adelaide Hospital this week, with support from the Central Adelaide Local Health Service.

Provided by University of Adelaide

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