Introduction

- Despite many advances, women and children in Cambodia continue to suffer elevated morbidity and mortality from conditions amenable to emergency care.
- Many barriers limit access to quality emergency services, including geography, transport availability, cost of care, facility capacity and provider coverage.
- Enhancing effectiveness of the Cambodian referral system was identified as an impactful means of overcoming many of these barriers and improving timely access to emergency care.
- Interventions were created to improve each link in the chain of emergency survival.

Identification + Prioritization of Ill Patients

- Delays in care often caused by a lack of recognition of emergency conditions and failure to prioritize care of sick patients.
- Patients arrive at facilities in large groups, seen based on their order of arrival.
- Providers lacked experience in recognizing danger signs and ill patients.
- A simple, Cambodia specific triage system was initiated at referral hospitals to help providers rapidly identify and prioritize sick patients.

Referral Communication + Coordination

- Coordination of referral logistics has challenging and labor intensive.
- A communication system linking referring and receiving providers was implemented to communicate clinical data between treating providers at each level of care.
- Provincial referral hotlines were established, streamlining the referral process and facilitating real time communication between referring and receiving.
- Ambulance Patient Care Report forms were created to relay ambulance care information.

Provider Education, Quality Improvement + Feedback

- Quarterly education and feedback forums were established.
- Providers from each level of the system gathered to analyze referral data, discuss difficult cases, provide mentoring and address systems challenges.
- In-service education and skills training addressed noted gaps.
- Prehospital care training was given to previously untrained ambulance providers to enhance their transports care skills.

Conclusions

- Improvement efforts must be created based on in-depth knowledge of local practice patterns, resources, challenges, and input from end users.
- Widespread improvement requires systems based interventions, provider education and capacity building as well as regular, collaborative coaching and feedback.

References


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