

Project Title

Addressing Productivity Using Organisational Principles

Project Lead and Members

Project lead: Ng Rei Na

Project members: Cheng Guang Hao, Goh Shi Min, Lim Yuan Kang, Brenda Lee

Organisation(s) Involved

Stroke Support Station

Healthcare Family Group(s) Involved in this Project

Ancillary Care

Applicable Specialty or Discipline

Day Rehabilitation Centre (DRC)

Project Period

Start date: April 2023

Completed date: March 2024

Aims

The goal of this project is to quickly ramp up the productivity of the centre so as to ensure the business viability of this programme to the organisation.

3 measures were used :a) cost per service (ratio of direct service total expenditure to number of sessions delivered by the DRC); b) unique clients served; and c) number of sessions delivered.

Background

See poster appended/ below

Methods

See poster appended/ below

Results

See poster appended/ below

Conclusion

See poster appended/ below

Project Category

Care & Process Redesign

Quality Improvement: Clinical Practice Improvement

Productivity: Cost Saving

Keywords

STAR Model Productivity

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Addressing Productivity Using Organisational Principles Stroke Support Station

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Introduction/Background

S3's Day Rehabilitation Centre (DRC) was running on a very unproductive model. This resulted in high cost per service and contributed to poor financial sustainability for the organisation.

Direct services expenditure in FY 2022: \$1,645,468
 Number of sessions delivered in FY 2022: 5407
 Cost per service: \$304

Given the norm cost of per MOH DRC session of \$98, we were operating the DRC at a loss of \$206 per session.

If the productivity issue is not addressed quickly, the organisation will have to seriously consider winding up the DRC to ensure financial continuity of the other programs.

Goal/Objective

The goal of this project is to quickly ramp up the productivity of the centre so as to ensure the business viability of this programme to the organisation.

3 measures were used: a) cost per service (ratio of direct service total expenditure to number of sessions delivered by the DRC); b) unique clients served; and c) number of sessions delivered.

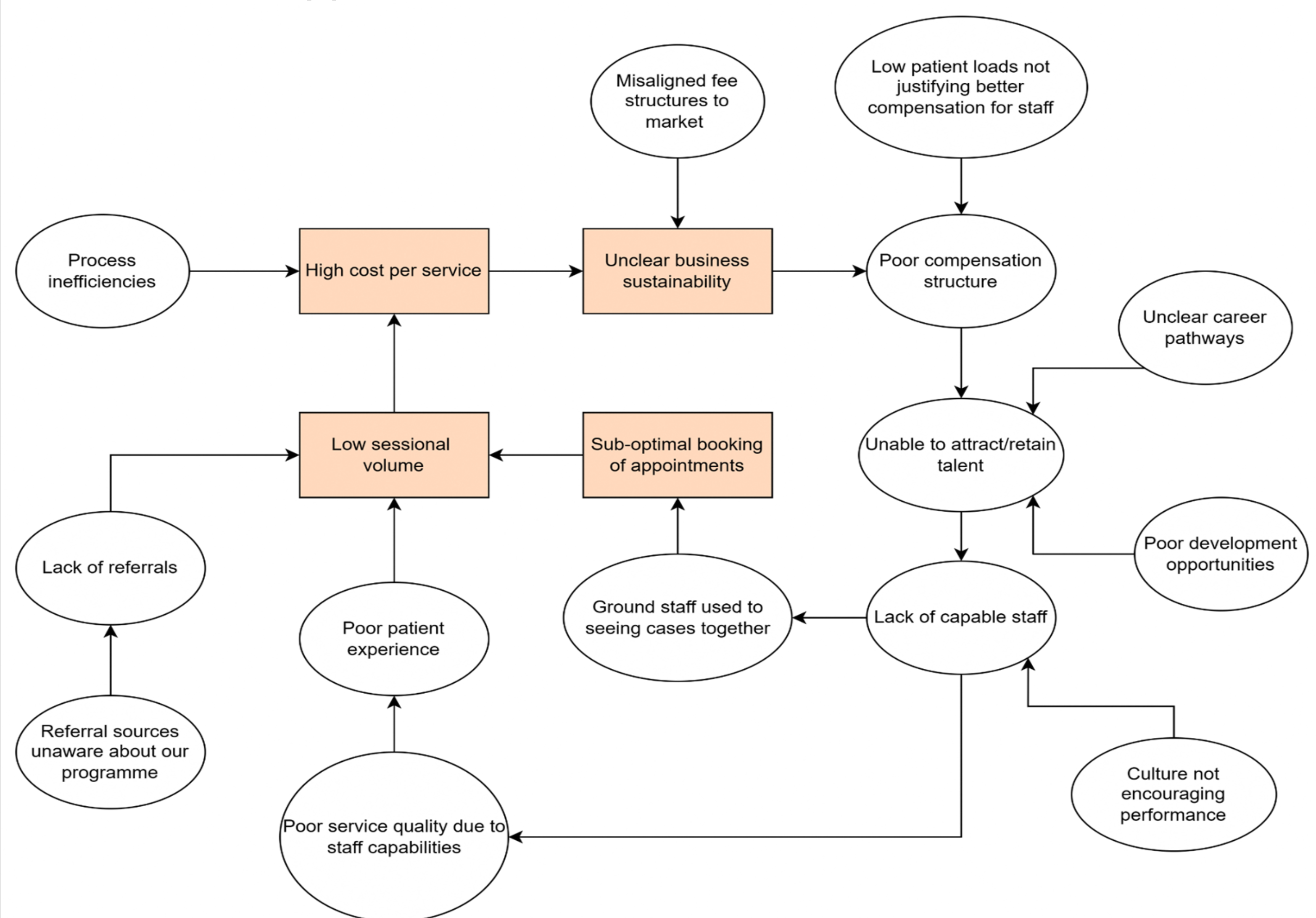
Problem Analysis

The initial analysis of the problem using 5 Whys revealed that the possible root cause was that clients were not scheduled optimally into the slots available.

“Why is there high cost per service? → Because there are not enough sessions being delivered. → Why are there not enough sessions being delivered? → Because the clients are not optimally scheduled in for sessions by the hour.”

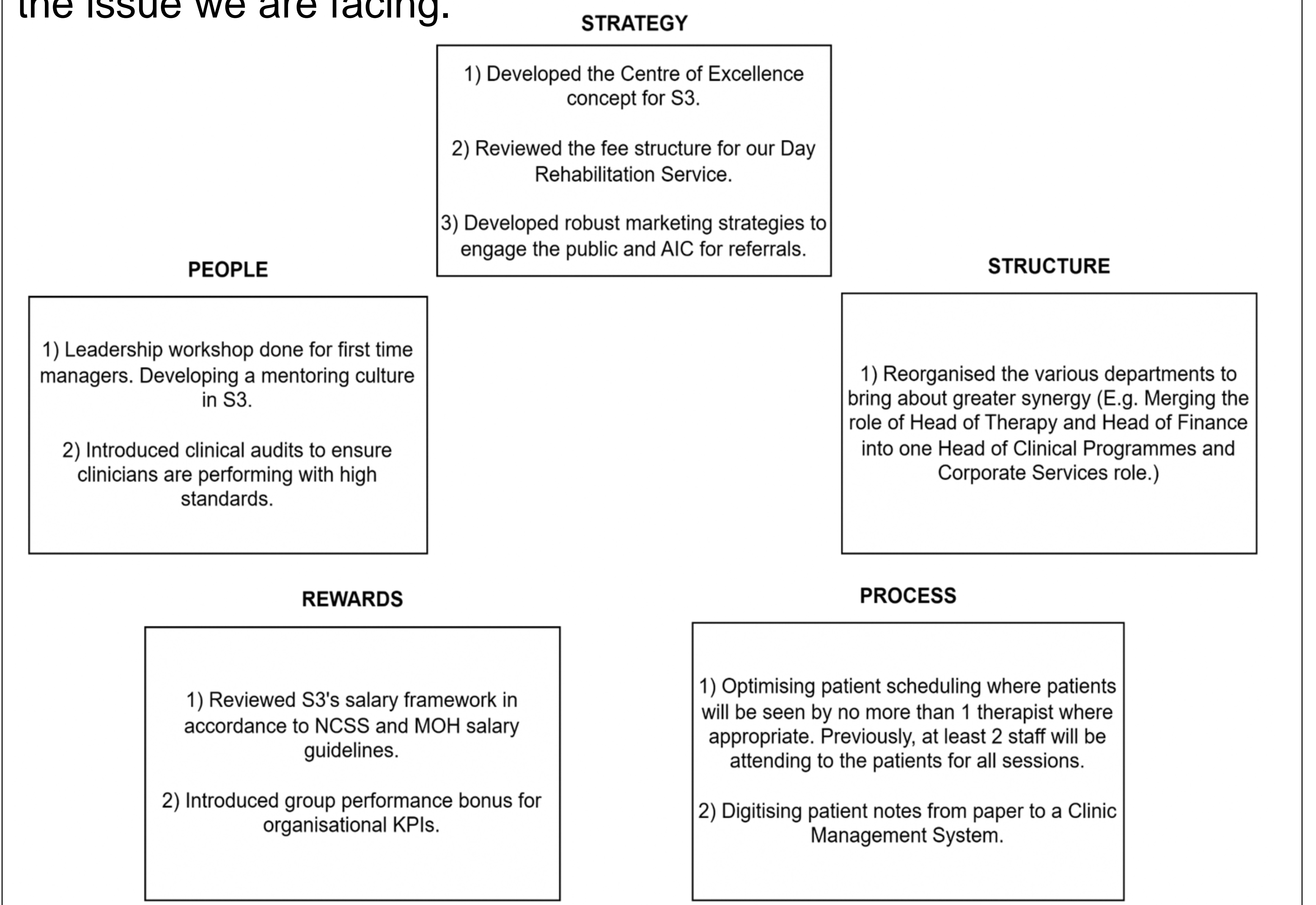
Through the above, it seems that implementing a standardised process to optimise patient scheduling will resolve the issue.

However, upon further analysis by systems mapping, it was clear that this issue is a multi dimensional problem and will require a more holistic approach to resolve the issue.



Implementation Plan

We adopted the STAR Model from Jay Galbraith to guide us in deciding the interventions we need to implement to ensure a high success of achieving our desired goal. In the STAR Model, all 5 domains need to be addressed to resolve the issue we are facing.



Benefits/Results

By implementing the interventions in the 5 domains, we saw significant improvements in our cost per service, number of unique clients, and number of total sessions at the end of FY23 (March 2024).

	Cost per Service	Improvement %
FY 2022	\$304.32	
FY 2023	\$203.81	33%

	No. of Unique Clients	Improvement %
FY 2022	166	
FY 2023	244	46.99%

	No. of Sessions	Improvement %
FY 2022	5407	
FY 2023	6255	15.68%

Sustainability & Reflections

The project's success validated the need to address complex issues by adopting a holistic approach. Although the result was significant, more needs to be done to bring our cost per service to be closer to the MOH norm cost.

There is a temptation to bring the cost per service down by simply cutting direct expenditure. However, the systems map clearly showed that a multi-dimensional approach is necessary to address the issue.

As the Organisation evolves, ongoing efforts to address and align the 5 domains in the STAR model will be necessary to see continued improvements in quality and cost effectiveness.