

Project Title

Reduce Incidence of Repeating Blood Investigations for Adrenal Incidentaloma Endocrine Workup

Project Lead and Members

Project lead: Masdiana Binte Mohamed Yusof

Project members: Tay Lee Hiang, Praveen Kaur, Jasmine Shew, Liew Yoke Fong,

Jessica Kalarani, Dr Yee Sze Men, Dr Chan Soo Ling, Adeline Tan

Organisation(s) Involved

Ng Teng Fong General Hospital

Healthcare Family Group Involved in this Project

Medical, Nursing, Healthcare Administration

Applicable Specialty or Discipline

Endocrinology

Aims

To reduce the number of patients who are required to repeat blood investigations for Adrenal Incidentaloma Workup to 0 by Sept 2019 for patients seen in A43 clinic.

Background

See poster appended/ below

Methods

See poster appended/ below

Results

See poster appended/ below



Lessons Learnt

We were able to engage and collaborate with each healthcare professionals to develop a probable solution to improve the workflow process and to reduce potential negative feedbacks.

Using the methodology on Model for Improvement, the PDSA cycle assisted us to monitor outcome and process measures before deciding the best strategy.

Conclusion

See poster appended/ below

Project Category

Care & Process Redesign

Value Based Care, Safe Care, Adherence Rate

Keywords

Adrenal Incidentaloma, Repeat Blood Investigations

Name and Email of Project Contact Person(s)

Name: Masdiana Binte Mohamed Yusof

Email: masdiana_mohamed_yusof@nuhs.edu.sg

[Restricted, Non-sensitive]

REDUCE INCIDENCE OF REPEATING BLOOD INVESTIGATIONS FOR ADRENAL INCIDENTALOMA ENDOCRINE WORKUP

MEMBERS: NC TAY LEE HIANG (SOC A43)

SSN MASDIANA BINTE MOHAMED YUSOF (SOC A43), ANC PRAVEEN KAUR (SOC A43), ANC JASMINE SHEW SEW HONG(SOC A43), SSN LIEW YOKE FONG(SOC A43), SENIOR PSA JESSICA KALARANI (SOC A43), DR YEE SZE MEN (CONSULTANT, MEDICINE, ENDOCRINOLOGY), DR CHAN SOO LING(CONSULTANT, MEDICINE, ENDOCRINOLOGY), ADELINE TAN (MANAGER, SERVICE OPERATIONS, SOC)

Define Problem, Set Aim

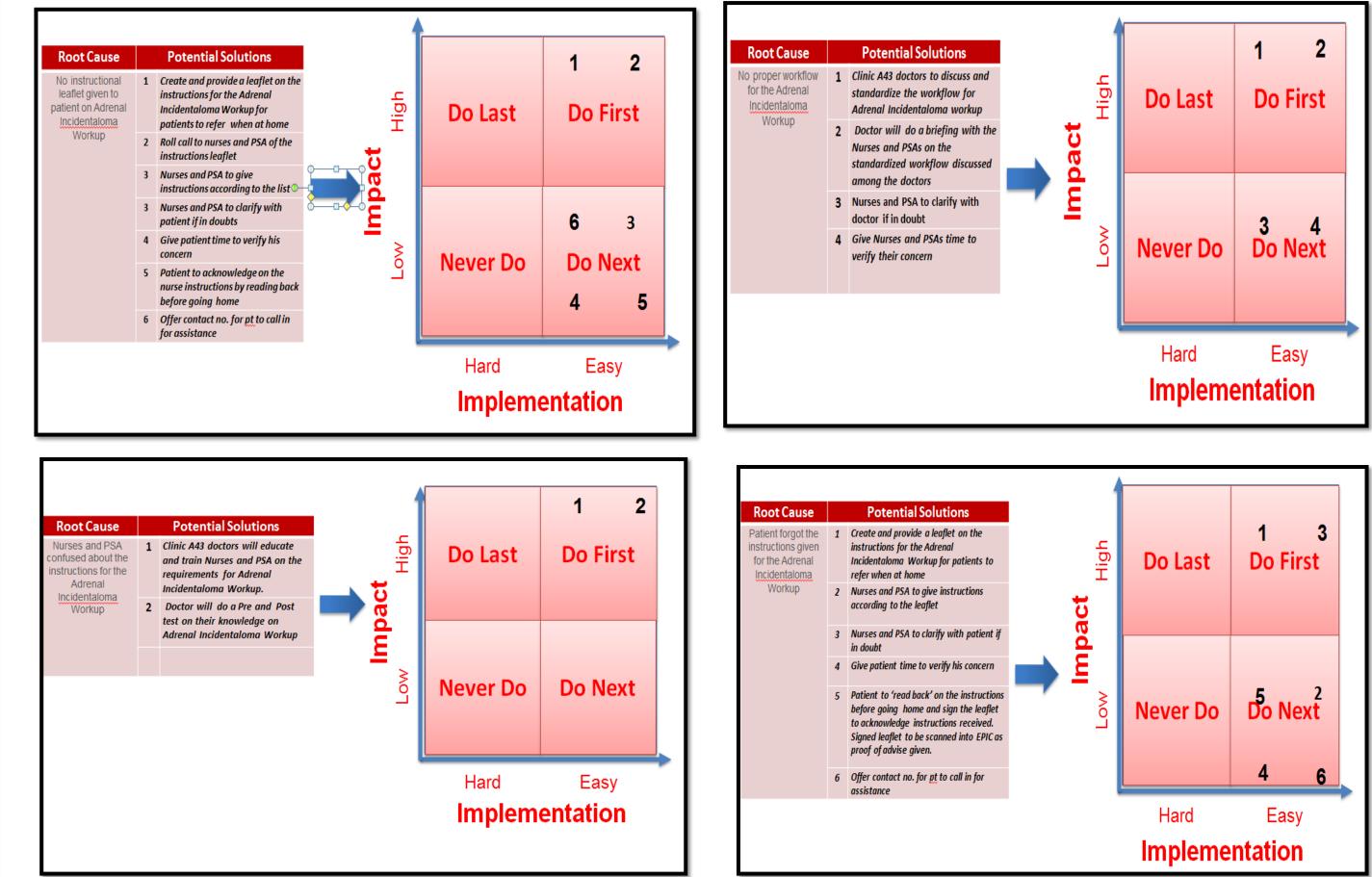
Opportunity for Improvement

In Feb 2019, we had 1 incident where patient needed to repeat the blood investigation for Adrenal Incidentaloma Workup. This has resulted in patient dissatisfaction and staff frustration as a rework was required.

PRODUCTIVITY SAFETY QUALITY COST PATIENT TEAMWORK EXPERIENCE COMMUNICATION

Select Changes

Probable solutions

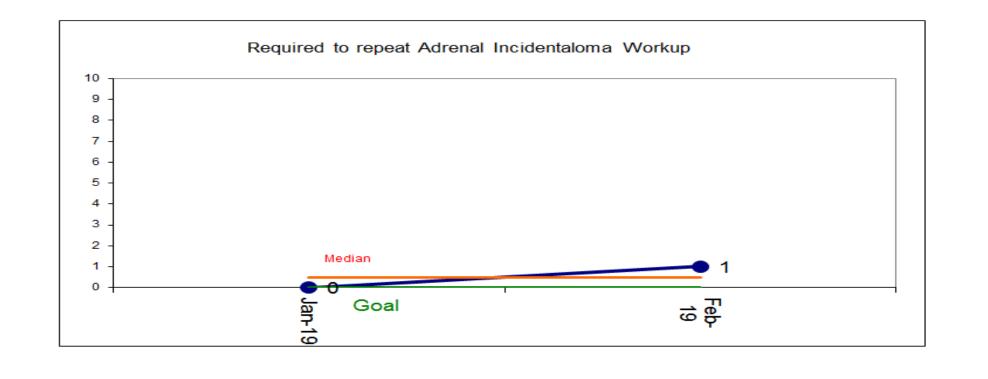


To reduce the number of patients who are required to repeat blood investigations for Adrenal Incidentaloma Workup to 0 by Sept 2019 for patients seen in Outpatient Clinic A43.

Establish Measures

OUTCOME MEASURE: NUMBER OF PATIENTS WHO ARE REQUIRED TO REPEAT BLOOD INVESTIGATIONS FOR ADRENAL INCIDENTALOMA WORKUP

Outcome Measure 1:



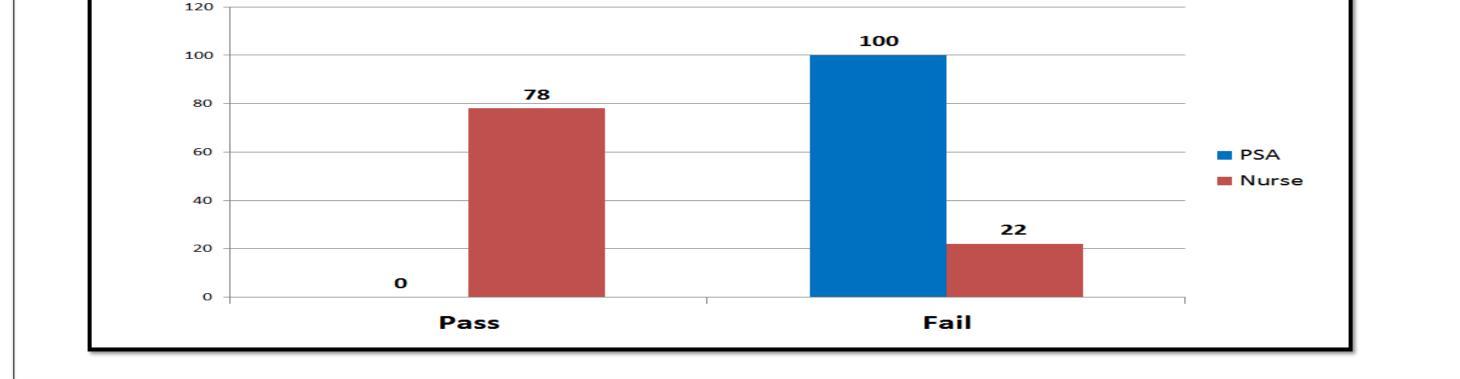
PROCESS MEASURE: PERCENTAGE OF NURSES and PSAs **PRE-KNOWLEDGE TEST**

Pre knowledge test

Test & Implement Changes

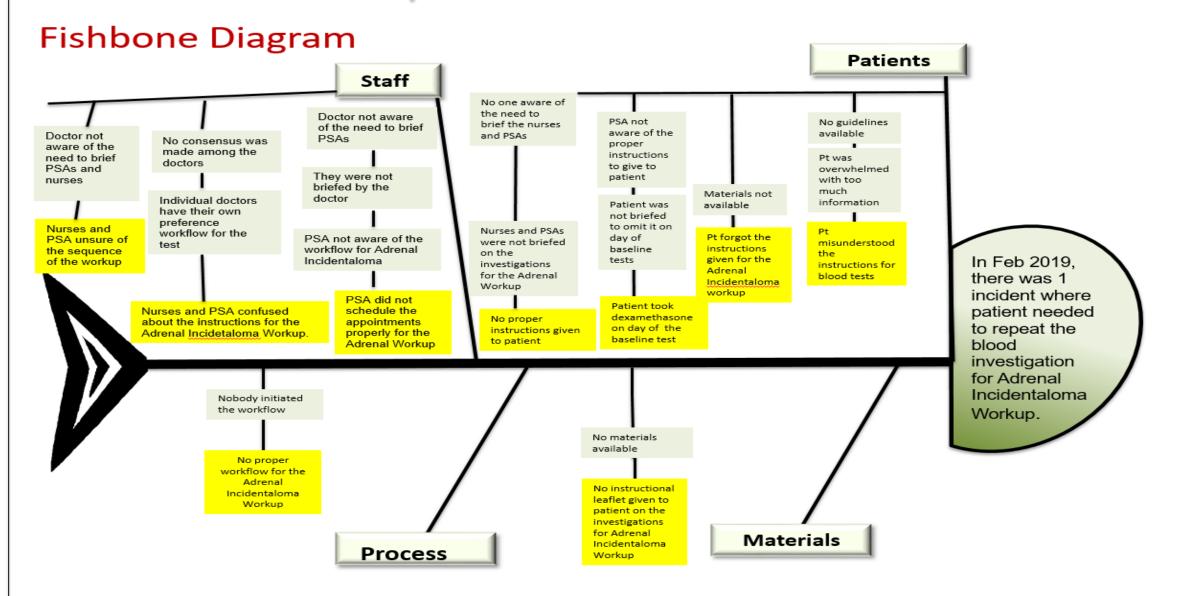
How do we pilot the changes? What are the initial results?

CYCLE	PLAN	DO	STUDY	АСТ
1	 Conduct in-service for Clinic A43 nurse and PSA on 01/03/2019 Do pre and post knowledge test for Nurses and PSAs on 01/03/2019 and do statistics of the outcome of the results Create a instructional leaflet for patient on 	 The plan was carried out for nurses and PSA from 01/03/2019 to 04/03/2019 Feedback and observations from the nurses and PSAs: Nurses and PSAs from A43 are aware of the: Guidelines to instruct patient on Adrenal Incidentaloma Workup(<u>AIW</u>). 	 Initial data collected shows: 1. The number of patient who repeated the AIW reduced from 1 patient to Q patient. 2. 100% of the nurses and PSAs passed the post knowledge 3. Upon creating an instructional leaflet on AIW, 100% of the patients 	 To <u>adopt</u> this change, and make the instructional leaflet on Adrenal Incidentaloma Workup be available in 4 different languages and make it available in the intranet for outpatient and inpatient use.



Analyze Problem

Process before improvement



Probable root causes

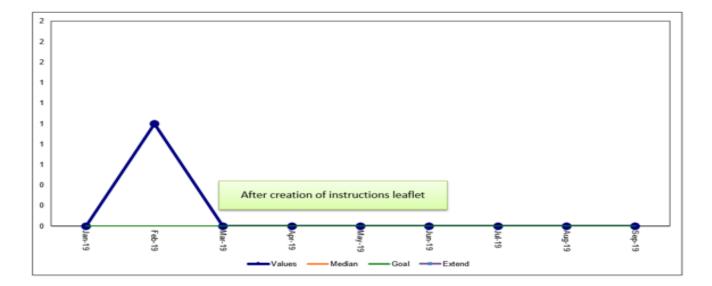
 Appointment scheduling Adrenal Incidental Workup Availability of instructions on 04/03/2019 leaflet for patient

in Clinic A43 received it from March 2019 to June 2019.

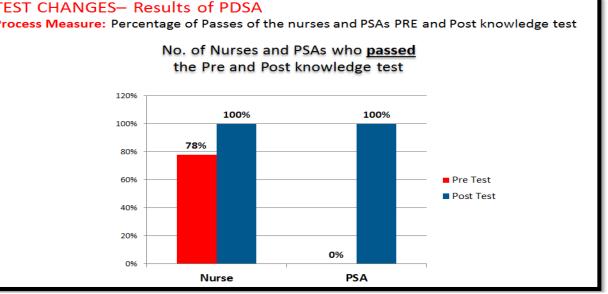
EST CHANGES— Results of PDSA

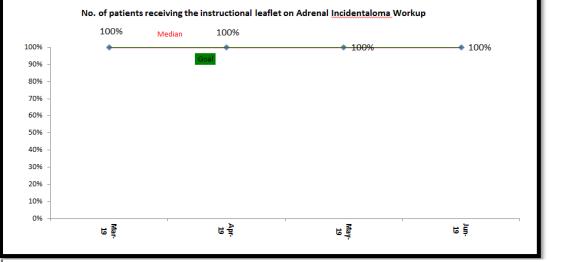
TEST CHANGES- Results of PDSA

OUTCOME MEASURE: NUMBER OF PATIENTS WHO ARE REQUIRED TO REPEAT BLOOD INVESTIGATIONS FOR ADRENAL INCIDENTALOMA WORKUP



Since the nurses and PSAs started using the instructional leaflet to instruct the patient on AIW and the patients were given a copy to bring home, there has been <u>O incidents of patients</u> requiring to repeat the AIW in Clinic A43 from March 2019 to September 2019





ROCESS MEASURE: Percentage of patients who received leaflet from nurses and PSAs from A43

After the in-service was conducted, 100% of the nurses and PSA pass their post knowledge test

120%

100%

80%

60%

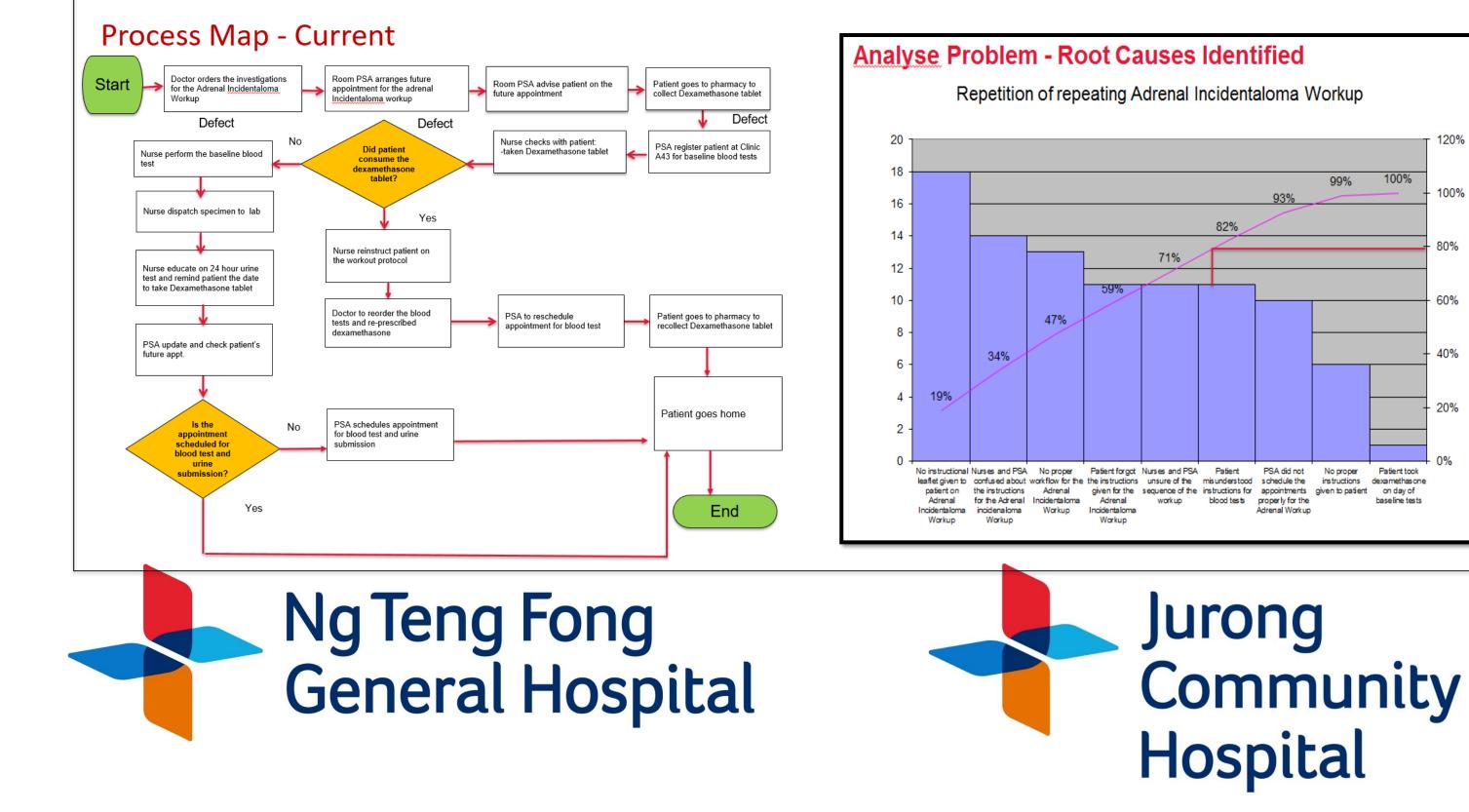
40%

20%

Upon creating an instructional leaflet on AIW, 100% of the patients in Clinic A43 received it from March 2019 to June 2019.

Spread Changes, Learning Points

In A43, we understood the challenges and the restraints faced by the patients, nurses, doctors and PSAs.



However, we were able to engage and collaborate with each healthcare professionals to develop a probable solution to improve the workflow process and to reduce potential negative feedbacks.

Using the methodology on Model for Improvement, the PDSA cycle assisted us to monitor outcome and process measures.

before deciding the best strategy. We will adopt this change and develop instructional leaflet available in four languages.

We will continue to monitor the outcome and process measures.