

CHI Learning & Development System (CHILD)

Project Title

Reduction of Waiting Time for Patients in SNEC Outpatient Clinics

Project Lead and Members

- CI A/Prof Edmund Wong
- Leonard Goh
- Jacqueline Tay
- Duke Ang
- Jackson Lai
- Irene Ng

Organisation(s) Involved

Singapore National Eye Centre

Healthcare Family Group Involved in this Project

Medical

Specialty or Discipline

Ophthalmology

Project Period

Start date: 2020

Aims

To increase patient satisfaction by aiming for at least 5% increment of patients:

- 1. Waiting ≤ 15 minutes for first evaluation (EV) and
- 2. Needing ≤ 60 minutes for tests before 1st doctor consult

Reduction in patient complaints was used as indicator of patient satisfaction

Background

See poster appended / below



CHI Learning & Development System (CHILD)

Methods

See poster appended / below

Results

See poster appended / below

Lessons Learnt

See poster appended / below

Conclusion

See poster appended / below

Additional Information

Singapore Healthcare Management (SHM) Conference 2021 – Shortlisted Project (Operations Category)

Project Category

Care & Process Redesign, Quality Improvement, Workflow Redesign, Access To Care, Waiting Time, Turnaround Time, Value Based Care, Patient Satisfaction, Productivity, Care Continuum, Outpatient Care, Specialist Outpatient Clinics

Keywords

Complaints, Root Cause Analysis, Priority Matrix

Name and Email of Project Contact Person(s)

Name: CI A/Prof Edmund Wong

Email: singaporehealthcaremanagement@singhealth.com.sg

Reduction of Waiting Time for Patients in SNEC Outpatient Clinics

Singapore Healthcare Management 2021

CI A/Prof Edmund Wong Leonard Goh, Jacqueline Tay Duke Ang, Jackson Lai, Irene Ng



Clinical Services Department, SNEC

1. Introduction

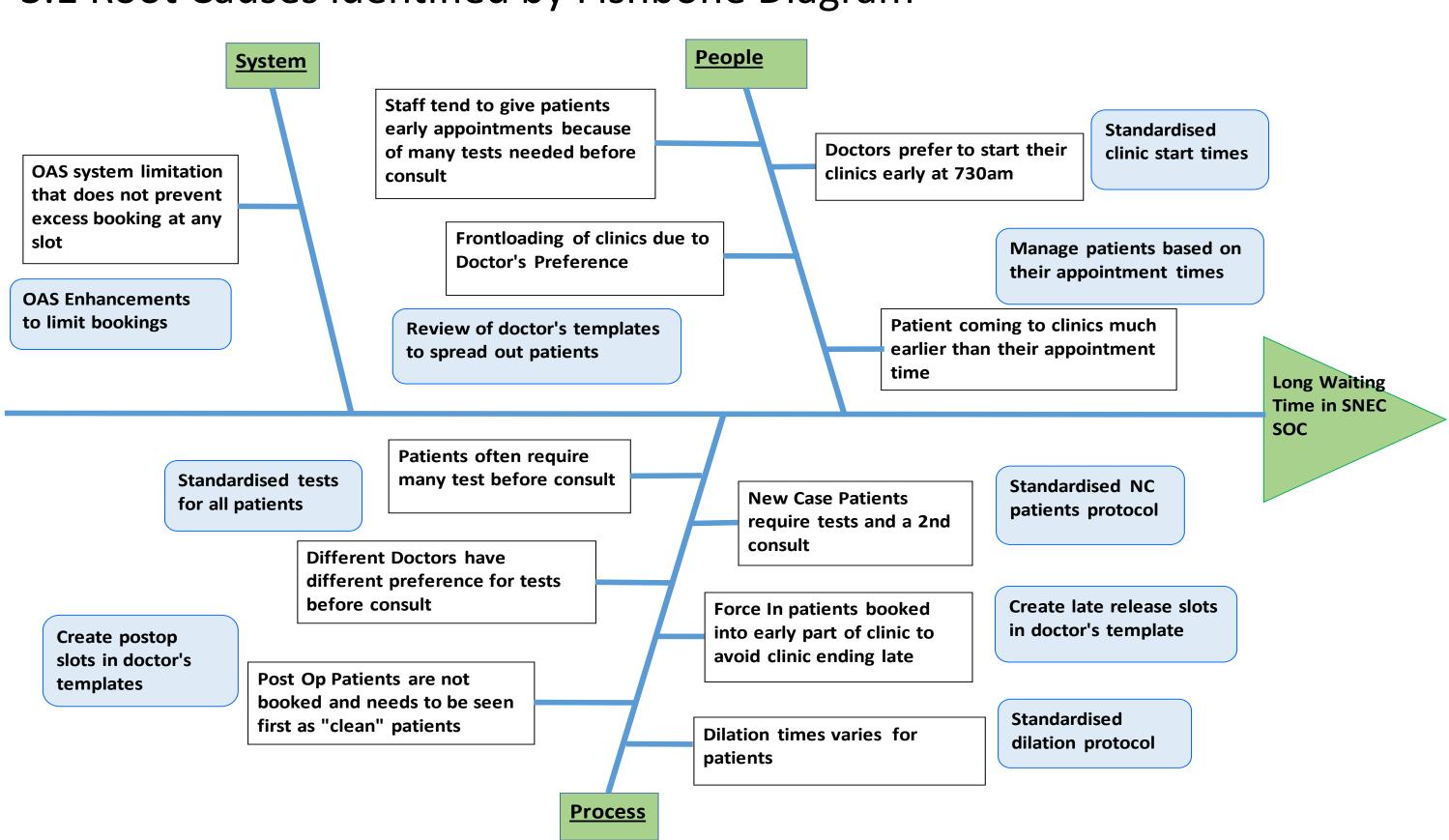
SNEC has over 370,000 patient attendances annually and long waiting time in our Specialist Outpatient Clinics (SOC) has always been a perennial problem. Wait time (WT) complaints account about 50% of our patient complaints received in 2019 and was a key area of concern as highlighted in the 2019 MOH Patient Satisfaction Survey.

2. Objective

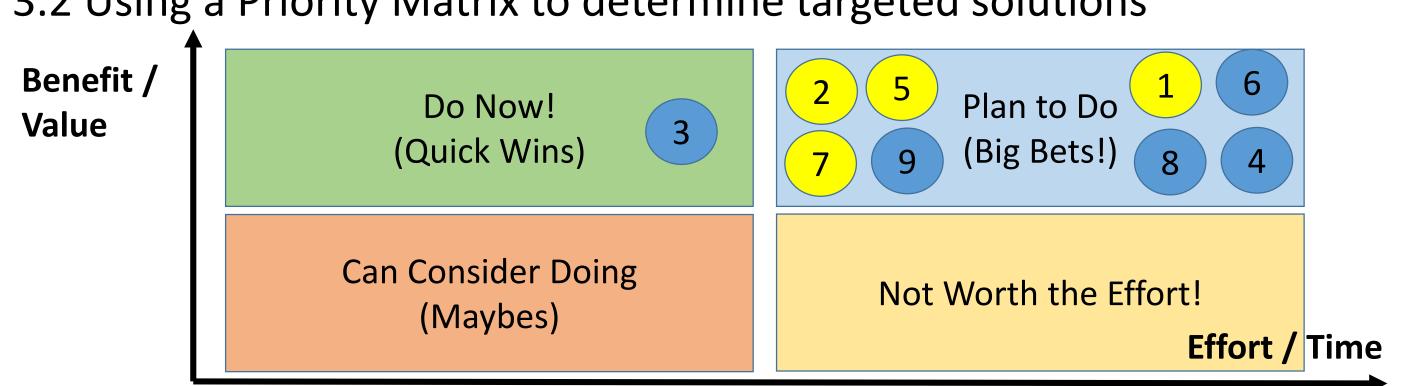
To increase patient satisfaction by aiming for at least 5% increment of patients: 1) waiting \leq 15 minutes for first evaluation (EV) and 2) needing \leq 60 minutes for tests before 1st doctor consult. Reduction in patient complaints was used as indicator of patient satisfaction.

3. Methodology

3.1 Root Causes identified by Fishbone Diagram



3.2 Using a Priority Matrix to determine targeted solutions



S/N	Possible Solutions	Effort (Score 1 to 4)	Benefit (Score 1 to 4)
1	Review doctors' template to spread out patients 💢	4	4
2	Standardize clinic start times	3	4
3	Manage patients based on appointment times	2	3
4	Standardize New Case patients protocol	4	4
5	Create late release slots in Doctors' template 🔆	3	4
6	Standardize dilation protocol	4	4
7	Create postop slots in doctors' templates 💢	3	3
8	Standardize tests for all patients	4	4
9	Enhance OAS to limit booking of patients	4	3

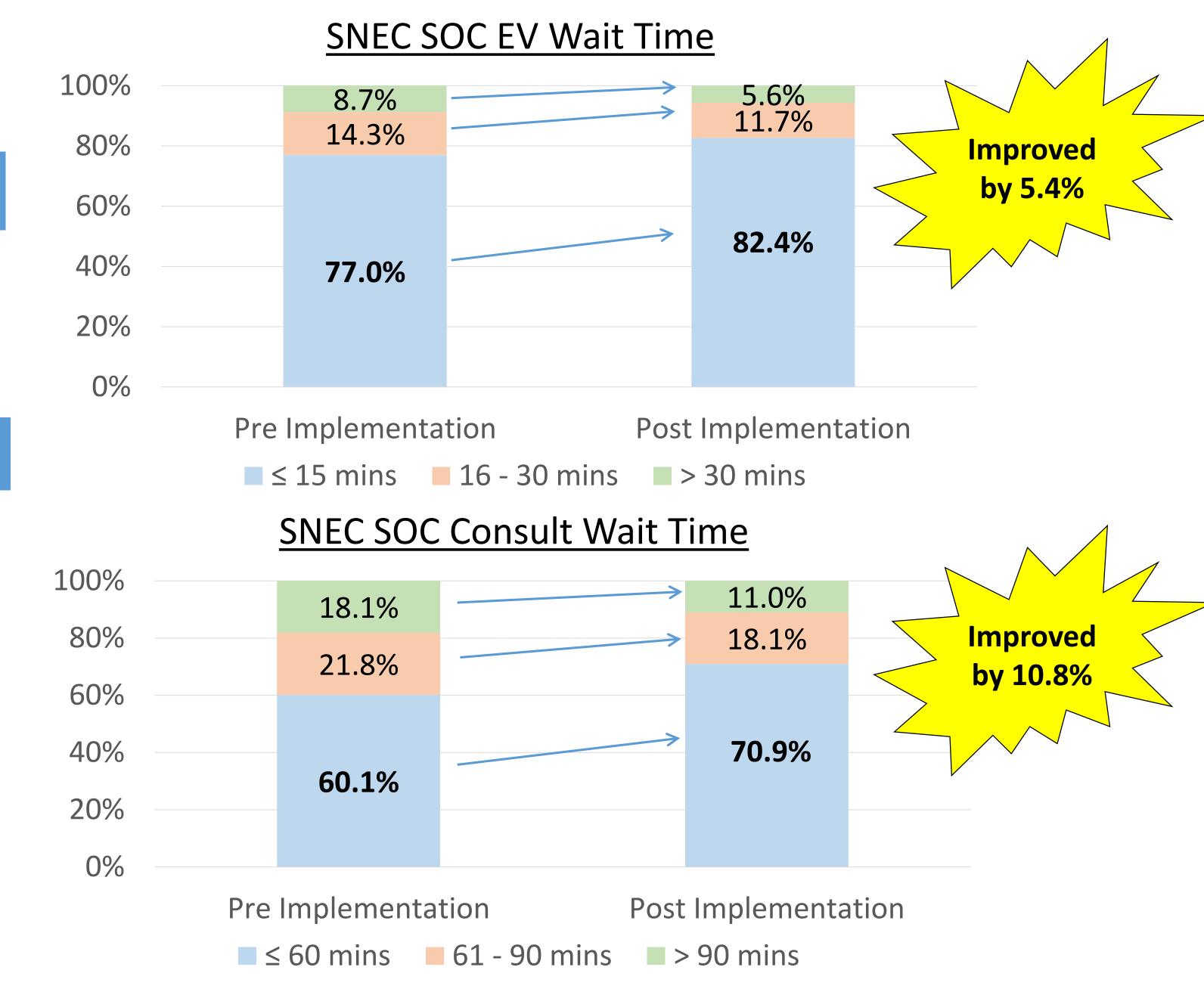
4. Implementation

A comprehensive centre wide review of all our doctors' templates and clinics rosters was endorsed by SNEC Senior Management. After 6 weeks of rigorous review and stakeholders engagement sessions, we revised over 100 doctors' rosters and managed to achieve:

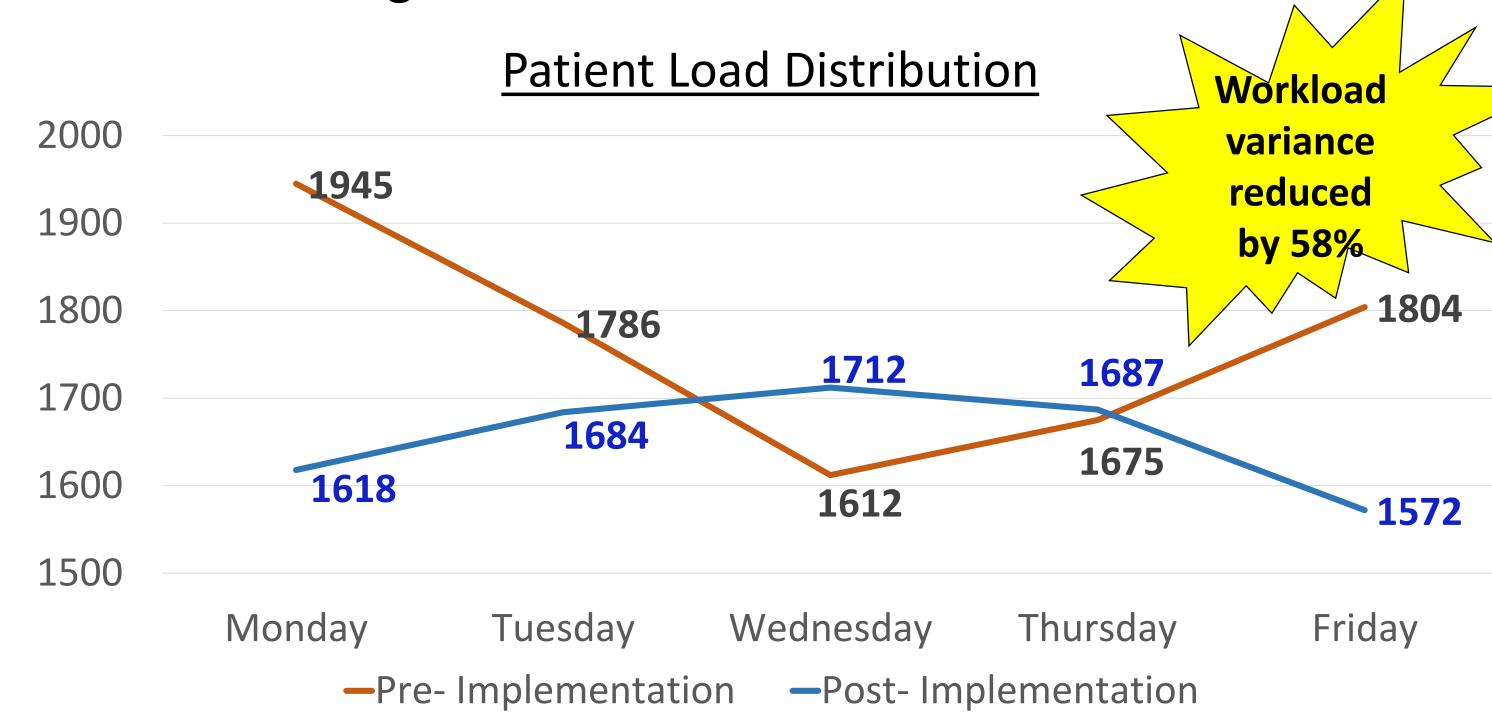
- 1. Workload balancing of patients across all sessions and clinics of the week
- 2. Increased sub-specialties coverage for all sessions of the week
- 3. Introduced new customised doctors' resource templates (Private & Subsidised) to meet different subspecialty and patients needs
- 4. Better spread of patient load across standardised clinic session length
- 5. Introduce new slot types (e.g. Late release slots and Post Ops slots) to enhance patient flow in the clinics)

5. Results

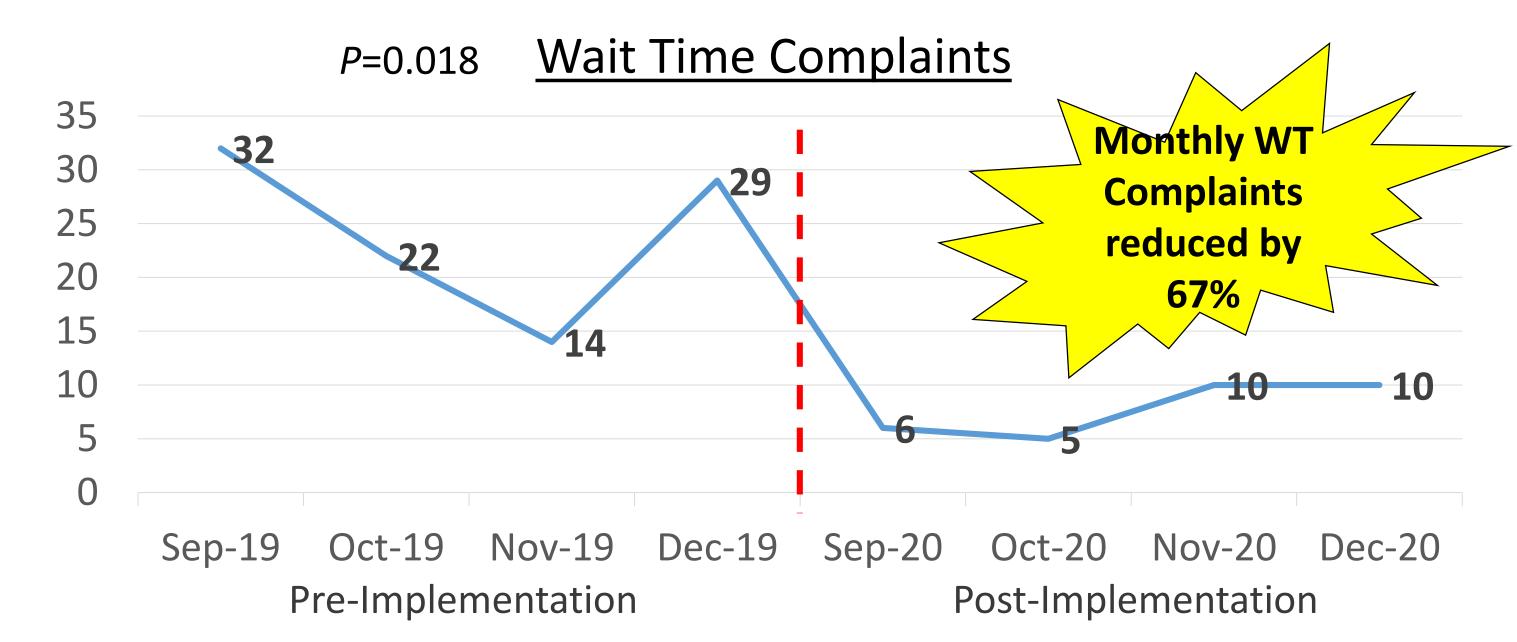
5.1 Improvement of Patients' WT to EV and WT to Consult



5.2 Load Levelling of Planned Patients' Load Across the Week.



5.3 Reduction of Centre-Wide WT Complaints



6. Conclusion

- Our targets of improving proportion of patients with short wait times to EV and doctor consult were achieved. WT to EV by 5.4% and WT to consult by 10.8% were achieved respectively, but required a lot time and effort in planning and engagement of multiple stakeholder teams.
- Patient satisfaction improved significantly (P=0.018) with the overall reduction of patient WT complaints by 67% in SNEC SOCs.
- Careful root cause analysis and priority matrix were very helpful in deciding key areas to focus efforts on.