Project Title

Reducing Congestion & Patient Dwell Time in SNEC by Frontloading Pre-Consultation Eye Evaluation (EV) into the Community.

Project Lead and Members

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Organisation(s) Involved

Singapore National Eye Centre

Aims

The aim of the project is to identify the root causes resulting in the congestion at the Eye Evaluation.

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Conclusion

See poster appended / below

Additional Information

Singapore Healthcare Management (SHM) Conference 2021 – Merit Award (Operations Category)

Project Category

Care & Process Redesign

Keywords

Care & Process Redesign, Process Improvement, Right-Siting, Waiting Time, Turnaround Time, Root Cause Analysis, Value Stream Mapping, Healthcare Administration, Singapore National Eye Centre, Singapore Optometric Association, Operations, Eye Evaluation, SNEC Regional Eye System, 3 Beyonds

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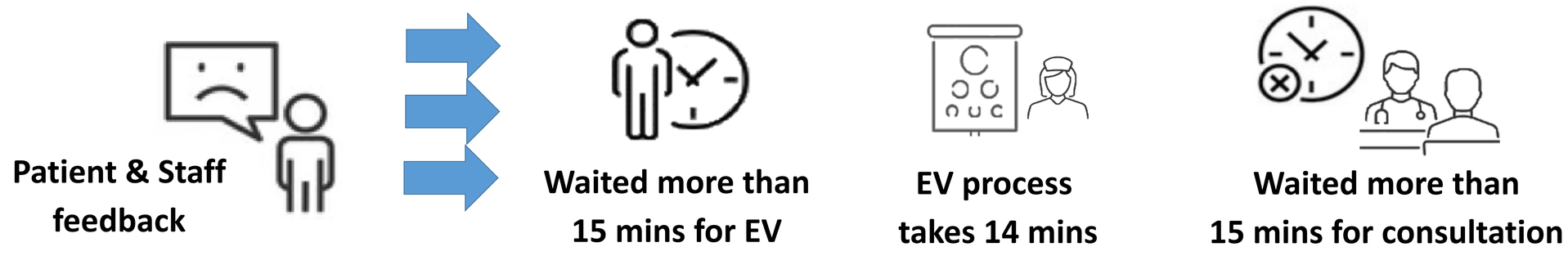
INTRODUCTION

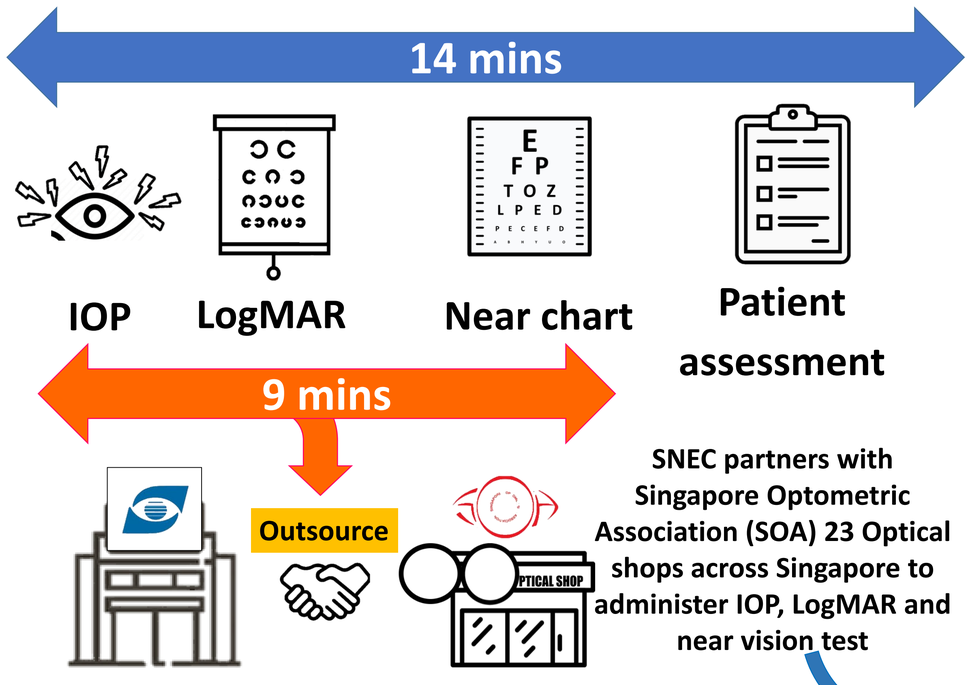
SNEC satellite clinics' patient workload increased by 30% from 2019 to 2020, yet the number of EV lanes remained the same due to manpower and infrastructure constraints, thereby adding to the congestion. SNEC Regional Eye System (RES) team together with Nursing colleagues formed a problem statement and conducted a workshop for root cause analysis through value stream mapping & fishbone diagram. The team determined that **Intraocular Pressure (IOP), far vision test (LogMAR) and near vision formed the Big 3 – taking up to 9 minutes out of 14 minutes, i.e. 60% of the total Eye Evaluation (EV) turn-around-time.** After conducting patient tracing, we also learnt that new case (NC) first visit patients tended to spend a longer time undergoing EV compared to the follow-up patients which only requires 7 mins. *excludes fast track new case.

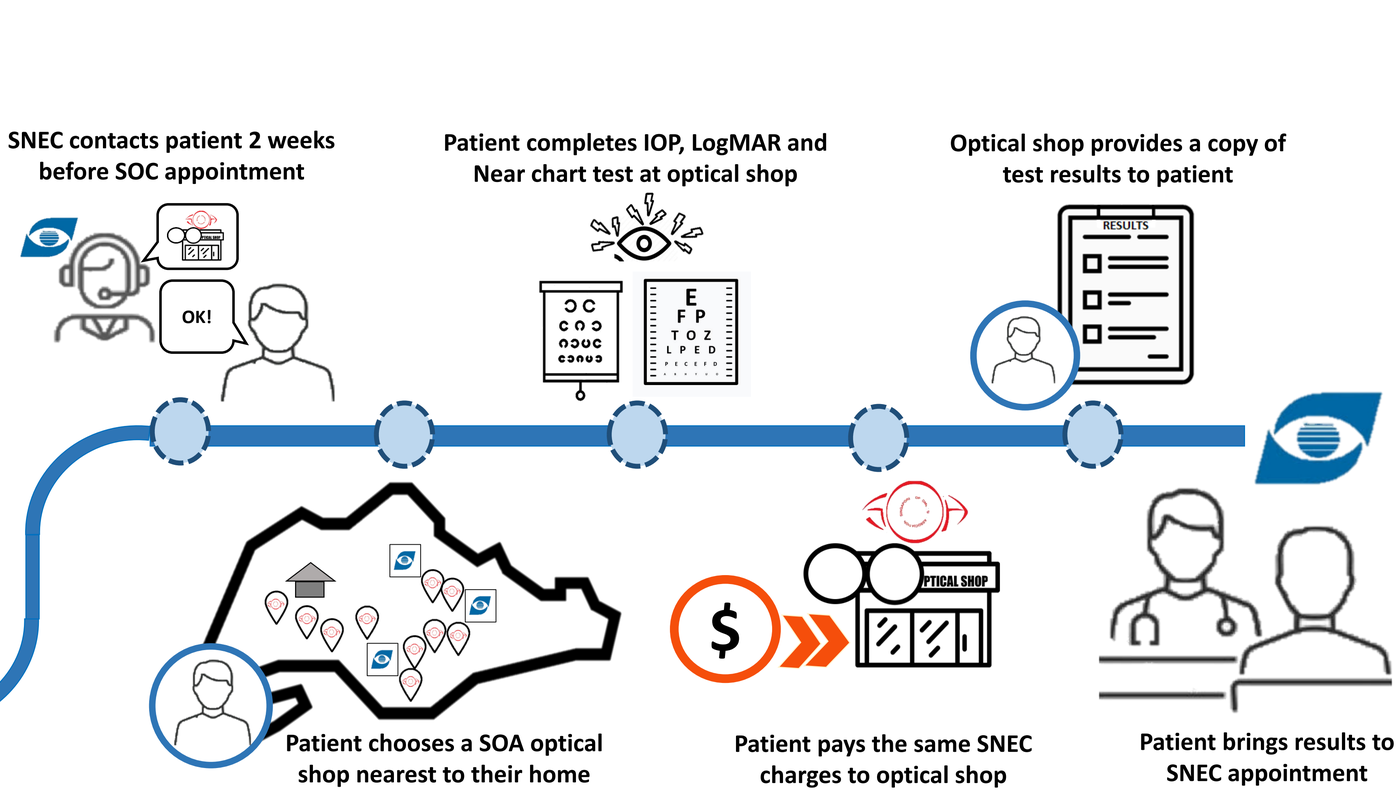
OBJECTIVES

The aim of the project is to identify the root causes resulting in the congestion at the EV. Every patient has to undergo IOP air puff test, LogMAR, near vision test and a patient assessment questionnaire as part of their pre-consult routine tests at SNEC.



METHODOLOGY





RESULTS

Since December 2020, 73% of the NC patients, in the participating clinics, had been recruited into this outsourced EV model of care (n=1002).

93%
Patient Feedback on new process (Satisfied and Very Satisfied)

EV Wait time within 15 mins
% of patients IMPROVED from 80% to 92%

Time taken for EV Process
REDUCED by 86%
From 14 mins to 5 mins

Consult Wait time within 15 mins
% of patients IMPROVED from 36% to 46%

CONCLUSION

This pilot showed that right-siting EV into the community is not only an effective mitigation to **reduce congestion and adheres to safe distancing measures** in the eye SOCs but also aligned with the ***3 Beyonds*** **strategies**.

Beyond Hospital to COMMUNITY — **Right-site patients to receive eye care nearer to home**

Beyond Quality to VALUE — **Upskill community optical shops to offload some of the center's workload**

Beyond Healthcare to HEALTH — **Early detection of eye abnormalities to allow escalation for timely treatment**

The team plans to expand this model of care to other clinics as well as follow-up patients as part of our continuous effort to proliferate effective models of care.