

**Project Title**

Improving Utilisation of Short Stay Ward (SSW) in Singapore General Hospital

**Project Lead and Members**

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**Organisation(s) Involved**

Singapore General Hospital

**Healthcare Family Group(s) Involved in this Project**

Medical, Healthcare Administration

**Applicable Specialty or Discipline**

Ambulatory Surgery

**Aims**

To improve the utilisation of Short Stay Ward (SSW) in Ambulatory Surgery Centre (ASC)

**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, Workflow Redesign

Care Continuum, Inpatient Care

**Keywords**

Bed Occupancy Rate, Bed Utilisation

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# Improving utilisation of Short Stay Ward (SSW) in Singapore General Hospital



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<sup>1</sup>: Division of Surgery, <sup>2</sup>: Ambulatory Surgery Centre

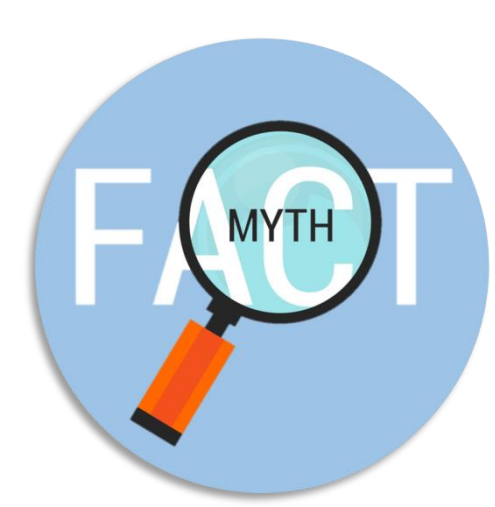
## Introduction and Aim

While the hospital expands its capacity to address the high bed occupancy rate, it remains important to review processes to alleviate the current bed crunch and adopt best practices by performing surgeries in an ambulatory setting where possible. Patients undergoing complex day surgery cases may be listed as SSW. Such cases will recover overnight in the hospital but are discharged in less than 24 hours. Every case listed as a SSW instead of admitted as an inpatient potentially saves 1 inpatient bed day. A workgroup was formed in July 2016 to explore ways to improve the utilisation of SSW in Ambulatory Surgery Centre (ASC).

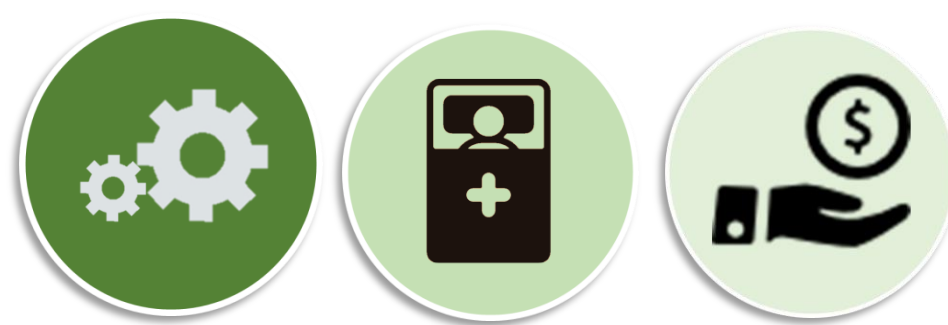
## Methodology



- Understand from surgeons about their concerns for not listing cases as SSW
- Worked with ASC staff to identify ground issues



- Fact-finding and understanding ground processes before addressing issues such as financial claims, bed capacity, patients' comfort etc.



- Through data analysis and clinical expertise, 3 surgical procedures were identified to be mandatory listed as SSW as long as they are subsidised cases and medically fit for SSW



- Monthly monitoring of SSW workload and utilisation rate; provide regular updates at Division Meeting

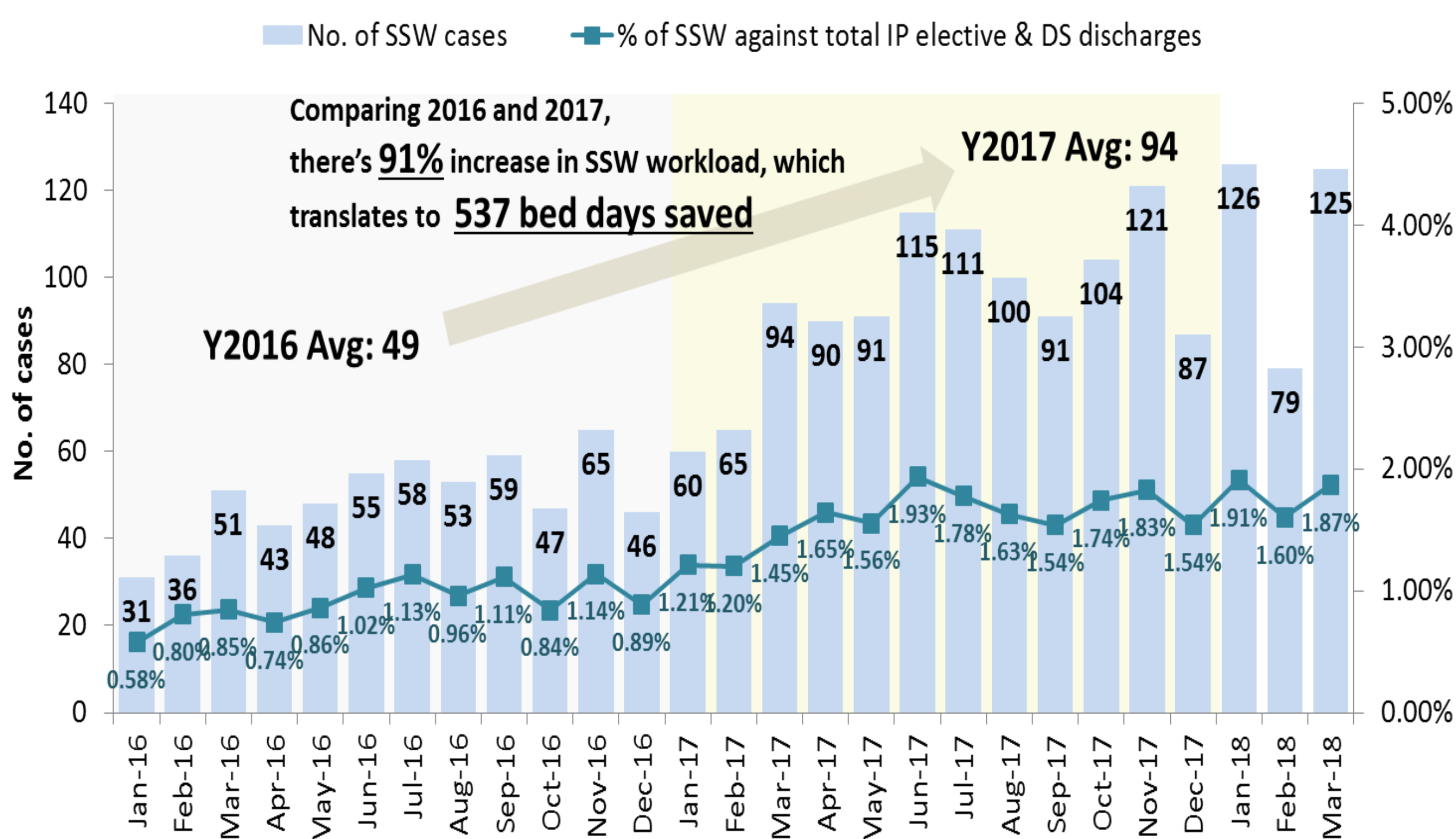


- Departments were encouraged to adopt SSW utilisation as part of their department key performance indicators where applicable.



- Implemented nurse-led discharge for SSW cases

## Results

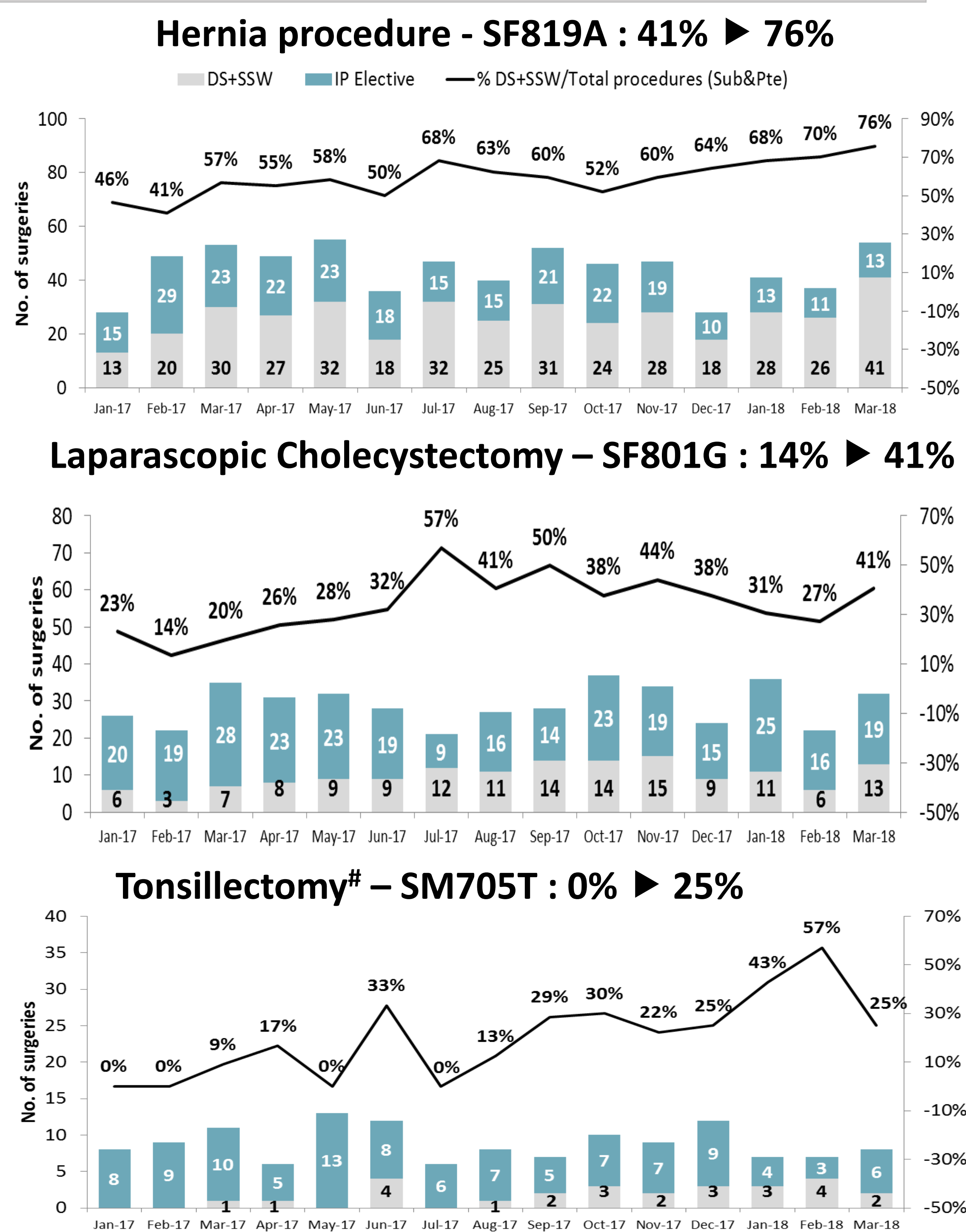


Comparing 2016 and 2017 SSW workload, SSW cases increased by 91%, which translates to 537 bed days saved. Utilisation of SSW beds increased by 18%. SSW bed utilisation\* increased from 20% to 38%. (↑18%)

\*Calculated based on Total no. of SSW beds = 12 beds

**SSW Phase 1 implemented in February 2017:**  
3 procedures identified for Phase 1 had a higher percentage of cases listed as SSW instead of inpatient (Feb 2017 – Mar 2018)

#Only for pure tonsillectomy cases



## Conclusion

SSW project helps to alleviate the tight bed situation by providing an alternative option to overnight inpatient stay. Quality of care remains as patients receive sufficient post-op observation in the hospital setting. The overall outpatient bill size is also smaller as compared to the inpatient bill size. The initiative is therefore beneficial to both patients and the hospital. Moving forward, more procedures would be identified for SSW in the subsequent phases.

Many thanks to the Surgical Departments and staff from Ambulatory Surgery Centre for their assistance and support in the project.