Project Title

External Referral File At A31/32 Medicine Clinic

Project Lead and Members

Project lead: Lynn Chen

Project members: Nur Hazwani, Sharon Ng, Siti Kamaliah, Nur Syafiqah

Organisation(s) Involved

Ng Teng Fong General Hospital, Jurong Community Hospital

Healthcare Family Group Involved in this Project

Healthcare administration

Applicable Specialty or Discipline

Patient Service Centre

Project Period

Start date: Aug 2020

Completed date: Feb 2021

Aims

The team aims to achieve below targets by Feb 2021:

• 0 incident of patient complain due to late follow up of external referrals.

• 100% of external appointments are scheduled timely and patients are updated within 2 weeks.

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Lessons Learnt

• Small changes can make big positive impact to patient care and outpatient journey.

• Streamlined work processes reduce variations and improve clinic work flow.

• Effective communications is the most important part of teamwork.

Conclusion

See poster appended / below

Project Category

Care & Process Redesign, Quality Improvement, Workflow Redesign, Job Effectiveness

Keywords

Late Referral, External Referrals, External Appointments

Name and Email of Project Contact Person(s)

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EXTERNAL REFERRAL FILE AT A31/32 MEDICINE CLINIC

MEMBERS: LYNN CHEN; NUR HAZWANI; SHARON NG; SITI KAMALIAH; NUR SYAFIQAH

✓ SAFETY ☐ PRODUCTIVITY
✓ QUALITY ☐ COST
✓ PATIENT EXPERIENCE

Define Problem, Set Aim

Problem/Opportunity for Improvement

In A31/32 Medicine clinic, average of 22 patients per month are referred to external institutions for treatment/consultation. The clinic PSAs have to contact and coordinate with receiving institutions to schedule the appropriate appointments, and inform patient accordingly.

Between March to July 2020, there were 3 incidents patients' external referrals appointment were not scheduled after 2-3 months. This resulted in delay on patients' follow up plan, as well as negative patient experience.
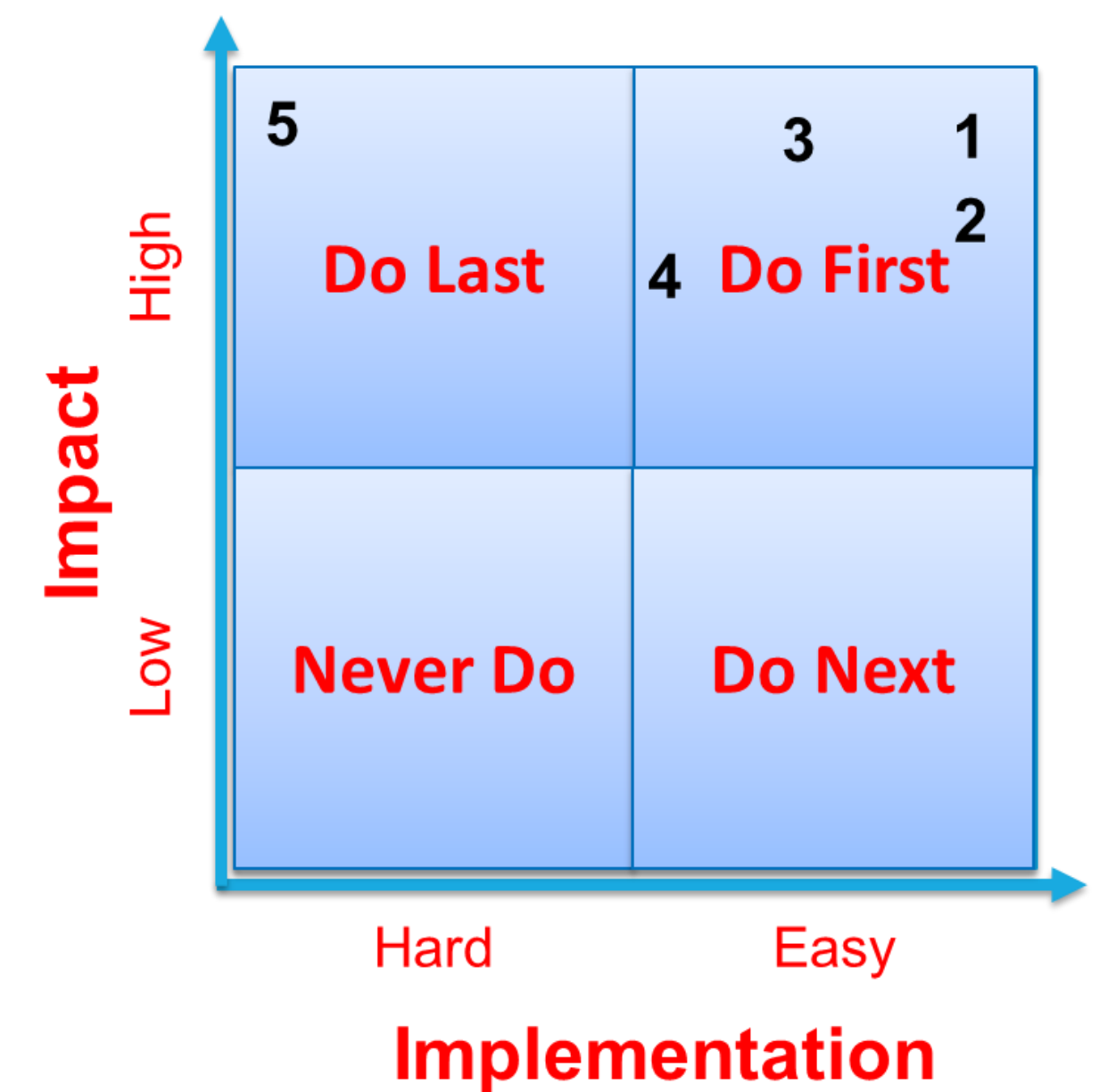
Aim

The team aims to achieve below targets by Feb 2021:
- *0 incident of patient complain due to late follow up of external referrals.*
- *100% of external appointments are scheduled timely and patients are updated within 2 weeks.*

Establish Measures

What was your performance _before interventions_?
- Outcome measure: Numbers of patient complain due to late follow up on external referral appointments
- Process measure: % of external appointments are scheduled and updated to patients within 2 weeks of referral
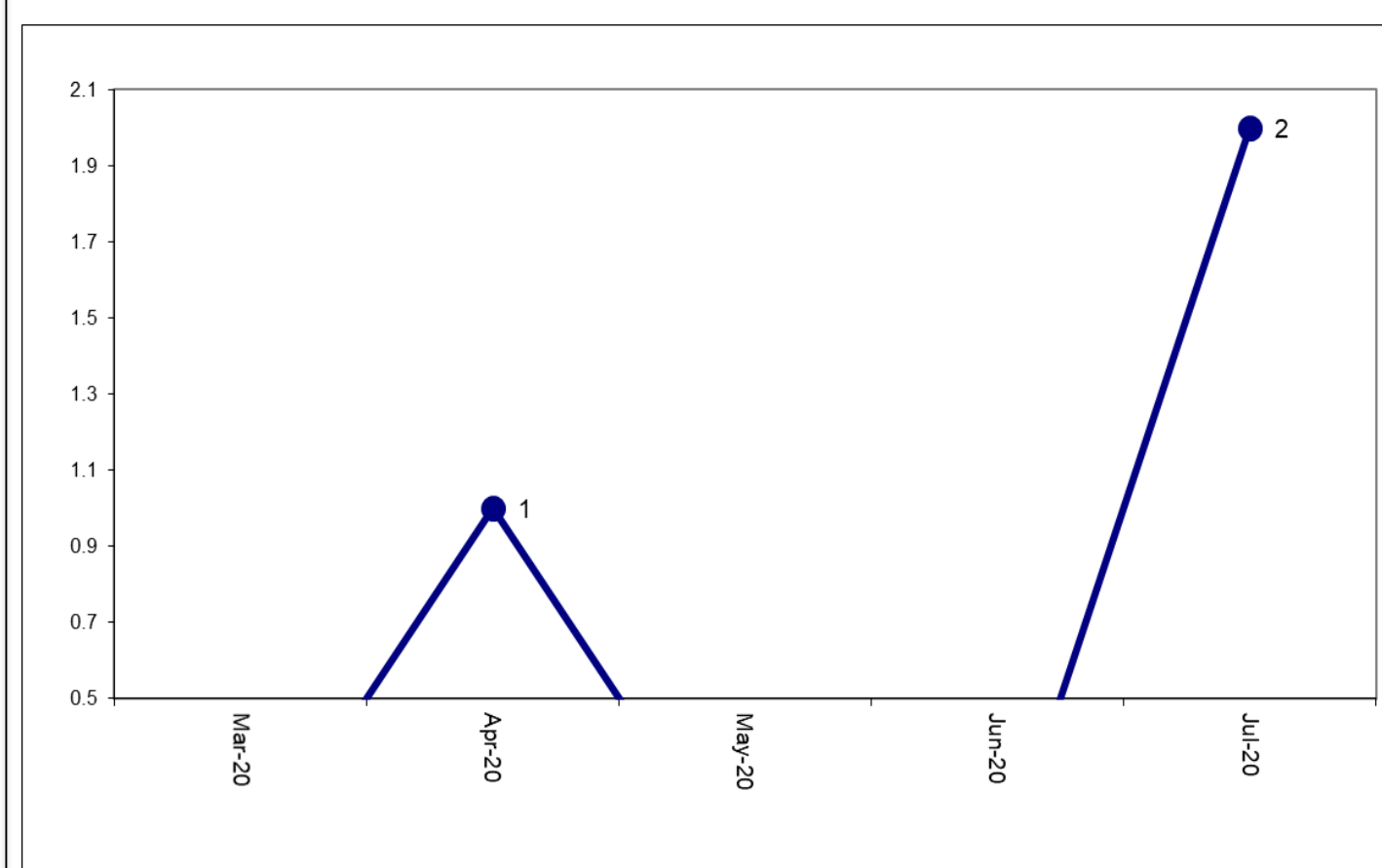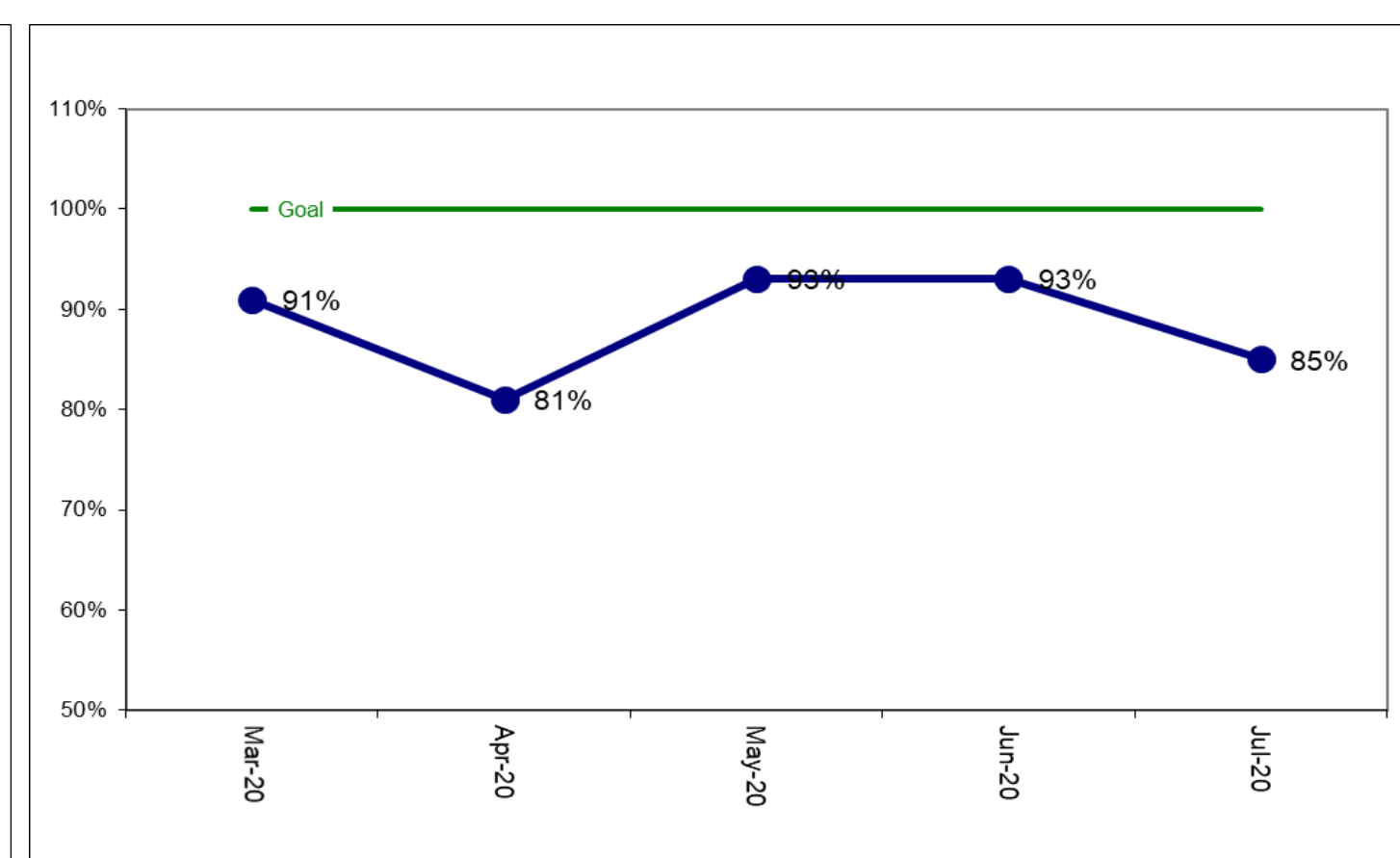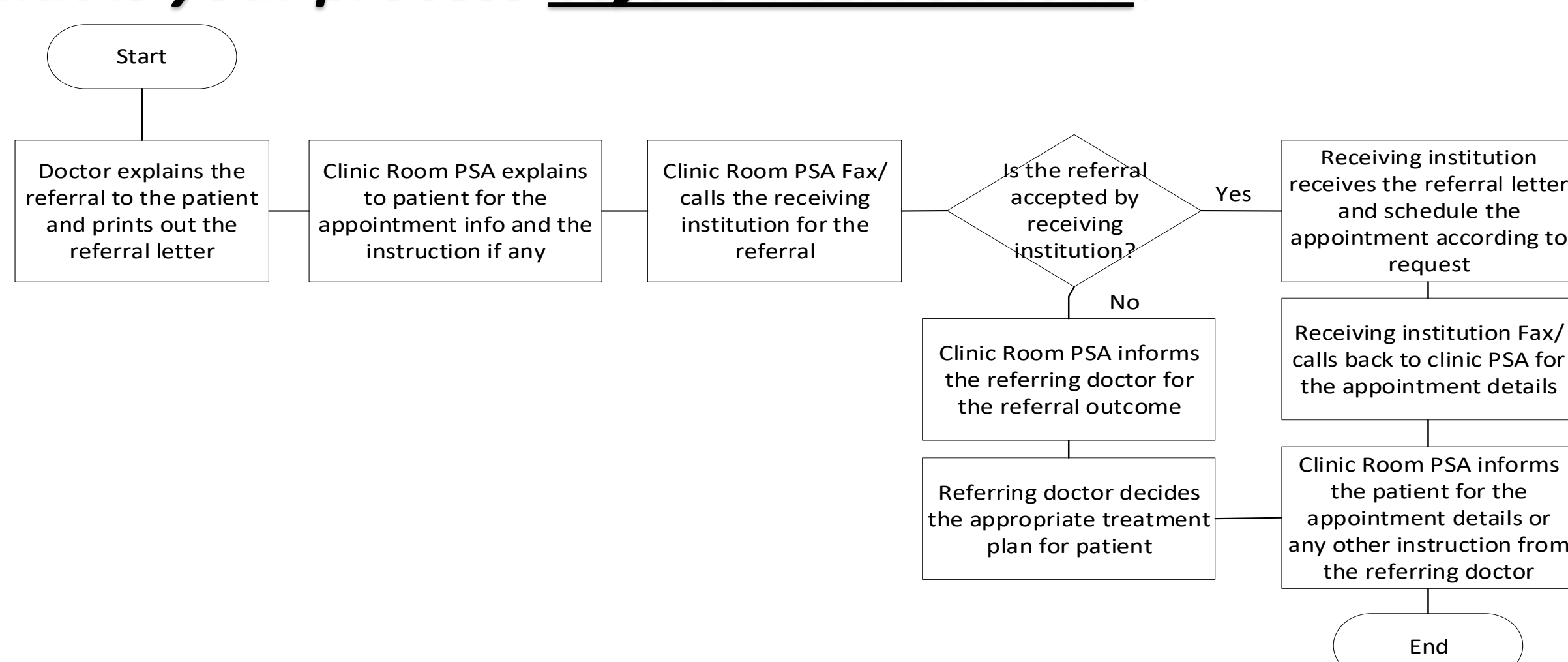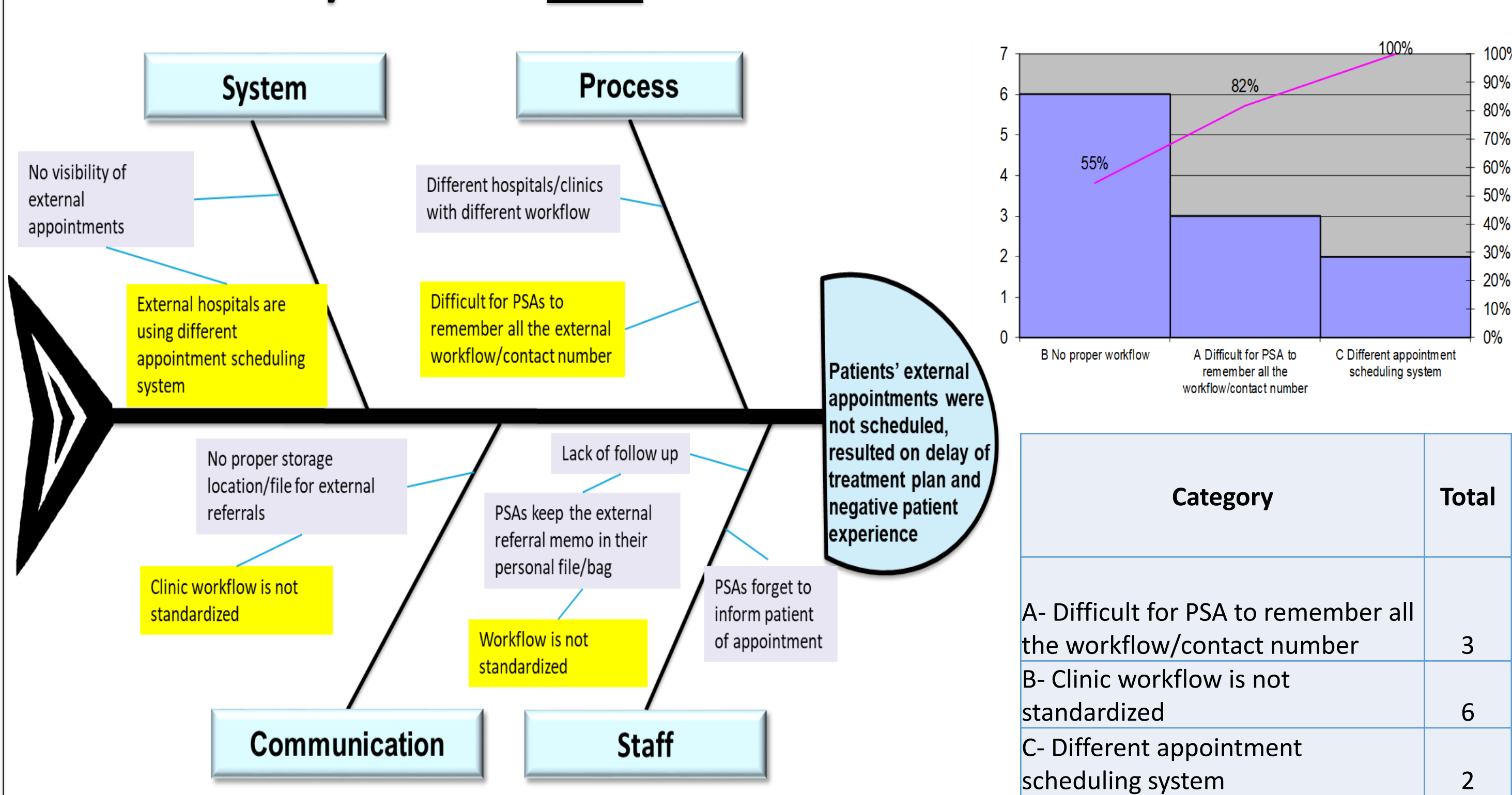

Figure 1: Outcome Measure

Figure 2: Process Measure

Analyse Problem

What is your process _before interventions_?

What are the probable _root_ causes?

Category	Total
A- Difficult for PSA to remember all the workflow/contact number	3
B- Clinic workflow is not standardized	6
C- Different appointment scheduling system	2

Select Changes

What are all the probable solutions? Which ones are selected for testing?

Root Cause		Potential Solutions
Root Cause B Clinic workflow is not standardized	1	Created a file for all external referrals in the clinic
	2	Identified a team to monitor the file and referrals
	3	Established the workflow for external referrals
Root Cause A Difficult for PSA to remember all the workflow/contact number	4	All contact/fax number, email are listed for easy reference
Root Cause C Different appointment scheduling system	5	Implementation of EPIC

Impact (High / Low) vs Implementation (Hard / Easy)
- 5 — Do Last
- 3, 1, 2, 4 — Do First
- Never Do
- Do Next

Test & Implement Changes

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

CYCLE	PLAN	DO	STUDY	ACT
1 (Aug-Sep 2020)	• Implemented the external referral workflow and files	• External file with external hospital contact numbers were created (Using thin A4 file)	• There were too many external referrals, PSA IC had difficulty to monitor • File was too thick after few weeks	• To revise the file arrangement and layout
2 (Oct-Dec 2020)	• The external referral file was revised	• Used ring file and dividers for easier reference • Clear folder were arranged according to months	• It is easier for the team to track the external referrals	• Standardized the workflow and roll out to A31/32 clinic PSAs
3 (Jan-Feb 2021)	• Send out the external referrals through encrypted email	• The external hospital contact list was updated with email address • PSA ICs email the referrals to receiving institutions	• Lesser paper work • Compliance with PDPA guideline	• Standardized the workflow and adapted by other clinics

Results
- Clinic PSAs are able to track the external referral memo easily.
- Achieved 0 complain/ feedback received from patient due to late follow up on external referrals from Aug 2020 to Feb 2021.
- Achieved 100% of external appointments are scheduled and patients are informed by our clinic staff within 2 weeks of referral from Aug 2020 to Feb 2021.

Figure 1: Outcome Measure

Figure 2: Process Measure

Spread Changes, Learning Points

The project was shared to all SOC clinics during combine roll call. It was adapted according to respective clinic workflows.

Key learnings
- *Small changes canmake big positive impact to patient care and outpatient journey.*
- Streamlined work processes reduce variations and improve clinic work flow.
- Effective communications is the most important part of teamwork.

Ng Teng Fong General Hospital

Jurong Community Hospital