



To reduce the percentage of patients sent back for medical review from BVH to SGH by 50% within 6 months

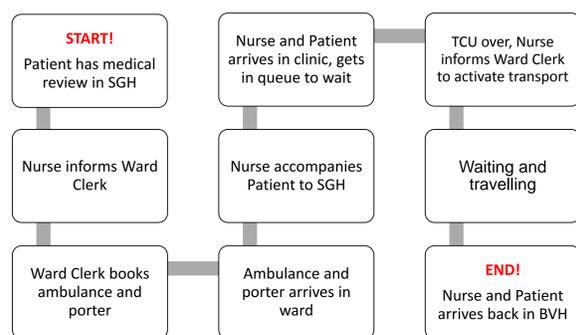
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INTRODUCTION

SGH Ward @ BVH is a rehabilitation medical ward located at 5 Lorong Napiri Bright Vision Hospital. Stable patients are referred to this ward by rehabilitation physicians for continuity of care and comprehensive rehabilitation therapy. Patients with appointment for medical review are often required to be transported by ambulance back to SGH for consultation. A nurse has to accompany the patient throughout the whole process, this takes about 3-5 hours per review.

Flow for medical review



OBJECTIVE

To reduce the percentage of SGH Ward @BVH patients for medical review at SGH by 50% within 6 months

METHODOLOGY

3 root causes identified with cause and effect diagram

1. No proper guideline for BVH Rehabilitation Doctor to review patients prior to sending them for medical review
2. SGH nurses lack of information about SGH Ward @ BVH.
3. Nurses need to remind doctors to review patients' medical appointment

Target Setting

Target setting to reduce the percentage of patients sent back by for medical review by 50%. Higher target was not set as some patients' medical reviews are essential.

Tree Diagram

Tree diagram to select possible solutions

SOLUTION SELECTION: TREE DIAGRAM & PRIORITIZATION MATRIX

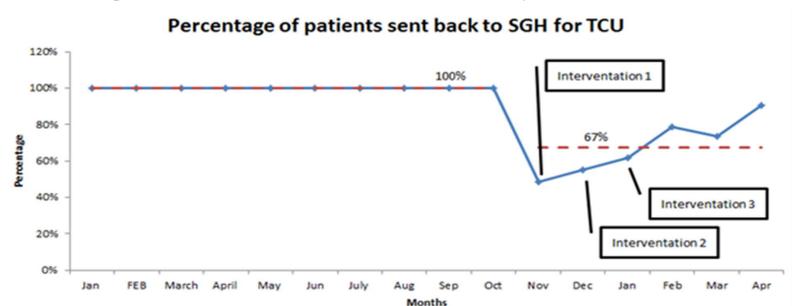
Project objective	Steps (drivers)	Solutions	High Effectiveness	Lower Cost	Total Score
To reduce number of trips made by patients from BVH to SGH for medical review	Provide Rehab Doctor with proper guideline to review all patients TCU	Establish a briefing/orientation flowchart to all rehab Drs @ BVH ward	3	3	9
		Print a TCU list upon receive patient, let rehab Dr review	3	2	8
	Empower SGH nurses with information that SGH@BVH wards is not a community hospital	Develop a information flyer/ leaflet	2	1	4
		Email all SNMs @SGH campus to brief their nurses @ roll call	3	2	8
		Road show to SGH campus nurses	1	1	3
	Assist the nurses in reminding doctor to review the TCU appointment	Reminder signage at computers	3	1	7
		Put all the printed TCU paper at the designated place (NCR special mention)	3	2	8
		Create TCU references board highlight the TCUs 3/7 ahead	3	3	9

3 Solutions were implemented

- Implementation 1 : Establish a orientation flowchart to brief all Rehabilitation Doctors @ BVH ward
- Implementation 2 : A workflow is emailed to all Senior Nurse Managers at SGH campus to brief their nurses during roll call
- Implementation 3 : Create a Medical Review Reference white board to pen down appointments 3 days ahead of actual date

RESULTS

The intervention helped to reduce the median percentage of patients sent back from 100% to 67%. The results are highly dependent on each month and individual patient's medical condition. The medical team review patients' appointment to defer non urgent or cancel unnecessary review.



Tangible result

Subject	Each medical review reduction	Total Nov16 – Apr17 reduction	Equivalent
Time of nursing staff	3.5 hours	220.5 hours	1 staff 27.5 working days
Nursing staff cost	\$ 26	\$1638	One month salary
Ambulance	\$ 160	\$10080	Better usage for other resources
Transportation time for each driver and porter	1 hour	63 hour	2 transportation staff each 8 working days

Intangible result

- Nursing staff (at SGH Ward @ BVH) work satisfaction ↑
- Patient safety and experience ↑
- Less disruption to therapy and rehabilitation goals are enhanced.

CONCLUSION

The project has enhanced in time, manpower and cost saving.

- Optimize nurse's times to provide patient care effectively, and providing quality care to our patients
- Achieving best outcome and best experience of our patients.
- Ensure patients' safety which is aligned with our organizational priorities: safety and adequate care to other patient is not compromised as well as zero harm to patients
- Same process can apply to SengKang Health