Optimizing Clinic Resources & Patient Journey Singapore Healthcare Management 2017

Author & Co-Authors

Stephen Wong Kah Wai, SGH Dr Goh Su-Yen, SingHealth Dr Swee Du Soon, SingHealth





Background

At the Endocrinology Clinic at Diabetes & Metabolism Centre (DMC), the consultants run MO Teaching Clinics (i.e. Endocrinology & Diabetes MO Teaching Clinics) where they supervise the Medical Officers (MOs) in New-Case (NC) patient management. This is part of the training curriculum for the MOs.

Frequently most of these NC patients would be required to do blood tests before their initial consultation for the doctors to better understand their current conditions and prescribe an appropriate treatment plan.

However, the consultants in charge of the MO Teaching Clinics had given feedback that the no-show rate (% of patients who default on their appointments) is high, with no-show up to 75% for some sessions. With such low patient turn-up rate, clinic sessions are sub-optimal and the MOs do not have a fruitful learning experience.

In addition, many of these NC patients who turn up for their appointments did not do the necessary blood tests, hence rendering their consultation unfruitful.

Aim

To improve utilisation of the NC slots for the MO Teaching Clinics, SOC Ops and the Endocrinology Department collaborated on a project with the aim "To reduce no-show for MO teaching clinic by 50% within 3 months".

Methodology

address these issues, SOC Operations and Endocrinology Department came together and used the '5 Whys' method to determine the root cause of the problem.

 High no-show rate for MO Teaching Clinics Patients not turning up for appointments Patients have other commitments Patients forgot about appointments Patients do not feel the need to see doctor after long wait

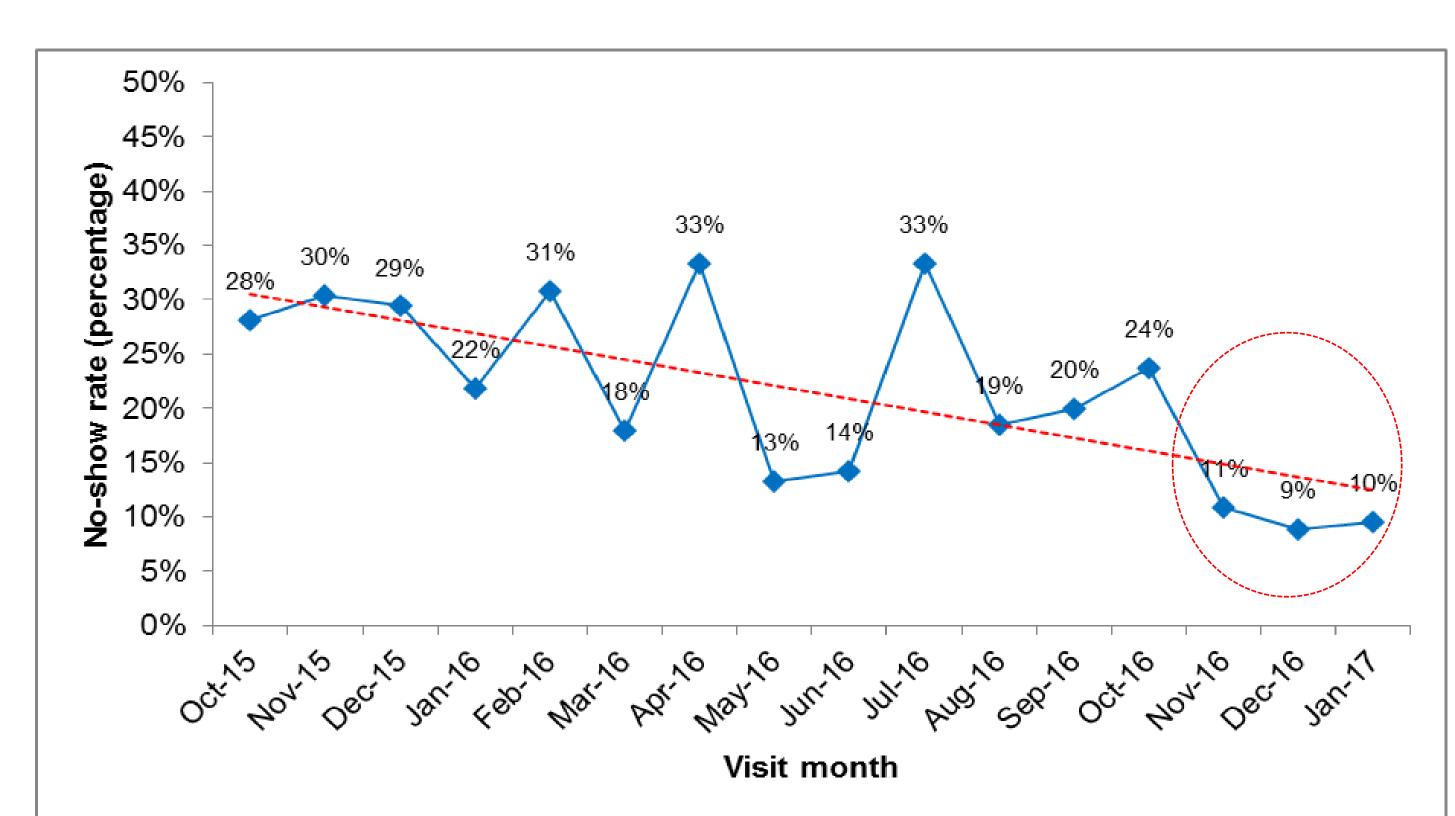
Solution Development

After the root cause was determined, a new workflow was devised:

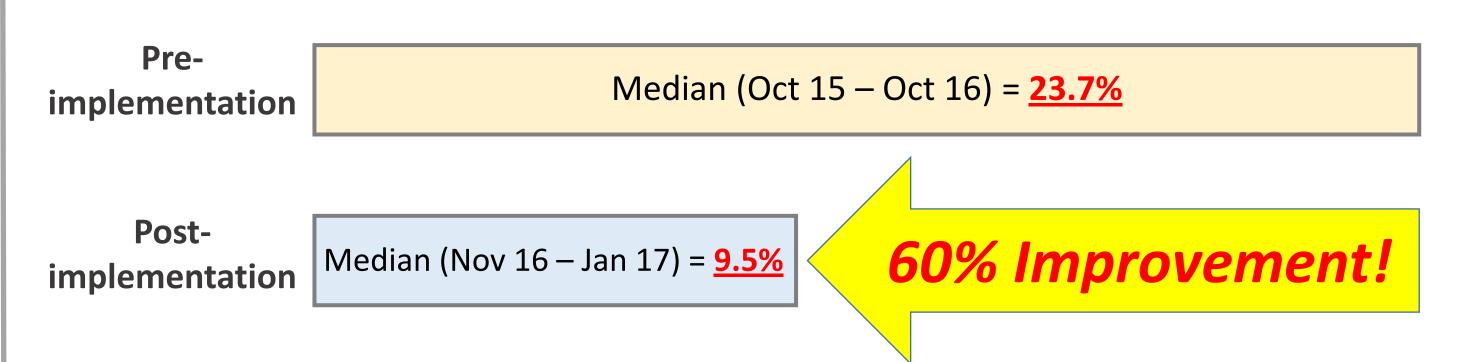
- 2 weeks before patients' appointment, clinic staff will call patients to confirm their attendance. For patients who indicated that they will not be turning up, their appointments would be cancelled or rescheduled so that the appointments slots can be released for other patients.
- 1 week before patients' appointment, the respective MOs will pre-clerk using the confirmed list of patients and discuss with the doctor-in-charge which patients would benefit from blood test on arrival. The MOs would then call these patients and advise them to come at least 2 hours earlier to do their blood tests before consultation.

Results

Since the new workflow was implemented in Oct 2016, the MO Teaching Clinics had seen a sharp decrease in patient No-Show rate.



No-Show Rate



Also, post implementation, with the doctors' prior advice, all the patients requiring blood tests would have their test results ready before consultation, ensuring timely follow-up and treatment.

Conclusion

- The successful implementation has resulted in better utilization of NC slots for the MO Teaching Clinics.
- It also helps in reducing waiting time to appointment for NC patients as slots for patients who do not want to come are released for other new patients.
- MOs will also have a more fruitful learning experience as they can see more patients during their clinic sessions.