



Singapore Healthcare Management 2017

JUMPING ON THE PAPER-LESS BANDWAGON

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AIMS

- Eliminate** paper trail
- Reduce** motion waste
- Save** manpower & time
- Improve satisfaction** of patients & staff

RESULTS



PROBLEMS

- Handover communication may not include all essential information
- Information may be misinterpreted
- Heavy reliance on the paper route of the AAF
- Paper route of the AAF was only made possible with the close proximity to the Bed Management Unit (BMU)
- Risk of documents mix up
- Handing over of AAFs from BMU to Nursing to inform of “ready bed” status were often delayed due to circumstances that were less than ideal
- Manpower deployment proves to be less effective as multiple trips are carried out for handover

METHODOLOGY

While discussions took place on the plans for A&E remodeling, A&E Ops, using root cause analysis, realized that there needs to be a more robust means of communication independent of distance and paper trail.

CONCLUSION

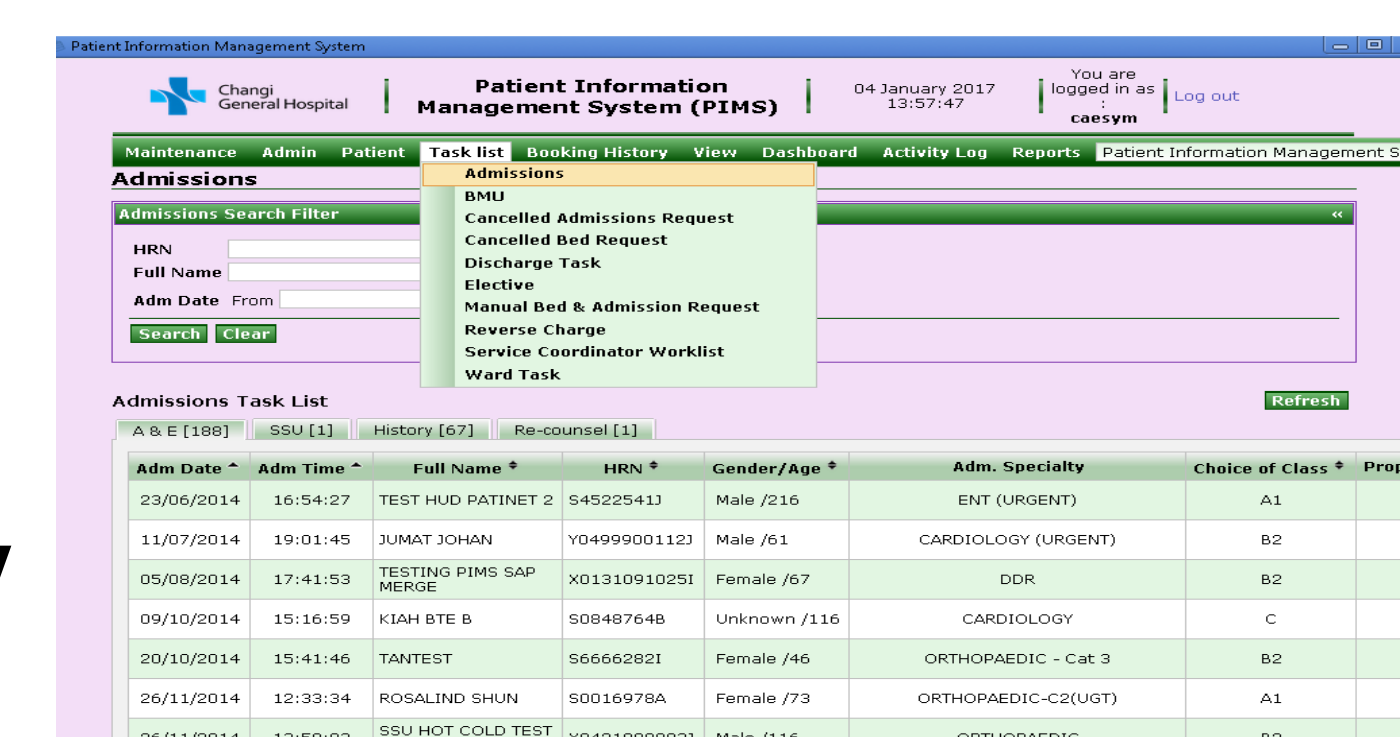
KPIs were established from the onset of the roll out and were measured using reports generated from the communications log. The KPIs have been met thus far. The physical copy of the AAF used as a means of communication between the A&E Admissions Office and Bed Management Unit has ceased. Manpower deployed for communication and handovers are better utilized for the delivery of quality work performance.

The efficacy of nursing follow up has also improved tremendously following the implementation of the Admissions Tasklist.

With effect from 23rd January 2017, the Admissions Office no longer requires a physical copy of the Admissions Authorization Form (AAF) to process patients’ admissions.

A&E Operations rode onto the wave of eliminating paper trail as the department progresses towards creating a paperless work environment. A more efficient and effective process for the admissions of patients in the A&E department was introduced. Certain aspects of the current workflows are automated, paper trail and human intervention are reduced.

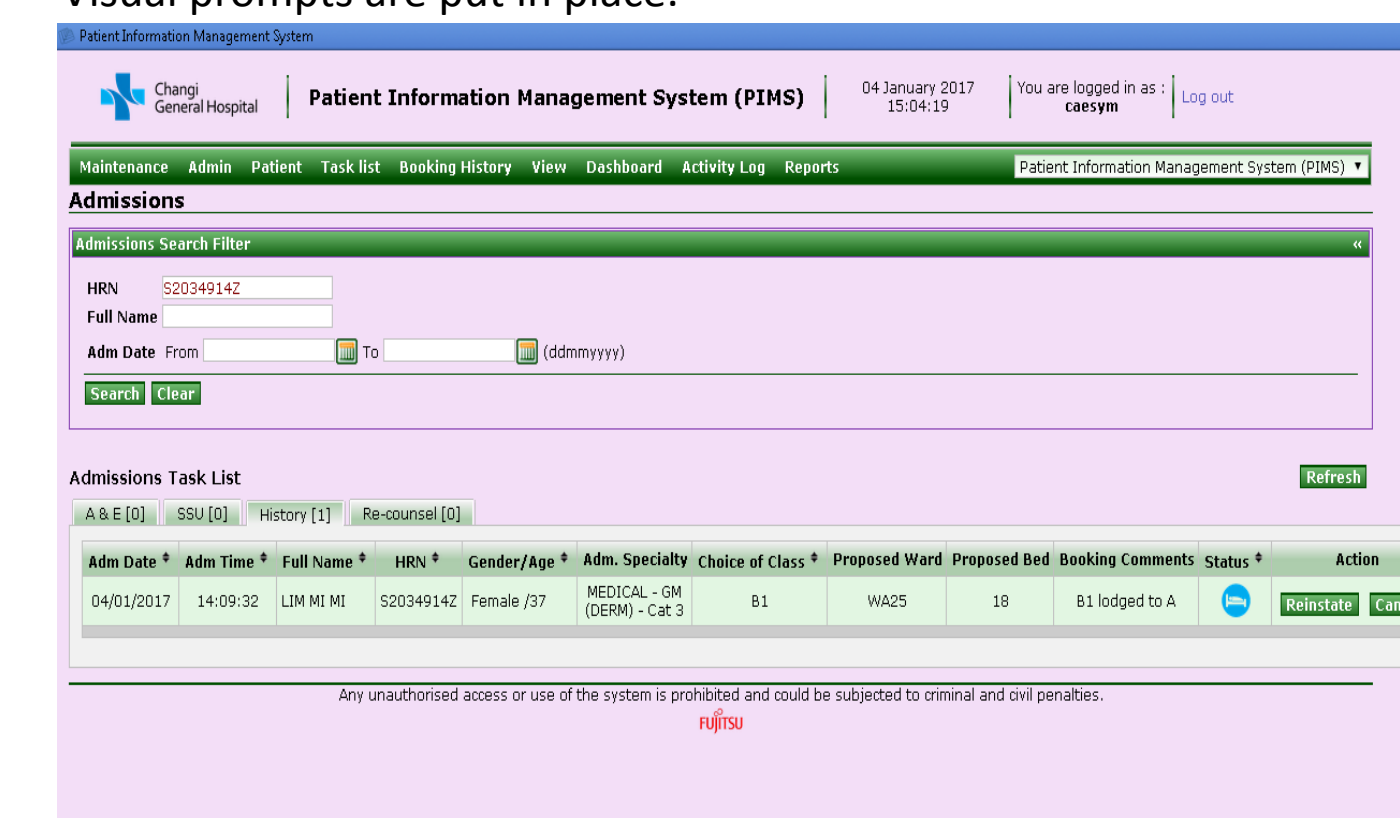
The gaps in communication which can potentially cause breakdowns in the continuity of care have been minimized by translating the communication via electronic means.



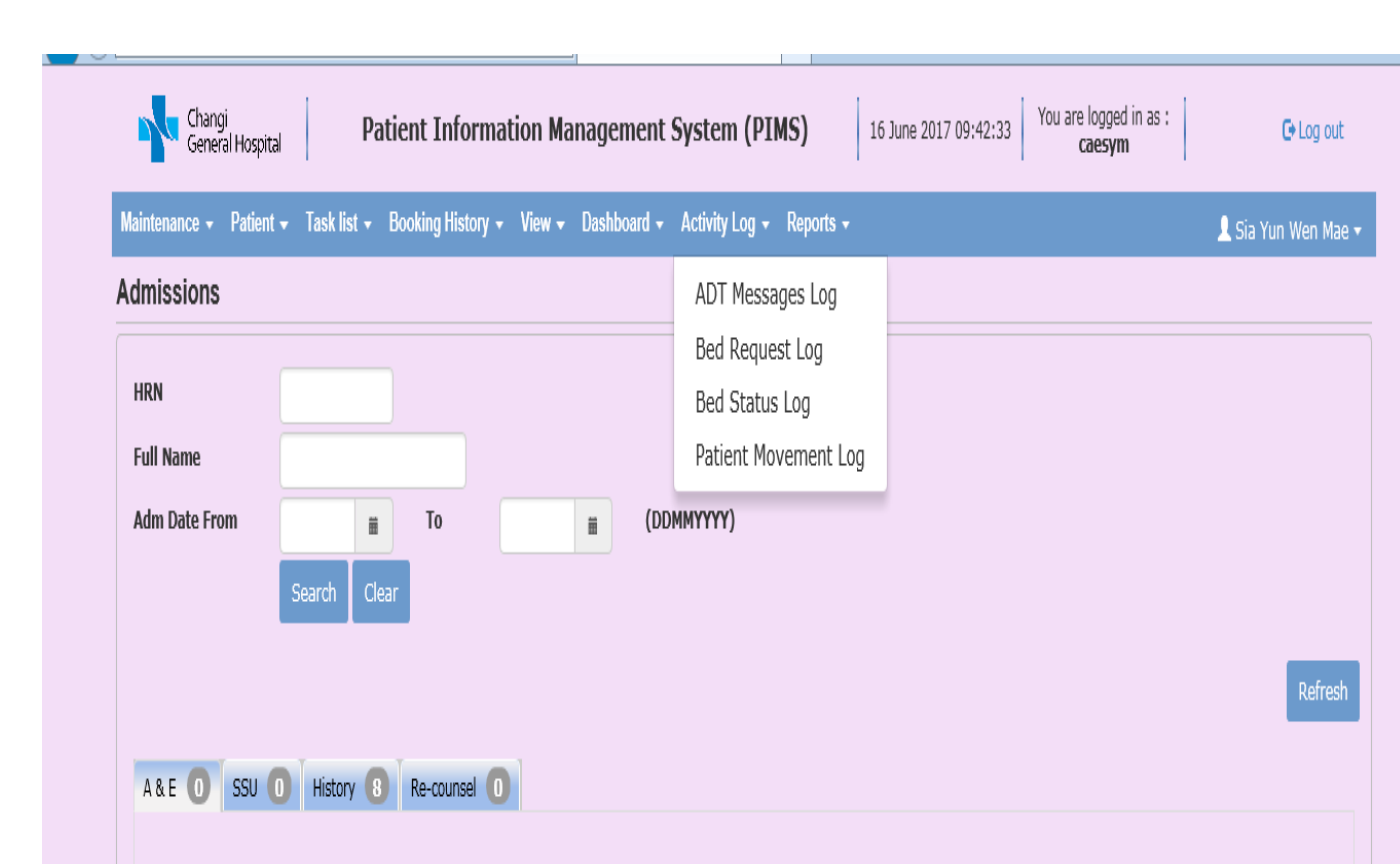
A new feature in PIMS- Admissions Tasklist.



Visual prompts are put in place.



History tab differentiates completed cases from incoming ones



The Admissions Tasklist is a user friendly function allowing Admissions & BMU staff to convey information through a chatbox, similar to instant messaging applications that are available in the mass market.

The status changes from a question mark symbol to a bed icon when one party replies to the request which facilitates a smoother and quicker admissions process.

The history tab captures all completed cases. The staff is able to reinstate the completed case for re-counseling in the event of a change request. A case is automatically removed from view as soon as patient occupies a bed in the ward.

Communication logs were designed to track and record all messages for audit purposes, ensuring that staff meet their key performance indicators (KPIs).

In addition, the ready bed status is timely reflected in the Nursing Status Board for real time updates and for prompt follow up to the wards