



Eliminating SOC Patients' Pain Points – Increasing Patient Satisfaction & Optimising Clinics' Efficiency!



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Introduction

Time spent waiting for a scheduled appointment has always been the largest source of patient dissatisfaction. The degree to which patients are satisfied with the care received is often correlated to the amount of waiting time and experience. Long waiting time especially for paediatric Neurology patients causes additional **stress** and **exhaustion** to the caregiving burden.

KKH Neurology appointment templates were often overbooked which created an exponential effect on the consult waiting time. The overbooking of the templates also created challenges to make appointment for genuine urgent cases.

A multi-disciplinary project team consisting of physicians, nurses, and operations staff was formed to review the consult waiting time and clinic crowd condition.

Objectives

To increase patient satisfaction by reducing consult waiting time by 30% and boosting efficiency in clinic.



Methodology

Ishikawa diagram (Figure 1) was used to brainstorm and identify the root causes of the issue. The project team identified two Neurology templates for the pilot study. Data was collected over a period of six months, from October 2016 through March 2017. A total number of 301 patients and 32 clinic sessions were used to study the consult waiting time and clinic crowd before and after the implementation of the non-released appointment slots in the Outpatient Appointment System (OAS).

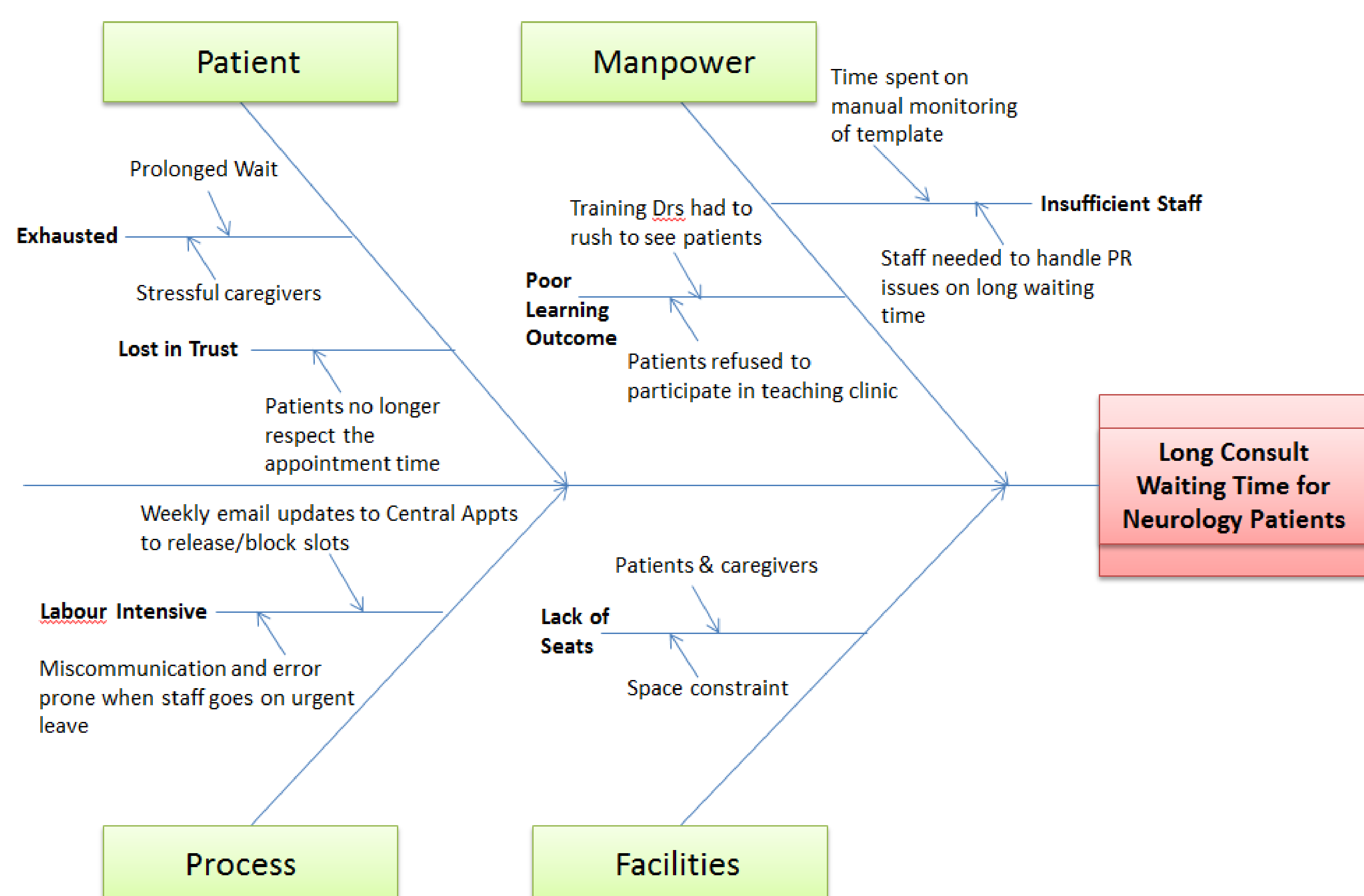


Figure 1: Ishikawa Diagram for RCA of Long Waiting Time

Results

The six months retrospective data collected indicates a **45% improvement** in the consult wait time. In October 2016, Neurology patients from the two piloted templates waited an average of 51 minutes for their consult appointment. In March 2017, the waiting time reduced to an average of 28 minutes. The crowd congestion situation in the clinic has also improved significantly as patients now spend lesser time waiting in the clinic.

The average percentage of **Patients Strongly Recommending** the services in the clinic rose from 74.3% to 85% after implementing the initiative. **Staff efficiency** from both Clinic and Central Appointments also saw an improvement as time could be channelled to handle other patient related issues.



Figure 2: Neurology template before & after introduction of "Non-released" slots

Consult Waiting Time

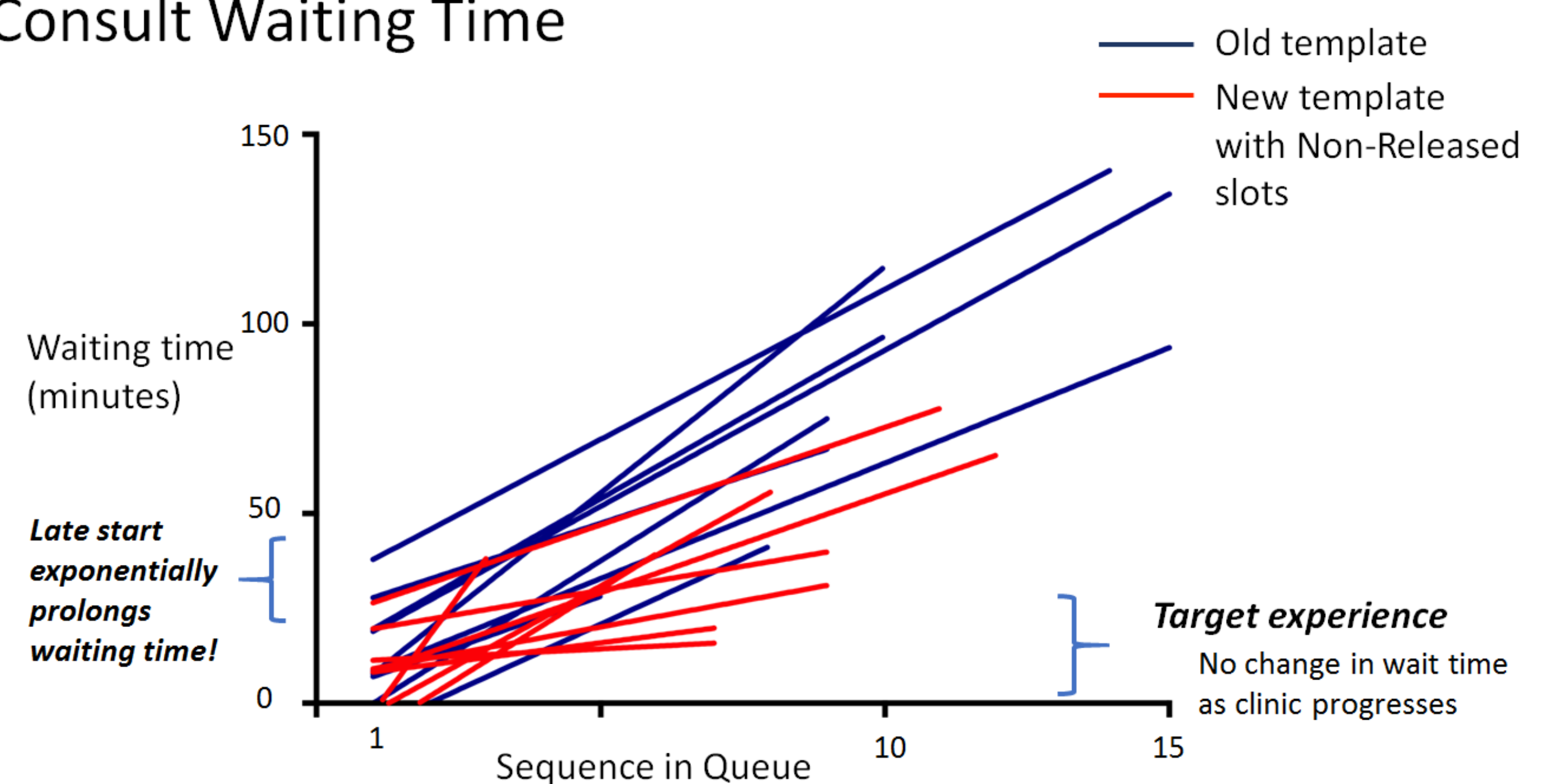


Figure 3: Consult waiting time before & after introduction of "Non-released" slots

Conclusion

Leveraging system and technology is the key to improving process. Not only did this initiative meet the objectives set to reduce the consult waiting time and boosting efficiency, it also meets the intangible element of improving patient experience and satisfaction.