



# Rationalisation of Clinic Resources Leading to Multi-disciplinary Clinic Re-organisation

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## Specific Aims :

Create growth for new incoming specialists and to allow for better distribution of workload within a team, based sub-specialty.

This realignment exercise creates an opportunity to enhance NCCS push towards greater multi-disciplinary team-based approach and integrated practice.

It allow a review of optimal utilisation of our limited clinic resources and to even out unequal usage.

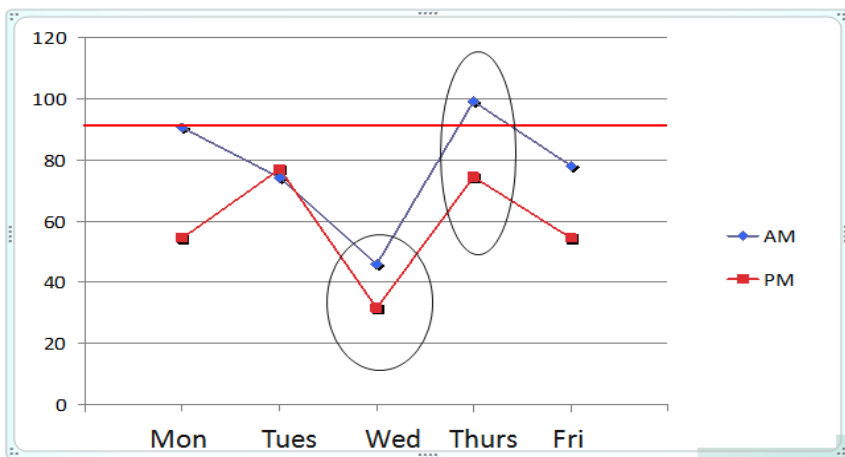
## Background:

This project arises from a suboptimal waiting time flagged in our MOH satisfaction survey in 2010.

Main issues identified are the limitation in clinic resources, suboptimal clinic utilisation, long wait at consultation, increasing number of clinicians coupled by the inefficient usage of clinic resources.

E.g. Variation in clinic utilisation

### Clinic A: Variation in Clinic Usage



## Hypothesis :

Increase number of specialists ≠ decrease waiting time

## Methodology:

The case load of each individual physician in NCCS was analysed for a period of 3 months in 2011.

This number was then divided by the number of weeks and by projected number of patient/clinic.

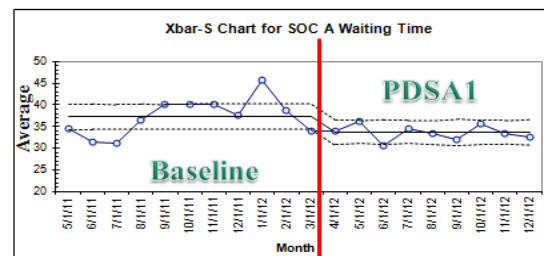
The physicians were then re-grouped into each tumour specific clinic and these allocated number of clinic slots were given back to the tumour sub-specific team and re-allocated with the consensus of physicians within each team.

## Results :

Comparison across 4 Speciality Oncology Clinics (SOCs) after the clinic resources optimisation

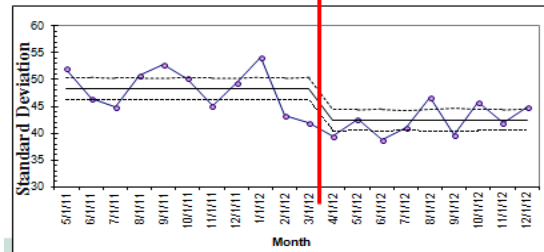
- ✓ Average waiting time and SD reduced
- ✓ Patient workload becomes more evenly distributed
- ✓ Turnaround time for phlebotomy service has decreased due to evening of resource utilisation.

### SOC Waiting Time for Consultation (SOC A)



Baseline (May 2011 – Mar 2012)  
Average = 37.2 mins  
Sample = 27257 patient visits  
Std dev = 48.3 mins

PDSA 1 –Clinic Resources Optimization(Apr 2012 – Dec 2012)  
Average = 33.7 mins  
Sample = 18737 patient visits  
Std dev = 42.4 mins

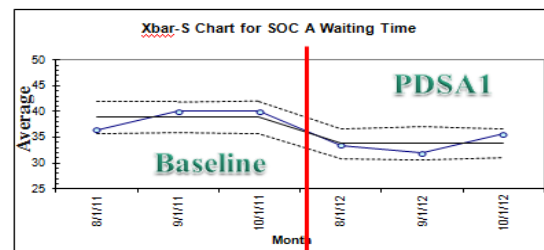


Waiting Time reduced from 37.2 mins [baseline] to 33.7 mins [PDSA 1]

Standard deviation reduced from 48.3 mins [baseline] to 42.4 mins [PDSA 1]

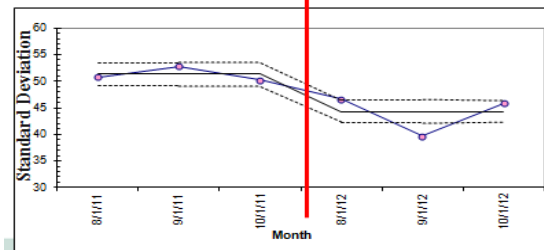
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### SOC Waiting Time for Consultation (SOC A)



Baseline (Aug – Oct 2011)  
Average = 38.9 mins  
Sample = 7399 patient visits  
Std dev = 51.3 mins

PDSA 1 –Clinic Resources Optimization (Aug – Oct 2012)  
Average = 33.8 mins  
Sample = 6113 patient visits  
Std dev = 44.3 mins



Waiting Time reduced from 38.9 mins [baseline] to 33.8 mins [PDSA 1]

Standard deviation reduced from 51.3 mins [baseline] to 44.3 mins [PDSA 1]

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## Moving Ahead :

- ✓ Continual optimisation - better monitoring of clinics with strict justification on clinic resources usage.
- ✓ Better crowd control with our Patient Relation Officers
- ✓ Visibility of Patient Waiting Time real time - PaRFoM to give "sight" to patient waiting time.
- ✓ Synergistic development of Cancer focus group service and research capability
- ✓ Collective push toward better delivery and integration of Oncology care to patients.