



Improving patient waiting time and experience by creative and controversial rostering change

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Aims (s)

The objective of the study was to implement key yet controversial roster changes in response to increased patient waiting times and complains with the aim of improving patient waiting times as well as reducing patient complains.

Methodology

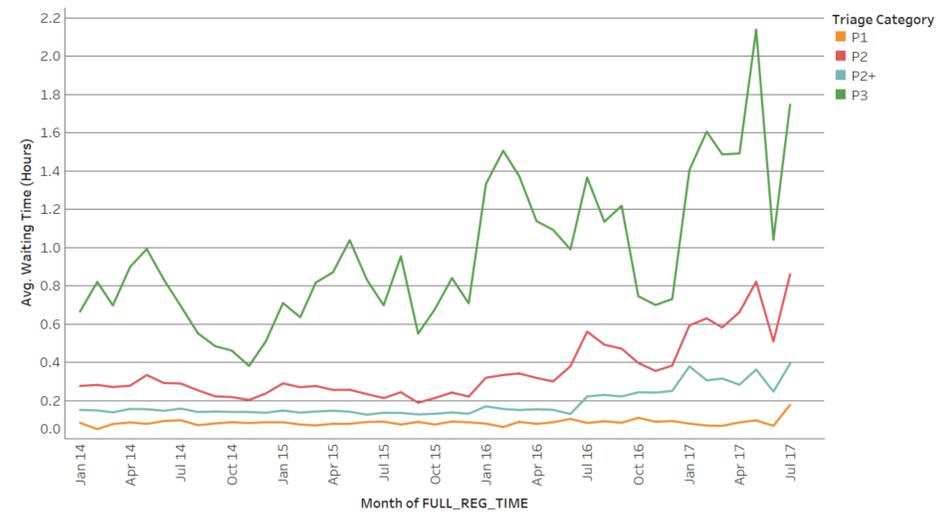
We identified the problem of increased patient waiting times and set out to explore potential reasons for this. We organized focus groups consisting of doctors and nurses within the department with the aim of identifying potential causes for increased waiting time. We also analyzed patient presentation patterns, waiting time trends, doctors consultation timings, seniority and other factors to determine potential caused. We then initiated bold roster changes and tracked similar variables for difference

Result

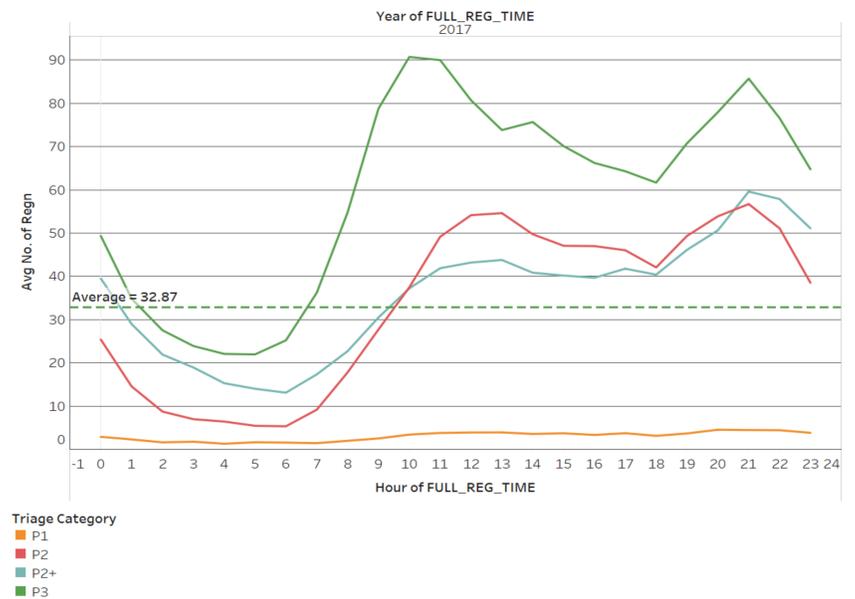
Key roster changes were implemented in phases in the month of October 2017 and included changing shift timings to fit in with patient presentation patterns, changing off day assignments, modifying deployment ratio to meet peak hours, including a senior leader into every shift and shortening work hours per shift. We also increased the number of locum doctors deployed to the department. Some of these moves were risky as they involved making doctors do more evenings and night shifts, which were regarded as "unfriendly". Shifting of off days were also done to minimize those on off during peak days, i.e Friday to Monday.

Key results: we started seeing a reduction in patient waiting times with the changes. Patient waiting times for category 2(15%) and 3(30%) dropped while the patient numbers remained stable. We found that number of doctor FTE (full time equivalent) and number of junior doctor hours correlated with patient waiting times. This allowed for lesser patients seen per hour per doctor, yet with improved the waiting times.

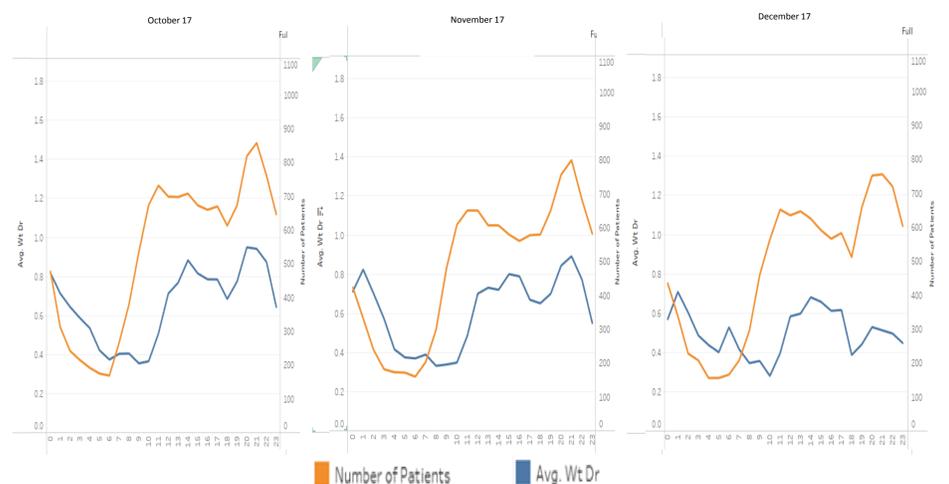
Increasing Waiting Times



Hourly Patient Arrival Trend



Widening Gap between number of patients and average waiting time to see Dr showing lower waiting time relative to the number of presenting patients



Conclusion

Steps were taken to identify potential causes of increased waiting times. Changes were subsequently made which yielded good initial results. The challenge remains to ensure that the initial positive results obtained is sustainable for the longer term.