



Introduction



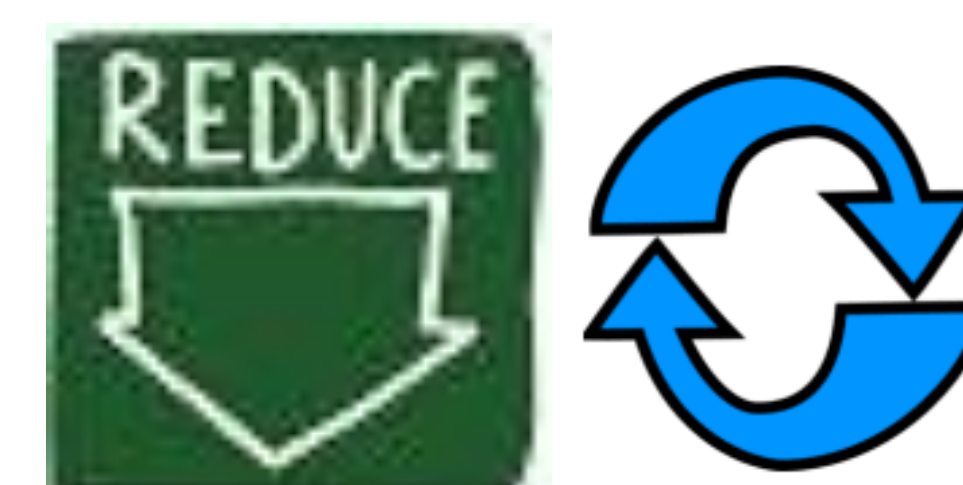
Appointments for treatments and procedures are recorded manually on paper for SOC Clinics. Patients who contact Call Centre will be redirected to the clinic to get the information he/she needs.

Aims



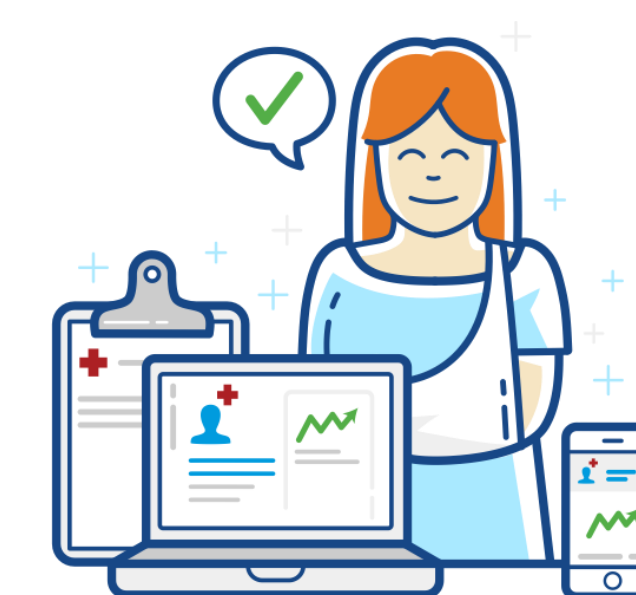
1) To streamline operations by switching to book appointments digitally

2) Reduce rework and errors.



3) Facilitate tracking of Workload

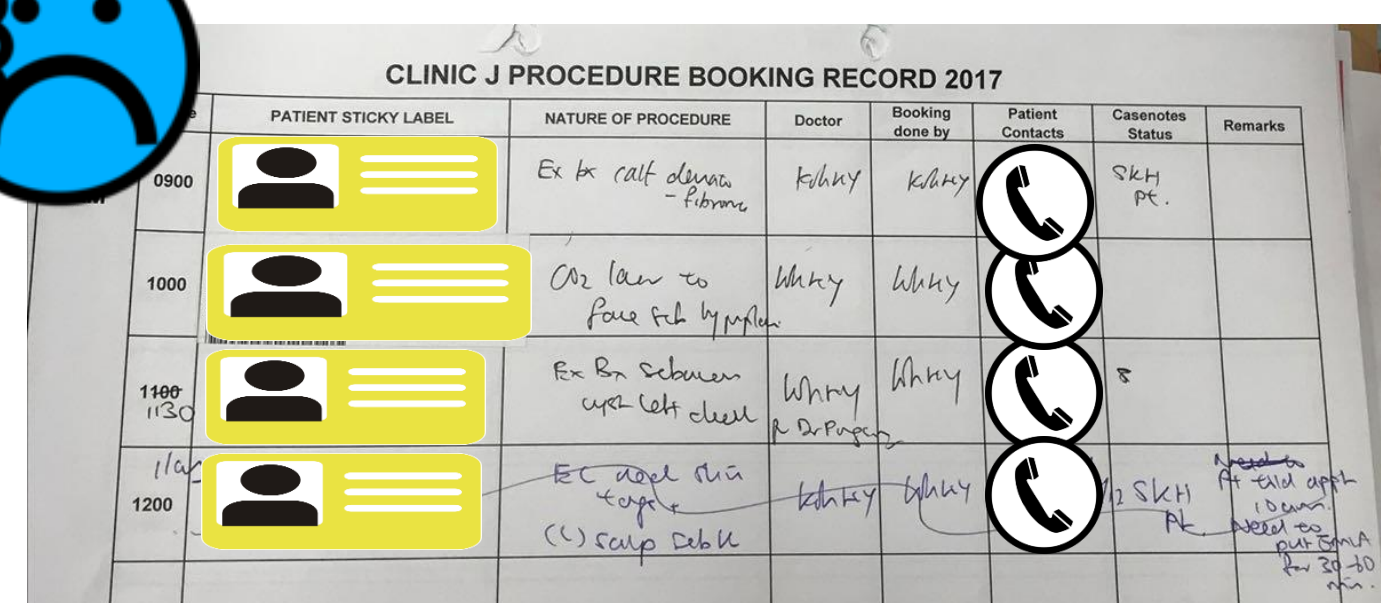
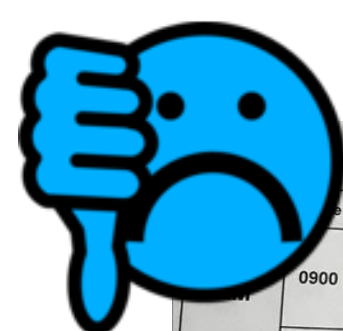
4) Improve productivity and enhance communication, patient satisfaction and experience.



Problem/Challenges

2) It is not productive as patients are not able to check their appointments through Call Centre and have to be directed to many other departments to get the information they needed.

1) Manual recording of appointments on paper has caused much inconveniences to patients and staff.



Methodology

1) The clinic team met up to review the appointment set up for booking in the Outpatient Appointment System (OAS).

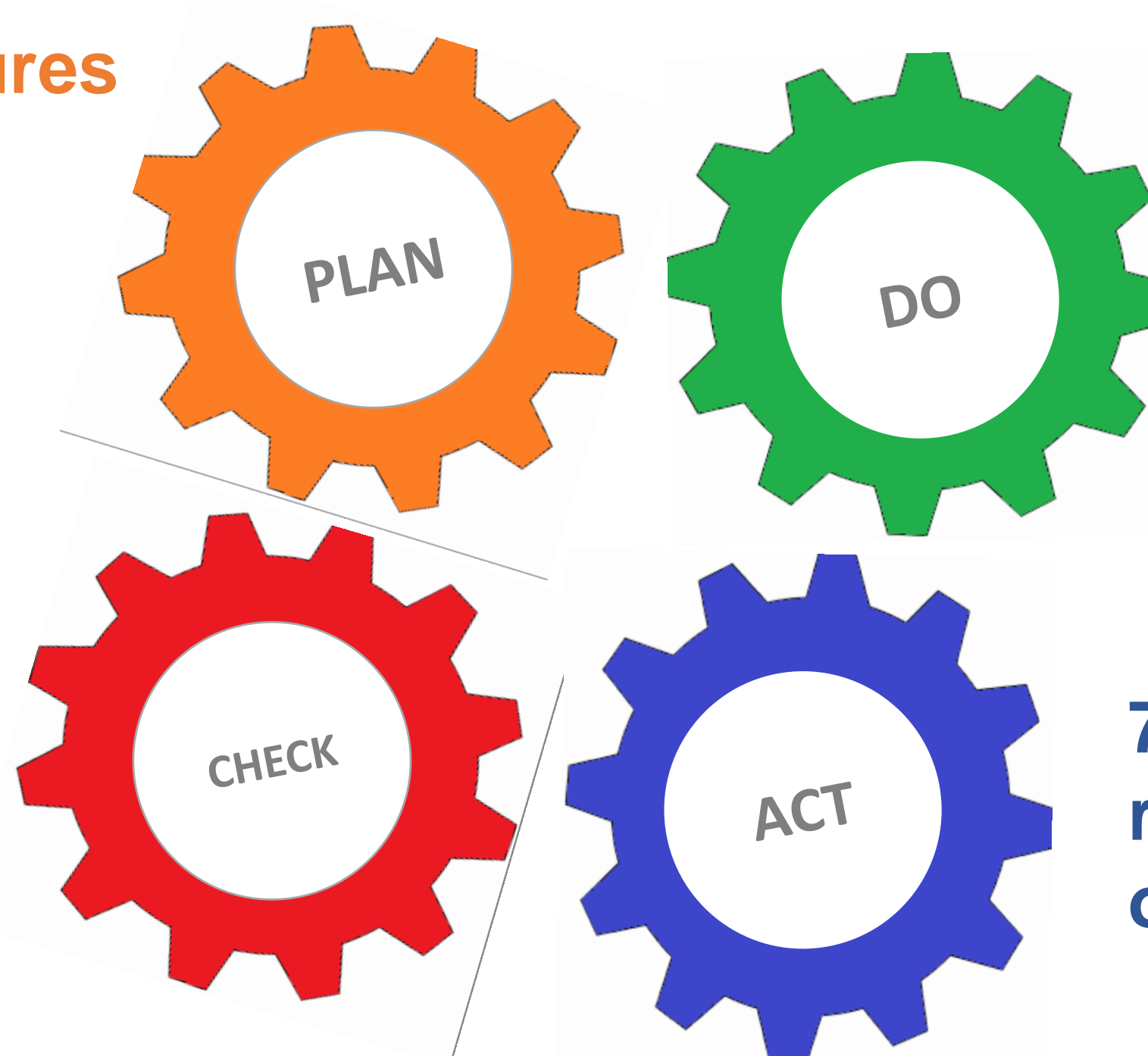


2) The clinic team studied the booking process for treatments and procedures done in SOCs.

3) Identified the stakeholders involved, i.e Call Centre, HIMS etc

5) The review showed that it is feasible to explore adopting the same workflow as all the other appointments for procedures and treatments.

6) Continual feedback sessions were conducted to review the challenges faced during the implementation.



4) Feasibility study was piloted at Clinic J.

Plan Appt Slot	Overbookable Plan Appt Slot	Actual
Appt Date	11/06/2018 Mon	Appt Date
Resource	SOC1 TREATMENT ROOM	Resource
Setup	Normal	Setup
Taken	First	Followup
Available	First	Followup
Available	First	Followup
Overbooked	0	0
0830	[1 FP] GCLJ-HDGENC215 [FP]	0830
0845	[1 FP] GCLJ-HDGENC215 [FP]	0845
0900	[1 FP] GCLJ-HDGENC215 [FP]	0900
0915	[1 FP] GCLJ-HDGENC215 [FP]	0915
0930	[1 FP] GCLJ-HDGENC215 [FP]	0930
0945		0945

7) Initiative was rolled out to the other SOCs.



Results

1) Elimination of rework and using of manual records all together as appointments are confirmed in OAS instantly.

2) Time spent tracing casenotes is reduced significantly as HIMS is able to pull out the records from the system.



5) Prompt reply to the enquires related to procedure and treatment cases improved staff's productivity.

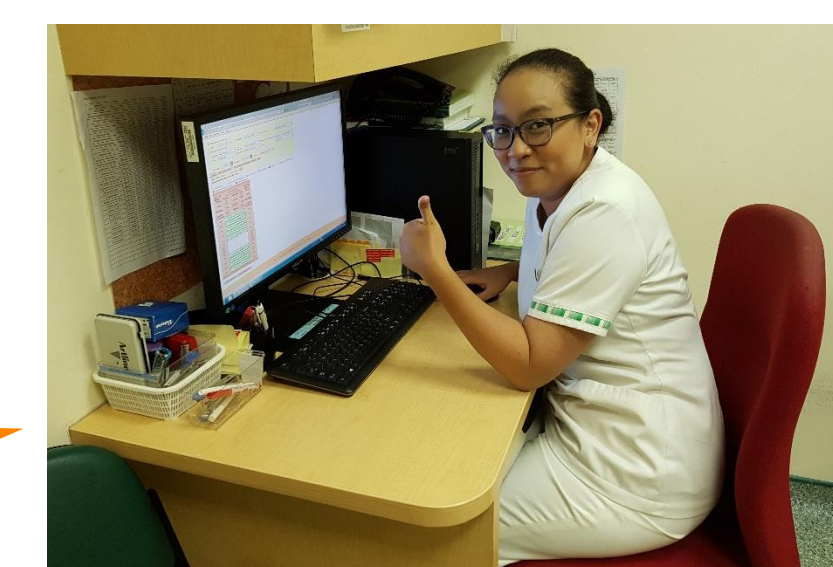
3) Minimized errors made by staff.



4) 100% of the clinic in SOC that are eligible has taken up this workflow.

Feedback from the team:

"It is easier for us now as we can always check against OAS for patients that has treatment and procedure appointment."



Conclusion

There are many processes that have been in place for a long time that require consistent effort from the team to review and update. Proper communication channel and collaboration with stakeholders is essential to enable the implementation of new initiatives. With this implementation, it allows IT, HIMS and SOC to discard old practices and to create a new workflow that is able to obtain a win-win solution for both patients and users.