

Improving the Care Processes For Total Knee Replacement (TKR) Patients in Sengkang Community Hospital (SKCH)

Team Members:

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INTRODUCTION

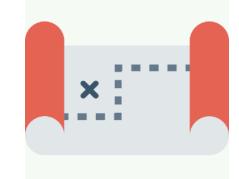
This poster presents the approach taken to improve care processes for TKR patients admitted to SKCH by putting key interventions in-place for value-driven and improved care over 6 months.



<u>AIM</u>

To improve:

- Care team's efficiency
- Patient's experience through a more coordinated approach of interacting with patient; and
- Discharge planning process



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METHODOLOGY

improved.

From Oct 18 to Apr 19, 6 TKR patients were shadowed from admission to discharge (before and after interventions were tested).

The scope of shadowing were:-

- Where the patient went;
- Who the patient interacted with;
- What the patient experiences or does not experience;
- Time spent: At each location and/or interaction with staff
- Aspects of the experience that go well or could be

OBSERVATIONS & INTERVENTIONS

After shadowing the first 2 patients, following were tested:



A) Admission to ward & ward routine

Observations:

- Patients with similar condition (i.e. TKR) were admitted to different wards based on availability of beds. There was no designated ward for TKR patients.
- Clinical team assessed patients at different timing for similar purposes
- Increased number of manpower

Intervention #1: To place patients with similar conditions in the same cubicle

B) Discharge

Observations:

 Preparation for discharge only start on D-1 and patient was discharged at 1300hrs

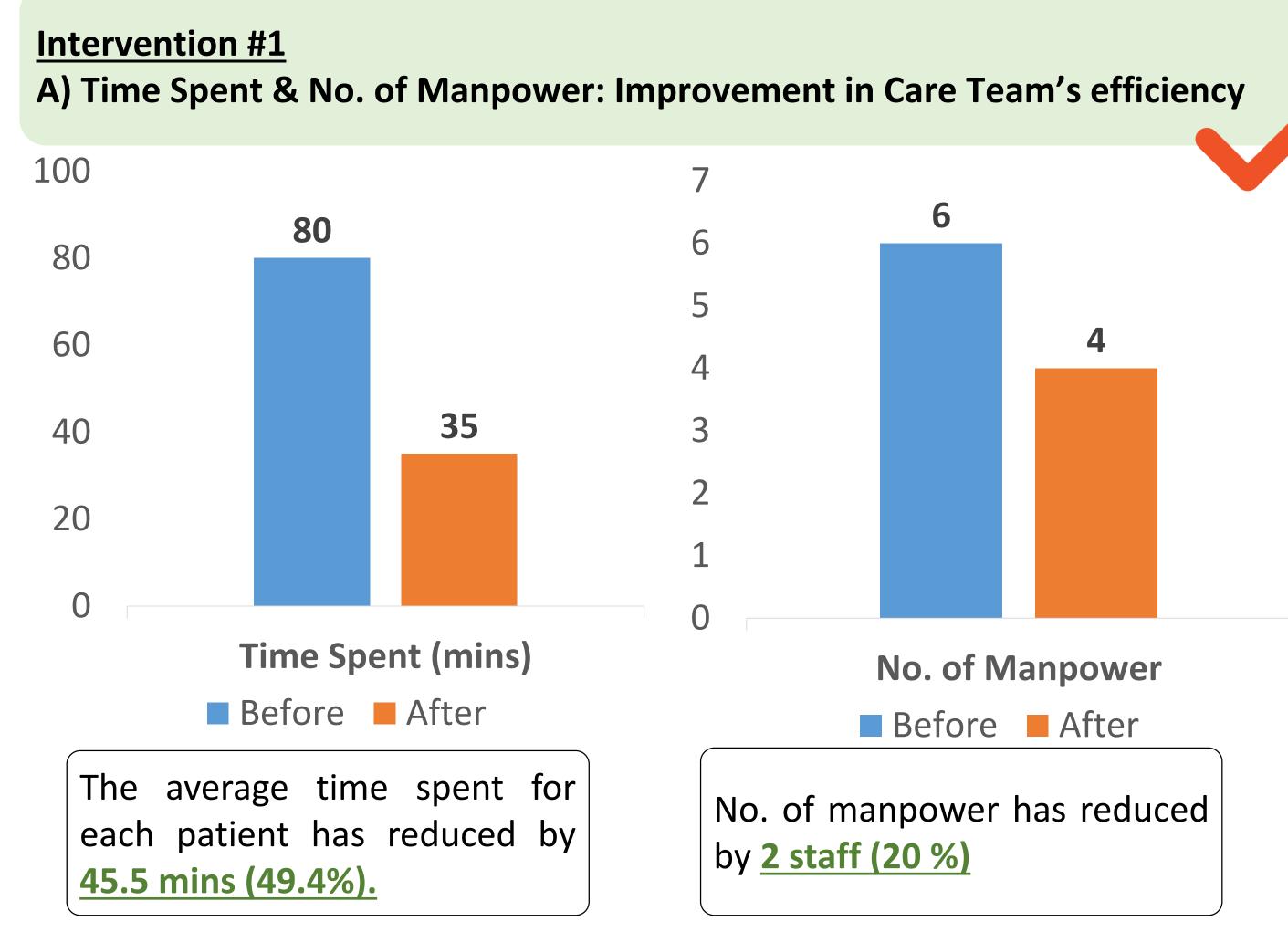
Intervention #2:

Review discharge processes that can translate into better patient experience and outcome. Recommended enhancements:

- 3 days before discharge (D-3): Clinical teams to prepare discharge documents
- D-2: Send prescription to Pharmacy
- D-1: Patient received all documents for discharge
- Day of Discharge: Target for Patient to be discharged by 1100hrs



RESULTS & CONCLUSION



B) Patient's Experience: More data is required to support improvement in patient's experience through a more coordinated approach of interacting with patient.

Feedbacks	
Patient	Feedback (verbally) that she felt more assured of the care knowing that all members of the care team are working together.
Patient Experience Survey	 1 out of 4 patients provided positive feedback of the care team Feedback will not be obtained if discharge date is earlier than the planned discharge date or patient(s) do not wish to provide feedback.
Care team	Clear and common understanding between patient and care team on care plans for patient

Patient does not have to repeat his/her answer to similar

questions asked by the care team members at different timing.

Intervention #2: Enhanced Discharge Process



After intervention, the enhanced discharge planning process was able to meet the targeted time of discharge at 1100hrs.

Patient	#1	#2	#3	#4
D-3	No			Yes- Discharge documents prepared
D-2	No	Prepared discharge documents & medications		Yes-Prescription sent to pharmacy
D-1	 Patient requested to be discharged the next day Prepared discharge documents & medications 		No	Yes- Discharge documents & medications given to patient
Day of Discharge	 1100 hrs Discharge documents & medications given on the day of discharge 			1100 hrs

Moving Forward

- Patients with similar conditions to be placed in same cubicle. This also allows the ward care team to better coordinate their review of the patients to achieve the cost saving.
- Continued monitoring is required to ensure the discharge planning process is adopted consistently for all patients as only four patients were observed.