Inter-Institutional Collaboration for Referral Workflow Optimisation is Mutually Beneficial to Improve Stewardship of Healthcare Resources

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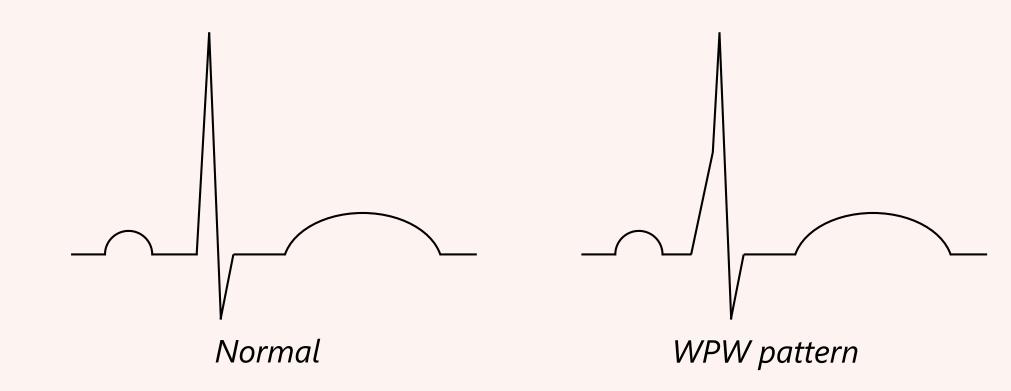
Background

• The **SAF Cardiac Fitness Centre (SCFC)** is a facility in NHCS providing cardiac screening & consultation services for pre-enlistees & in-service military personnel referred by SAF medical officers.

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- **Pre-enlistees** are commonly referred for ECG abnormalities that may hint at underlying **undiagnosed cardiac conditions** associated with adverse cardiac events during physical training.
- The Wolff-Parkinson-White (WPW) pattern is one such abnormality. Pre-enlistees suspected to manifest this pattern on screening ECG comprise about 180-240 referrals annually to SCFC, to either confirm or refute this concern.



• Frequently, following a review by a specialist cardiologist at SCFC, the suspicion is refuted. This leads to undesired healthcare outcomes such as patient anxiety, fruitless consumption of finite outpatient resources & higher health expenses.

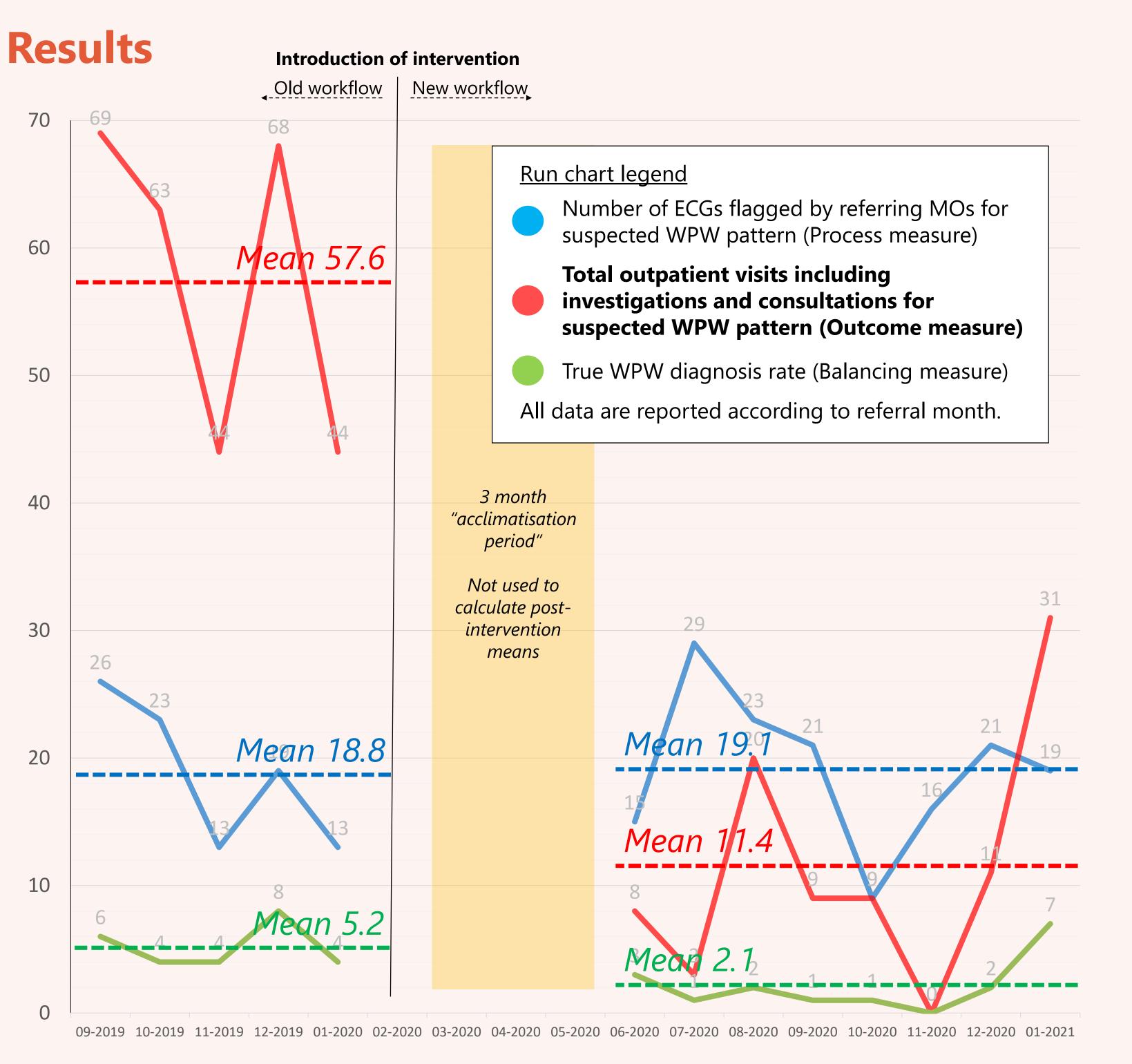
Aim

This project was established as a collaboration between SCFC & MCC, to reduce outpatient visits for suspected WPW pattern by at least 75%, without compromising on the existing standards of medical diagnosis.

Methods

- Stakeholders from both institutions performed a process & cause analysis. Two interventions were selected for implementation in a PDSA cycle:
- 1. Streamlining of both institutions' workflows to permit specialist input to be sought upstream; straightforward cases to be assessed without physical review or investigation
- 2. Feedback loop provided on correctly & incorrectly identified ECGs with aim of modifying referral behaviour.

Intervention Pre-intervention WPW pattern Screening ECG suspected by MO Referral created MCC SCFC Other investigations (KIV) Consultation by WPW pattern suspicion refuted Treadmill test SCFC CVM → WPW pattern suspicion confirmed Post-intervention Feedback loop to MOs on correctly & incorrectly identified "suspicious" ECGs Process measure WPW pattern Screening ECG suspected by MO **Not suspicious = No referral created Upstream review** of ECG by CVM Referral created MCC Other investigations (KIV) Consultation by Treadmill test SCFC CVM (EP) The WPW pattern suspicion confirmed Balancing measure Outcome measure



• Estimated annualised **healthcare cost savings of \$101,000** by MCC in reaching diagnoses for this referral pathway.