



IMPROVING WAITING TIME FOR CONSULTATION AT KKH SUBSIDISED CLINICS

Singapore Healthcare Management 2022

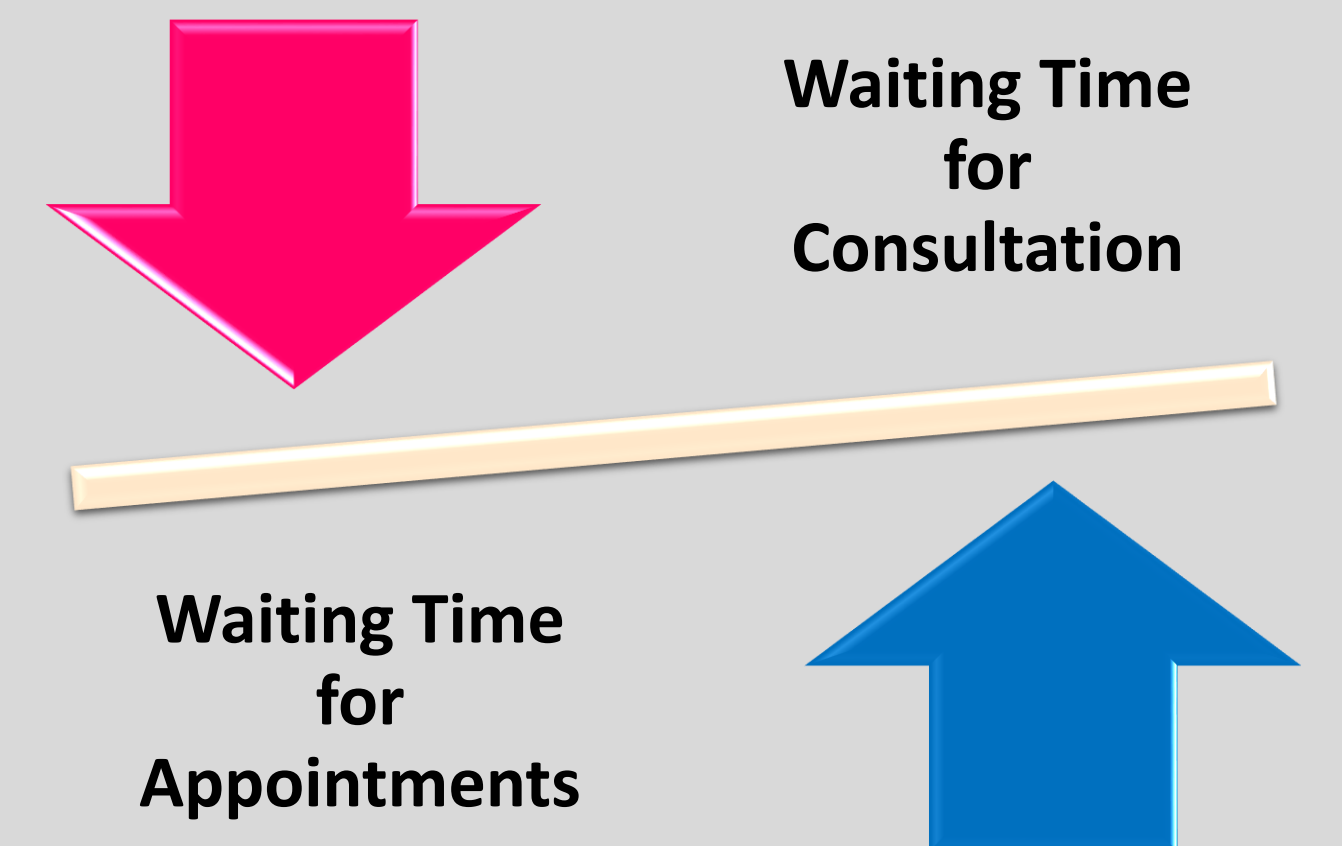


Cheah Rui'En Lynette, Division of SAS
Tay Siew Guek, Specialist Clinic C

Dr Seet Meei Jiun, Consultant, Department of O&G
Dr Manisha Mathur, Senior Consultant, Department of O&G

1. BACKGROUND

Clinics frequently receive feedback from patients on consultation waiting time. To improve the overall patient experience, subsidised General Obstetric and Gynaecology (O&G) Specialist Outpatient Clinics in KKH were challenged to implement sustainable initiatives to improve the Waiting Time for Consultation (WTC). The Ambulatory team consisting of clinicians, nurses, administrative and clinic operations staff worked closely together to pilot a series of initiatives at Specialist Clinic C, which is the dedicated clinic for subsidised patients. The impact on WTC performance was monitored while balancing workload and accessibility to appointments.



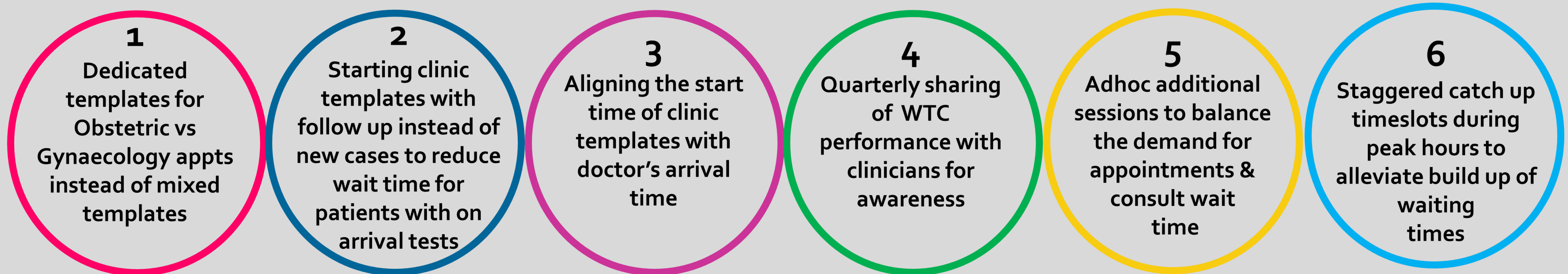
2. OBJECTIVE

To improve the percentage of patients with consult wait time ≤ 30 minutes from 57% to 95%, in line with hospital targets and to ensure the performance is sustained.

3. IMPROVEMENT APPROACH

A series of modifications to appointment templates was introduced between Nov 2019 to April 2022 to make it more realistic and reflective of actual service time on the ground, starting with the separation of mixed appointment templates. As Gynae cases tend to vary in complexity, this often caused long wait times for straightforward follow up Obstetric cases, who could complete their consult within five minutes.

From Nov 2020 onwards, two catch up timeslots of 10-15 minutes each were progressively implemented for Gynae templates during peak hours to alleviate the build up of waiting times due to complex cases. This was eventually rolled out to Obstetric clinics in March 2022. Performance indicators were also shared with clinicians regularly for awareness.



4. RESULTS

With reference to Fig 1 below, the percentage of patients with consult wait time ≤30 minutes has improved from **57% in Nov 2019**, before any initiatives were introduced, to an average of **66% in FY21** even though the average monthly clinic workload increased by 7%.

While there are many confounding factors affecting WTC, such as blocking of sessions due to manpower availability, the improvement in WTC performance was mainly attributed to the staggered catch up timeslots, as observed from the significant improvement when the initiative was first piloted with Gynaecology templates.

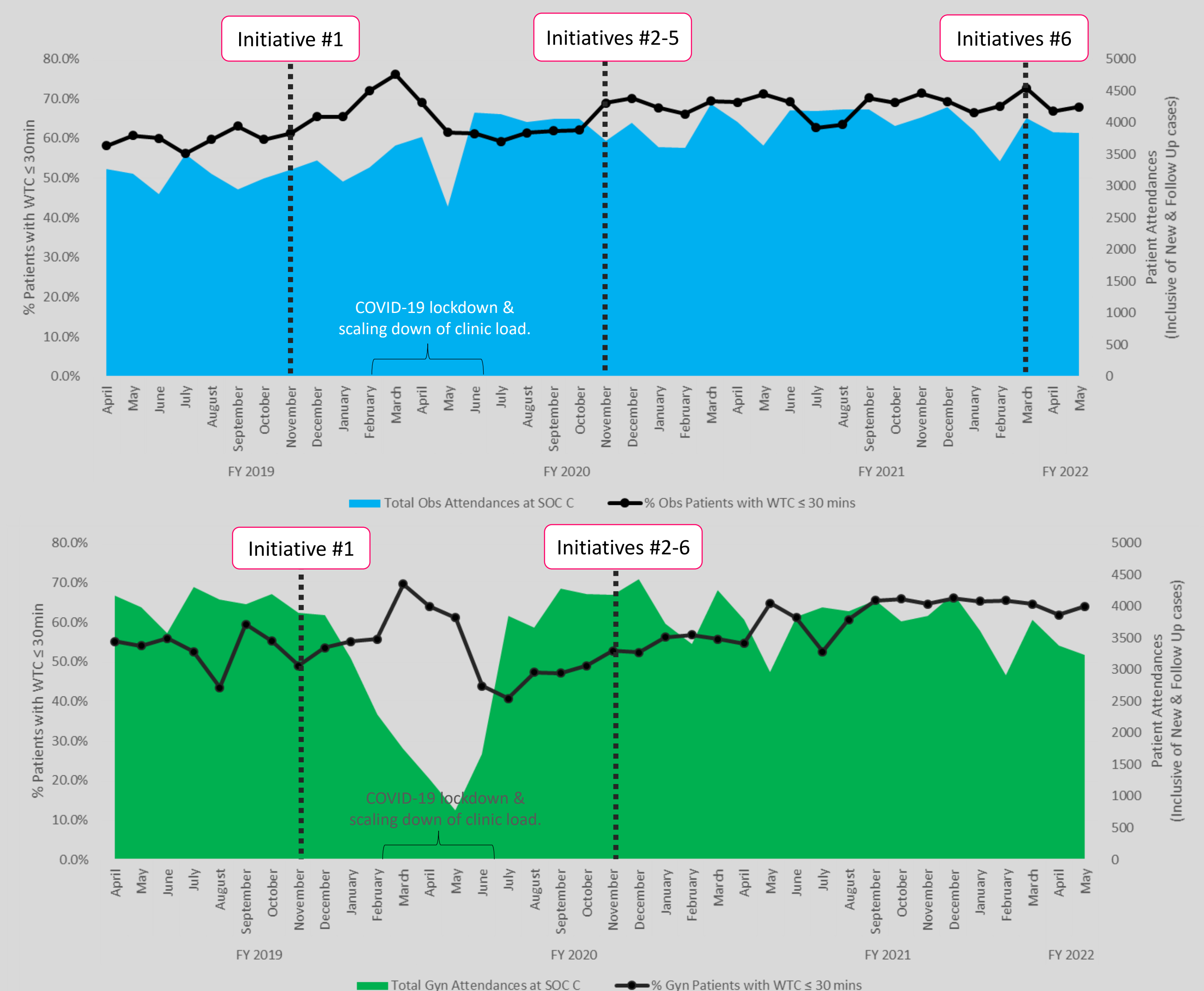


Fig 1: Obstetric attendances (in blue), Gynaecology attendances (in green) and total clinic attendances (in orange) against the % Patients with WTC ≤ 30 min at Specialist Clinic C.

5. CONCLUSION

While the department has some way to go in achieving the target of 95% of subsidised clinic patients seen within 30 minutes, the improvement in WTC performance has been encouraging given the challenging nature of balancing patient workload and accessibility to appointments. As catch up timeslots have proven to have the most significant impact, other clinics have since implemented this in some of their templates. The team will also continue to monitor and review the performance to determine if additional or longer catch up timeslots are beneficial.