



Singapore Healthcare Management 2023

Reduction of inappropriate referrals by Business Office

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BACKGROUND

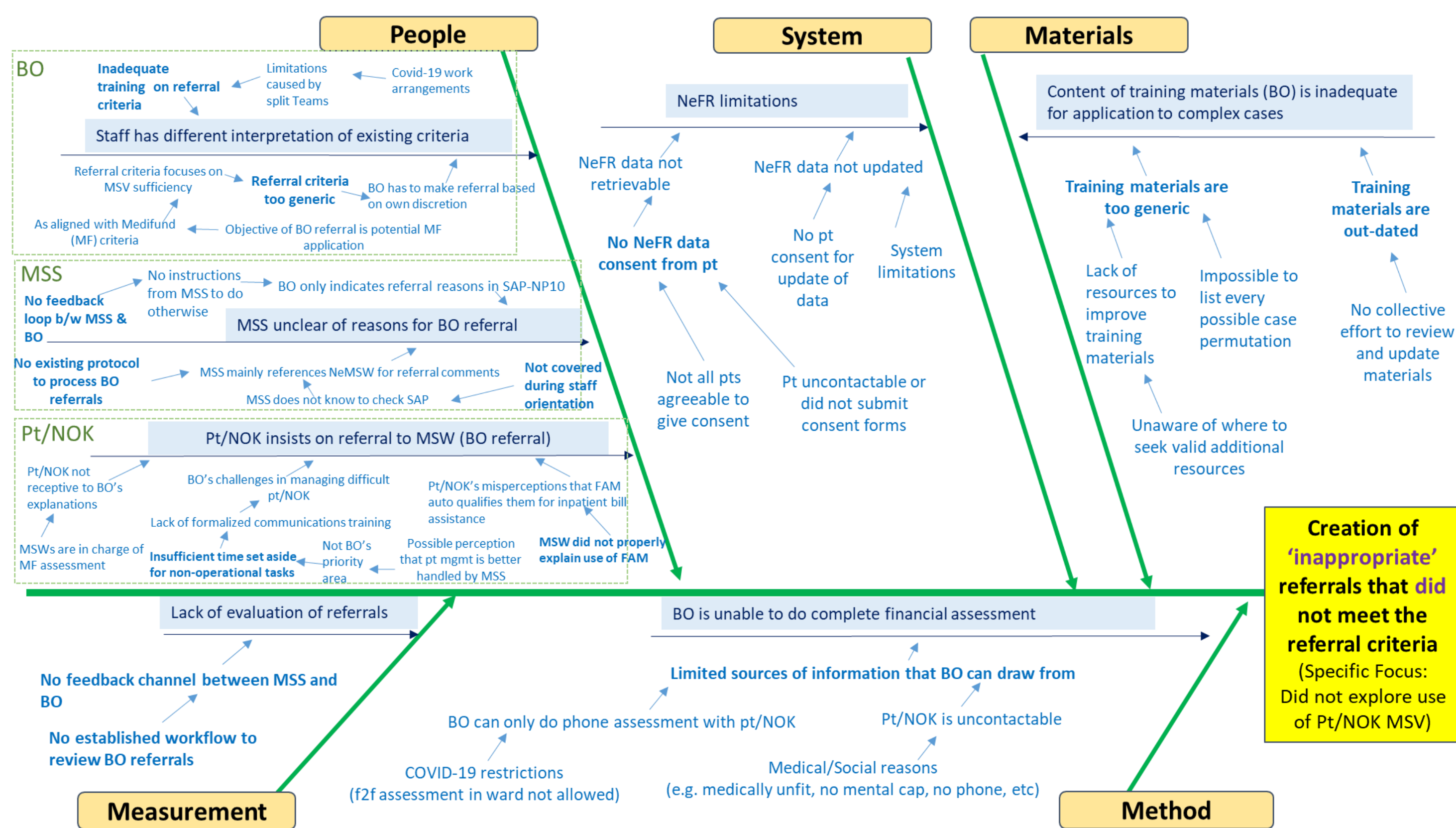
Medical Social Services (MSS) receives referrals from Business Office (BO) to request for financial assistance for needy inpatients, of which 20% were found not to meet referral criteria during the surveyed period.

MISSION STATEMENT

The team aimed to decrease the inappropriate BO referrals by 20% within 6 to 9 months, so as to improve patient experience and reduce administrative workload of staff involved.

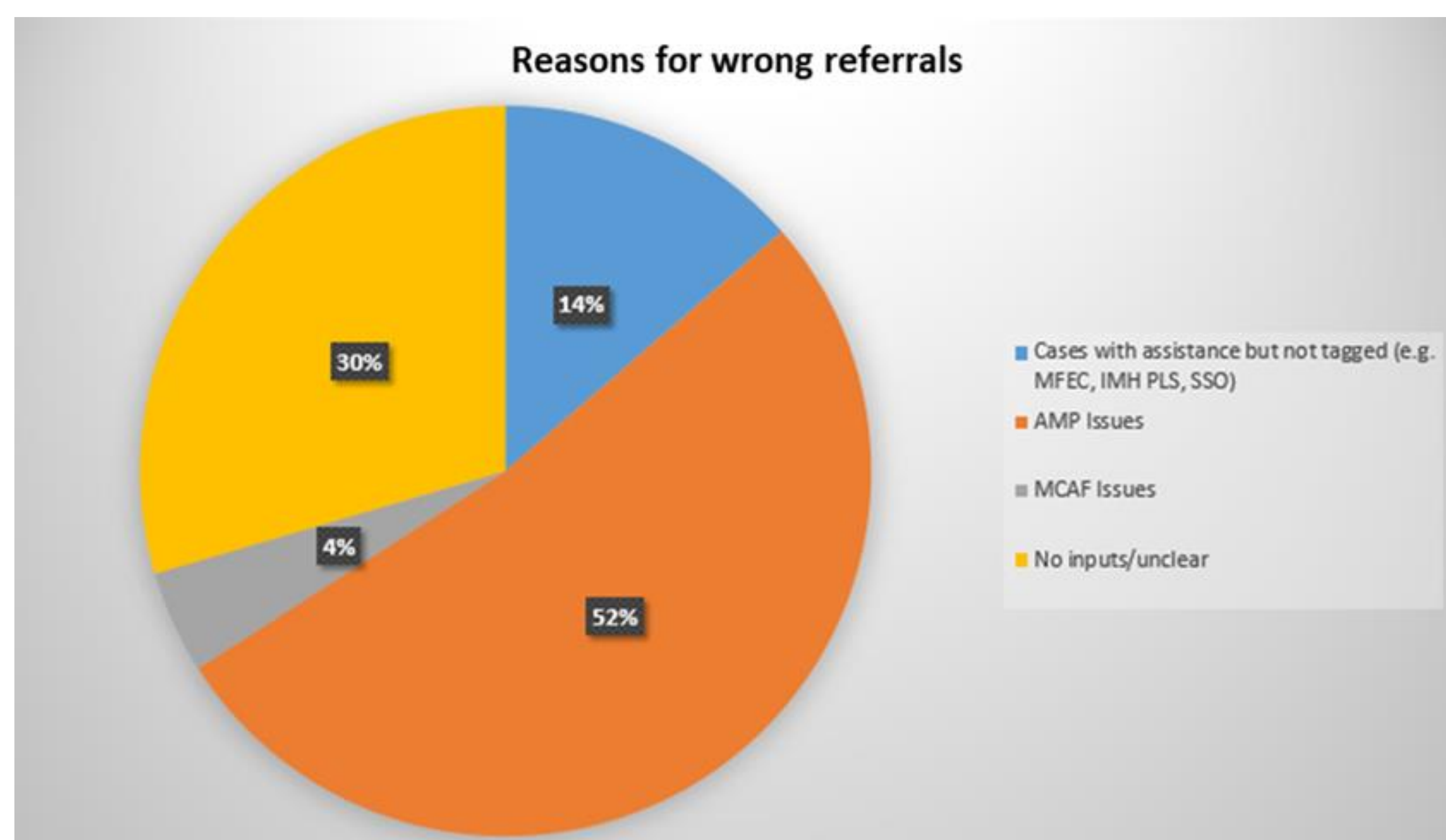
METHODOLOGY

The team, comprising MSS and BO representatives, commenced focused group discussions to brainstorm reasons for inappropriate BO referrals. Root causes were identified using a Cause-and-Effect diagram and Five Whys methodology.



Referral reasons for BO referrals were reviewed over a period of two years and assessed for appropriateness according to existing referral criteria. Upon analyzing the data, it was found that most of the inappropriate BO referrals were attributed to the issue of "Additional Medisave Payer (AMP) not explored".

BO and MSS held multiple focused group meetings to review and clarify the referral criteria, discuss and understand challenges faced by both parties with regard to BO referrals. During the process, there were also interim discussions about possible solutions.

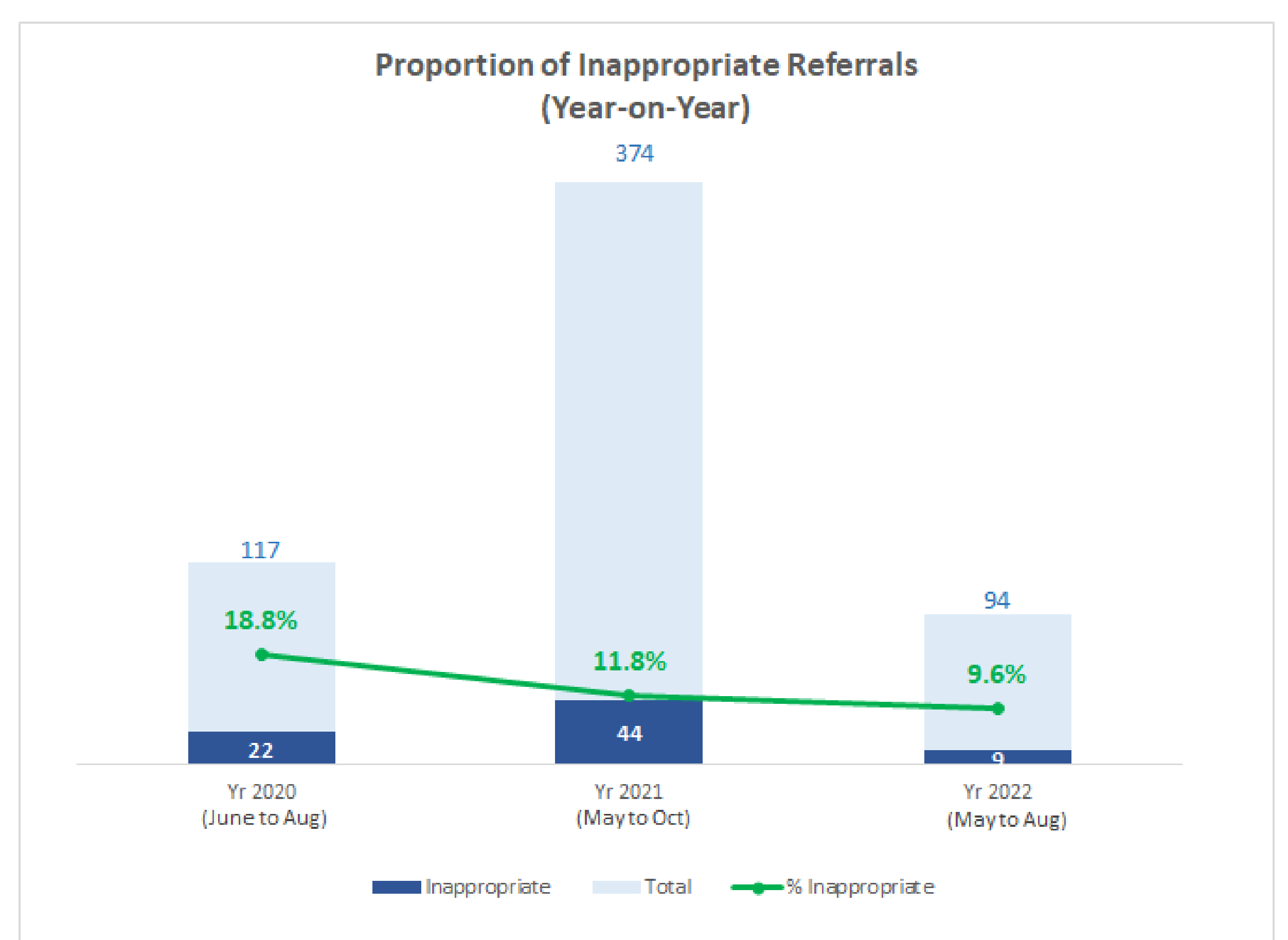


Wrong referrals: 44/260 (~17%)

RESULTS & SUSTAINABILITY

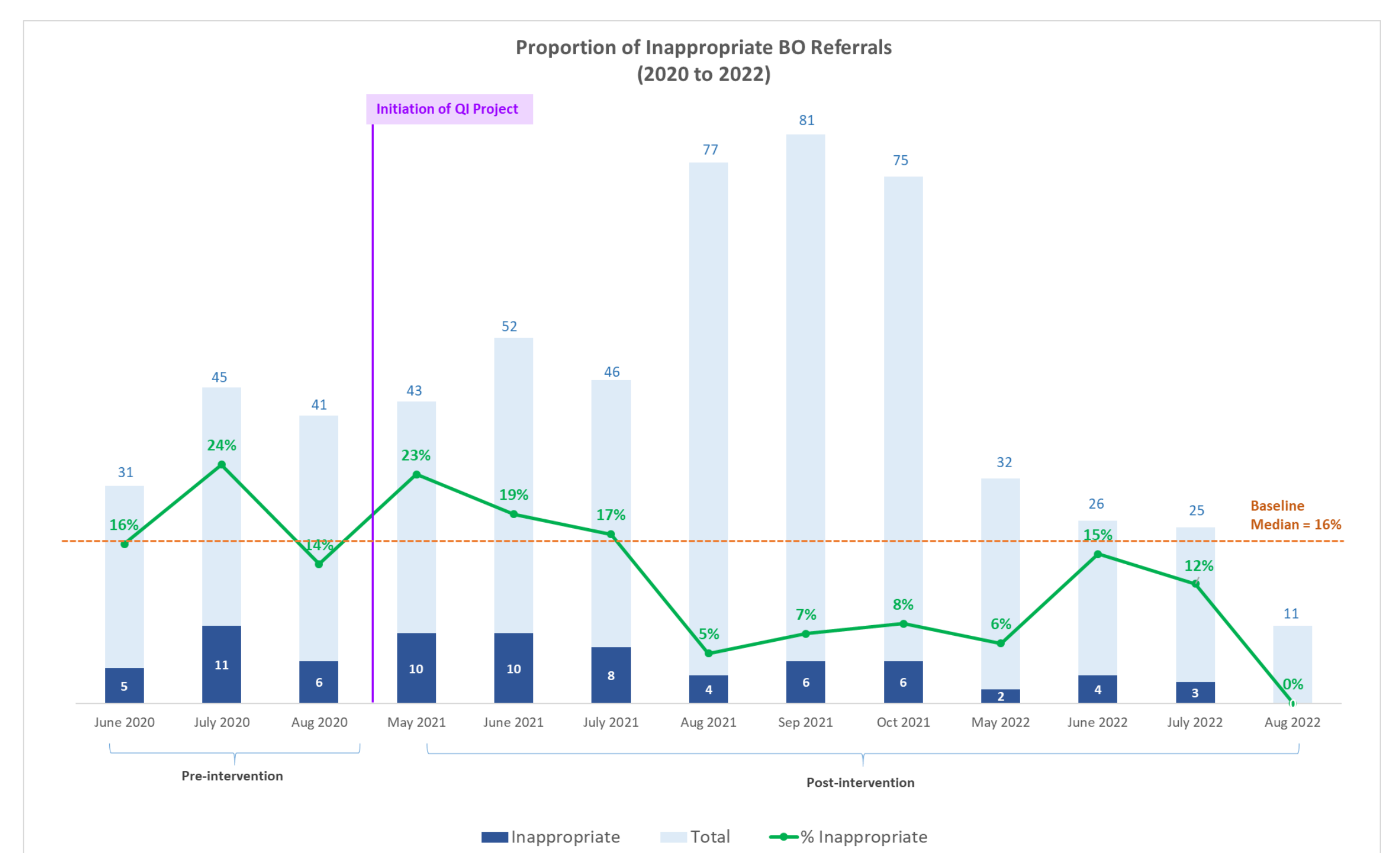
Following the discussions, BO members explained and reiterated the clarified referral criteria to BO's Financial Counselling (FC) staff, to ensure appropriateness of referrals. BO members also ensured clear documentation of referral reasons by FC staff, in shared IT systems.

These interventions effectively addressed 5 out of 13 identified main root causes of inappropriate referrals.



The results show an overall decrease in the percentage of inappropriate BO referrals, over a period of 16 months, from 18.8% in year 2020, to 9.6% in year 2022.

The meetings between MSS and BO served as a key intervention in itself, as it created a vital communication platform for both departments to discuss and provide feedback on issues faced, where other key root causes (e.g. clarity in referral criteria) were also addressed, hence resulting in the observed decrease in inappropriate BO referrals over our review period, and achieved our project aim.



CONCLUSION

With the reduction of inappropriate BO referrals, we hope that patient experience has been improved through service right-siting, and administrative load reduced for BO and MSS staff, especially amidst challenging caseloads and manpower issues during the Covid-19 period.