

Project Title

Increase Rate of 11am Discharge in Ward 13B

Project Lead and Members

Project lead: Ms Wang Qian

Project members: Dr Vincent Ng, Dr Lee Tung Lin, Dr Kesigan Sayalolibavan, Alyssa Chua, Tan Yih Sin, Lee Siu Ching, Hazwani and Ten Wei Qing

Organisation(s) Involved

Tan Tock Seng Hospital

Healthcare Family Group(s) Involved in this Project

Allied Health, Ancillary Care, Medical, Nursing

Applicable Specialty or Discipline

Neurology, Neurosurgery, Ward, Inpatient Pharmacy

Project Period

Start date: January 2019

Completed date: December 2019

Aims

To increase discharge rate before 11am in Ward 13B from 24% to 70% in 6 months

Project Attachment

See poster attached/below

Background

See poster attached/below

Methods

See poster attached/below

Results

See poster attached/below

Lessons Learnt

See poster attached/below

Conclusion

See poster attached/below

Additional Information

Accorded the NHG Quality Day 2021 (Category C: Developing a Flexible & Sustainable Workforce) Merit Award

Project Category

Care & Process Redesign

Access to Care, Bed Occupancy Rate

Quality Improvement, Work Redesign

Keywords

Discharge Rate, Workflow simplification

Name and Email of Project Contact Person(s)

Name: Ms Wang Qian

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Mission Statement

To increase discharge rate before 11am in Ward 13B from 24% to 70% in 6 months

Team Members

	Name	Designation	Department
Team Leader	Wang Qian	Nurse Clinician (NC)	Ward 13B
Team Members	Vincent Ng	Consultant	Neurosurgery
	Lee Tung Lin	Medical Officer	Neurology
	Kesigan Sayalolibavan	Medical Officer	Neurosurgery
	Alyssa Chua	Assistant NC	Ward 13B
	Tan Yih Sin	Senior Staff Nurse	Ward 13B
	Lee Siu Ching	Assistant Nurse	Ward 13B
	Hazwani	Patient Service Associate	Ward 13B
	Ten Wei Qing	Pharmacist	Inpatient Pharmacy

Mentor: Ms Senifah Bte Radi
Sponsor: Ms Mariam Piperdy

Evidence for a Problem Worth Solving

1. Long waiting time for admission to A class ward

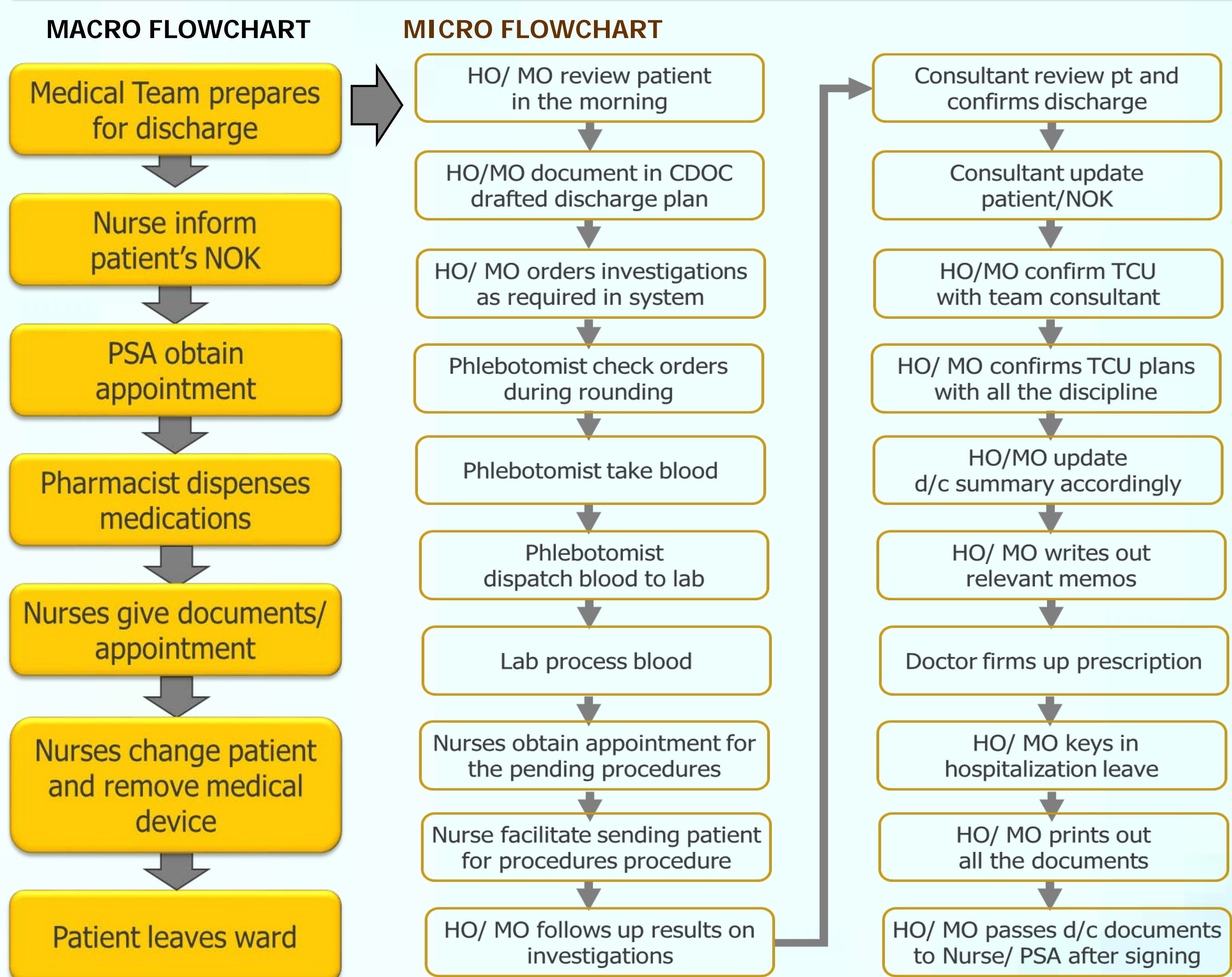
TTSH ED Bed Wait Time for A Class (From Bed Request To Ward Actualisation)
2nd Dec 2018 to 5th Jan 2019

Bed-Wait-Time in Hours	Week 1	Week 2	Week 3	Week 4	Week 5
Max Waiting Time	5.9	6.5	8.4	5.6	6.6
Total Cases	39	45	39	33	49

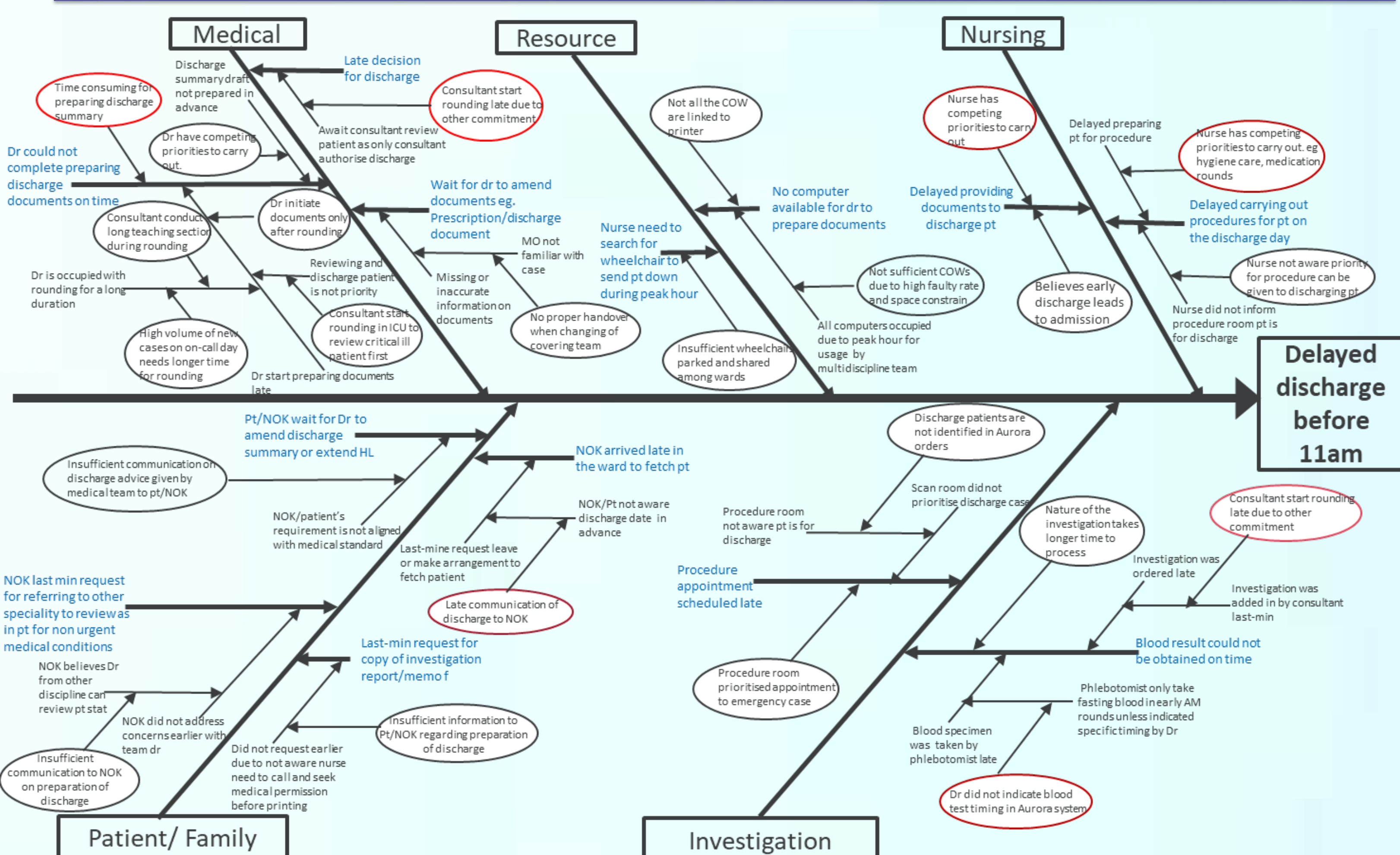
Patients have to wait maximum **6 to 8 hours at ED** for a bed in A Class Ward

2. Demand for bed in A Class Ward is high

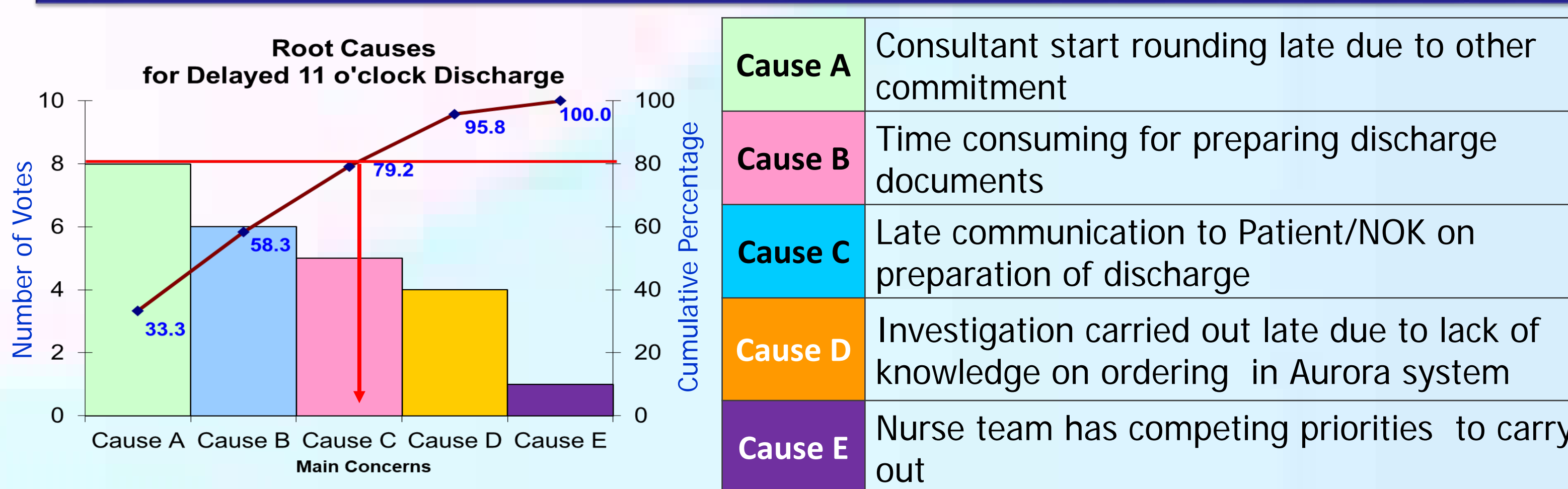
Flow Chart of Process



Cause and Effect Diagram



Pareto Chart



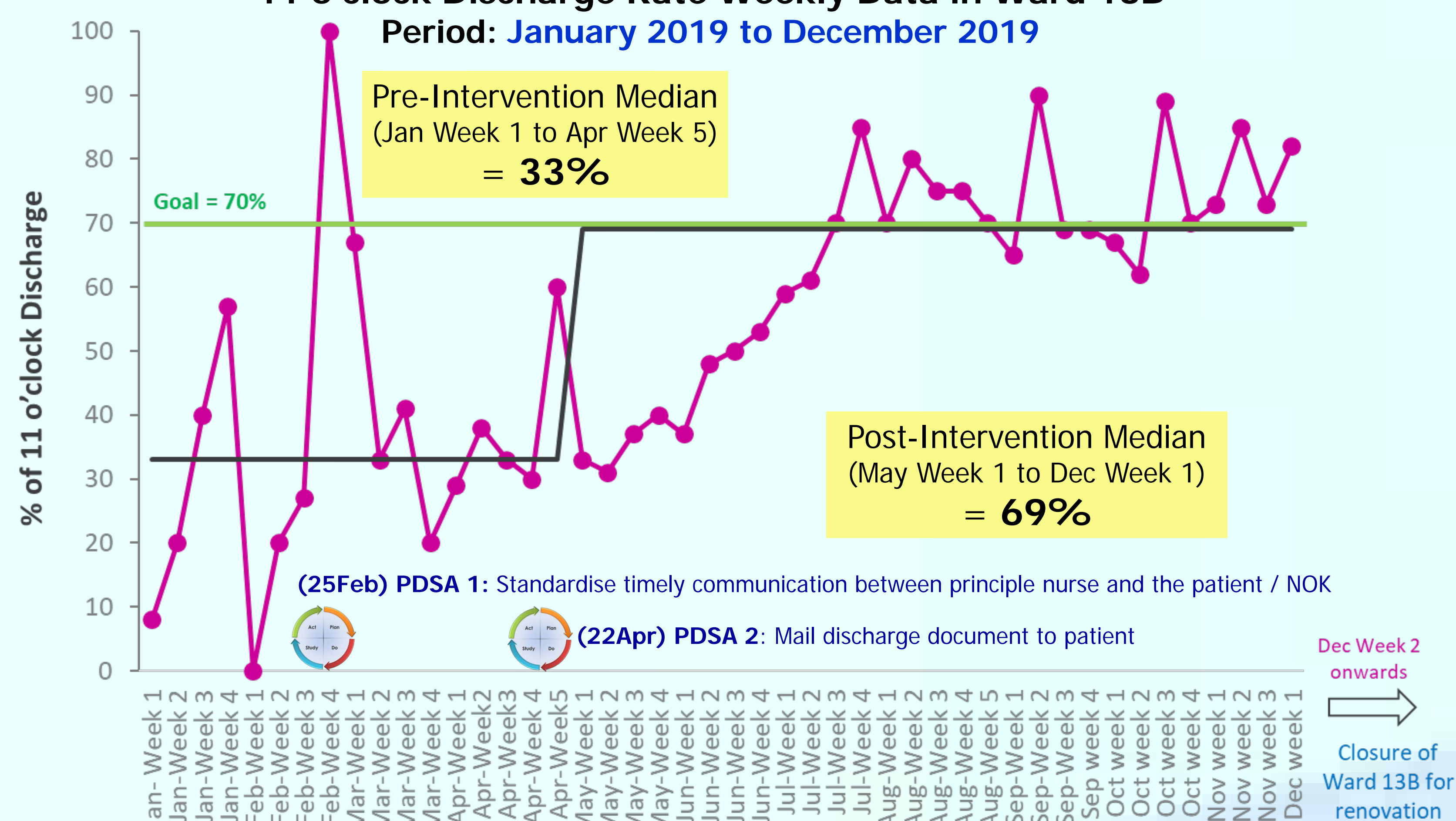
Implementation

Root Cause	Intervention	Implementation Date
Cause C: Late communication to Patient/NOK on preparation of discharge	PDSA 1: Standardise timely communication between principle nurse and the patient / NOK	25 Feb 2019
Cause B: Time consuming for preparing discharge documents	PDSA 2: Mail discharge document to patient as long as fulfil the criteria below: <ul style="list-style-type: none"> Clarification and confirmation of address completed Verbal consent obtained from patient / NOK Documentations in CDOC 	22 Apr 2019

Results

11 o'clock Discharge Rate Weekly Data in Ward 13B

Period: January 2019 to December 2019



Cost Savings

	Pre-Intervention (Jan-Apr 2019)	Post-Intervention (May-Nov 2019)
Average No. of Discharges + Transfer Out	66	77
Additional Discharges (Per Month)	66 - 77 = 10 Discharges	
ALOS at Ward 13B for 1 Patient (Per Month)	6 Days	5 Days
No. of Bed Days Saved (Per Month)	6 - 5 = 1 Day	
Inpatient Cost Stay Saved (Per Month)	1 x \$1,114 x 10 = \$11,140	
Inpatient Cost Stay Saved (Annualized)	\$11,140 x 12 = \$133,680	

Note: Unit Cost for Inpatient Stay Per Day Per Patient = \$1,114

Lessons Learnt

- Leadership & teamwork is imperative for successful planning and implementation of interventions
- Staff commitment & assertion is essential to sustain this project
- Change in current workflow has simplified work progress and lessen the stress of medical team

Strategies to Sustain

- Checklist and script to prepare patient/NOK for home is placed in front of the case notes as a reminder
- Handing over process
- PSA / Principle Nurse checking system to ensure mailing of discharge documents at the end of the shift