

Project Title

Improvements to Results Acknowledgement Process

Project Lead and Members

Project lead: Dr William Kristanto

Project members: Dr Gamaliel Tan, Ms Shalini Menon, Ms Rudyanna Tan, Ms Yeo Shu

Qi, Ms Sim Siew Ngoh, Ms Michelle Fong, Ms Stephanie Teo

Organisation(s) Involved

Ng Teng Fong General Hospital

Aims

To reduce to below 800, the total number of results in Epic that are not acknowledged within 14 days. To achieve and maintain this result by March 2019

Background

See poster appended/ below

Methods

See poster appended/ below

Results

See poster appended/below

Lessons Learnt

Communication and engagement with stakeholders are important to driving change. Stakeholders must be empowered with information to monitor and ensure compliance to processes

Conclusion

See poster appended/ below



CHI Learning & Development System (CHILD)

Project Category

Care & Process Redesign

Keywords

Ng Teng Fong General Hospital, Service Design, Quality Improvement, Improvement Tools, Root Cause Analysis, Radiology Results

Name and Email of Project Contact Person(s)

Name: Stephanie Teo

Email: Stephanie_teo@nuhs.edu.sg

IMPROVEMENTS TO RESULTS ACKNOWLEDGEMENT PROCESS

MEMBERS: DR WILLIAM KRISTANTO, DR GAMALIEL TAN, MS SHALINI MENON, MS RUDYANNA TAN, MS YEO SHU QI, MS SIM SIEW NGOH, MS MICHELLE FONG, MS STEPHANIE TEO

✓ SAFETY
✓ PRODUCTIVITY
□ PATIENT EXPERIENCE
✓ QUALITY
□ VALUE

Define Problem/Set Aim

Opportunity for Improvement

A delay in the timely acknowledgement of results increases the risk of a delayed or missed diagnosis for patients. From July to September 2018, the total number of unacknowledged results in Epic not acknowledged within 14 days increased from 629 to 1258.

Aim

To reduce to below 800, the total number of results in Epic that are not acknowledged within 14 days. To achieve and maintain this result by March 2019.

Establish Measures

This project bases its data on the report of all unacknowledged results taken on the first working day of the month. The number of unacknowledged results that are more than 14 days old doubled from July to September 2019.



Analyse Problem

Ideal Process:

Doctor orders		Results are routed] [Doctor acknowledges
investigative tests in	>	to the doctor when	>	results in Epic within 14
Epic		ready		days

A number of reasons contribute to why doctors are not acknowledging results in Epic within 14 days. Problems with current process include:

- i. Lack of awareness: Doctors are unaware of the time frame by which results are all to be acknowledged. Doctors are unaware of how to acknowledge results not sent to their inBasket (for junior doctors under their care). Doctors are not aware of the dashboard used to track all unacknowledged results in Epic.
- System issues: Radiology results are incorrectly routed to the Radiologist instead
 of the ordering clinician. There is no indicator in Epic to show if a result is more
 than 14 days old.
- iii. Lack of ownership of results: Certain results list a junior doctor, instead of a senior doctor, as the attending consultant responsible for acknowledging the result. Certain results are not assigned to any department.

Reduce the number o	East of implementat ion	Impact of implementa tion	
Г	a) Reinforce importance of timely acknowledgement of results	///	V V V
i. Improve communication	b) Communicate status of unacknowledged results	///	///
ii. Establish ownership of all results	c) Share details on results ageing dashboard	***	V V V
	d) Ensure all results are assigned to a department	√ √	√ √
	e) Assign all result to a doctor who is an associate consultant and above	√	* * *
iii. Solve system	f) Solve Radiology routing issues	√ √	√ √
issues	g) Enhance display of results ageing dashboard	√ √	√ √

Implementing Changes

Enhancing Communication:

- Sharing at clinical meeting and other platforms to highlight importance of timely acknowledgement of results
- Sending out monthly snapshot of all unacknowledged results to all clinical heads and directors of services
- c) Conducting roadshows to departments and developing a tip-sheet to educate doctors on how to use and acknowledge results from the results ageing dashboard

Establishing ownership of results:

- d) Doing a backend table mapping of sub-specialties to departments to rectify results not assigned to a department. Exempting negative MRSA tests and certain imaging from needing acknowledgement
- e) Tagging all SOC visits to consultants who will be responsible for acknowledging the results (automated tagging and manual tagging by Service Ops)

IT solutions

- Modifying radiology routing rules by adding a new rule in the routing process to route radiology results to the ordering clinician instead of Radiologist (for results placed at Radiology department)
- g) Developing a new results ageing dashboard that can display, at one glance, the department and doctor responsible for the result



Results

The number of unacknowledged results that more than 14 days old dropped to below 800 from November 2018. It has maintained this result since then.



Report of all unacknowledged results taken on the first working day of the month. At any point in time, there are on average 3000 unacknowledged results in Epic pending acknowledgement from doctors.

Spread Change/Learning Points

Strategies to spread change

Reaching out to all levels of staff by engaging clinical leaders.

Key learning points

Communication and engagement with stakeholders is important in driving change. Stakeholders must be empowered with information to monitor and ensure compliance to processes.