

# Improving Acute Hospital to Community Hospital Flow with Expedited Referrals

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## Background & Aim

- For transfers from KTPH to Community Hospitals, ~90% are admitted to YCH with an average turnaround time of **3.12 days**.
- This results in less optimal resource utilisation, as patients would occupy an Acute Hospital (AH) bed that would have otherwise been available for an ill patient requiring admission.
- We aim to achieve patient transfers within 1 day through our pilot initiatives and joint clinical governance.

## Methodology

### AS IS

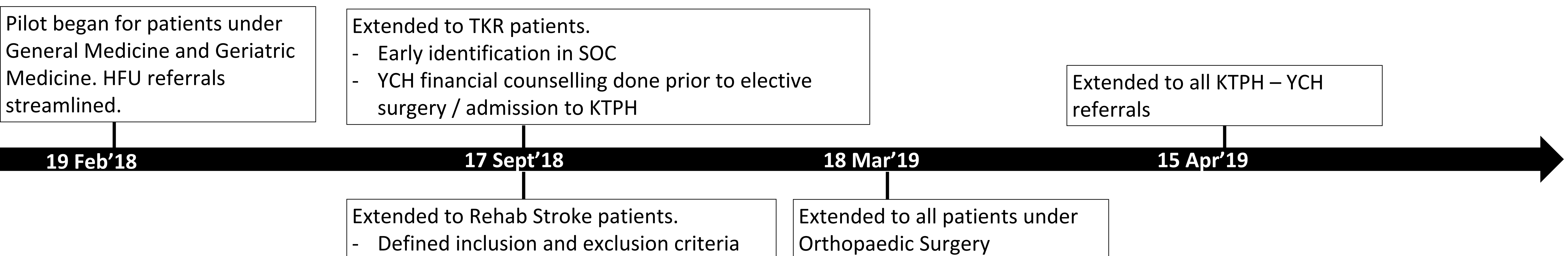
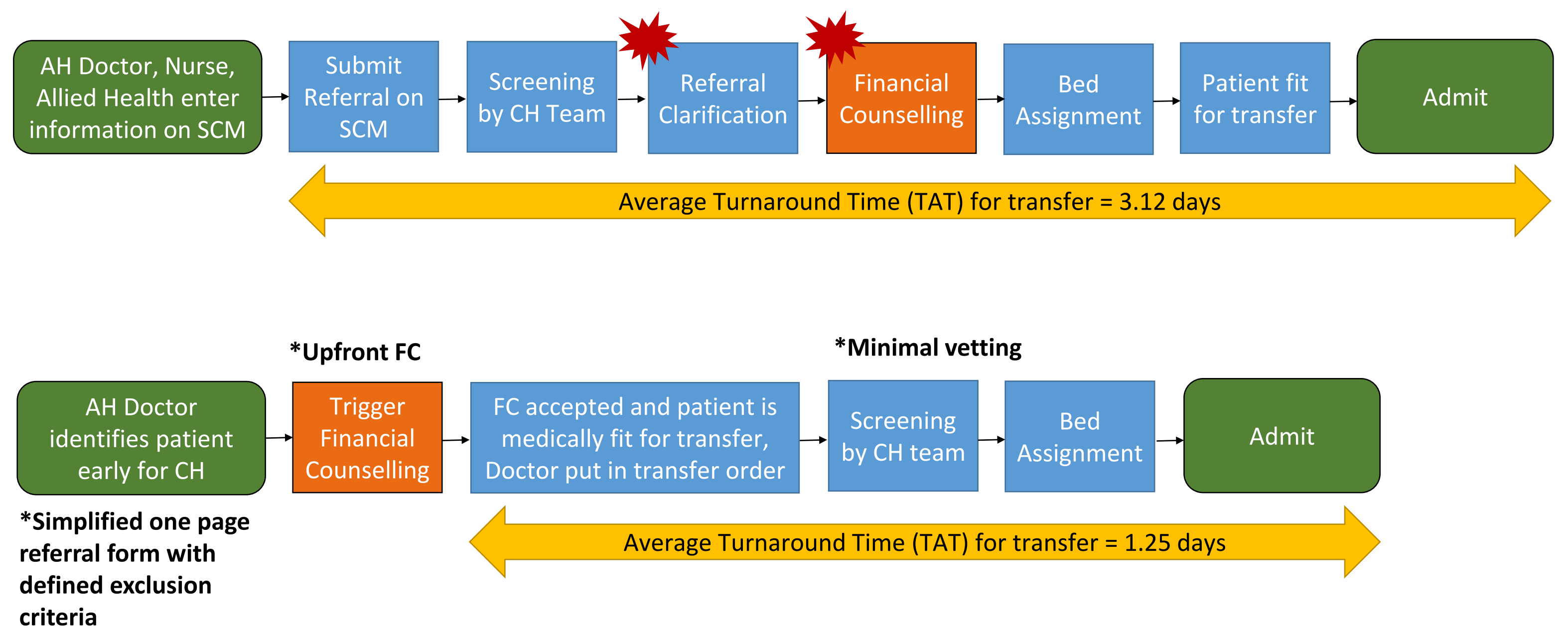
The process of raising referral for YCH via SCM is inefficient because:

- A lot of time spent waiting for referring teams to clarify queries
- Time spent to review referrals may be wasted if Financial Counselling is not accepted

### TO BE

Using the PDCA method, the expedited referral process was rolled out progressively. Referrals from various service lines were streamlined in accordance to the expedited referral process with following features:

- ✓ **Financial counselling before referral**
- ✓ **Simplified one page referral form**
- ✓ **Minimal vetting by YCH**



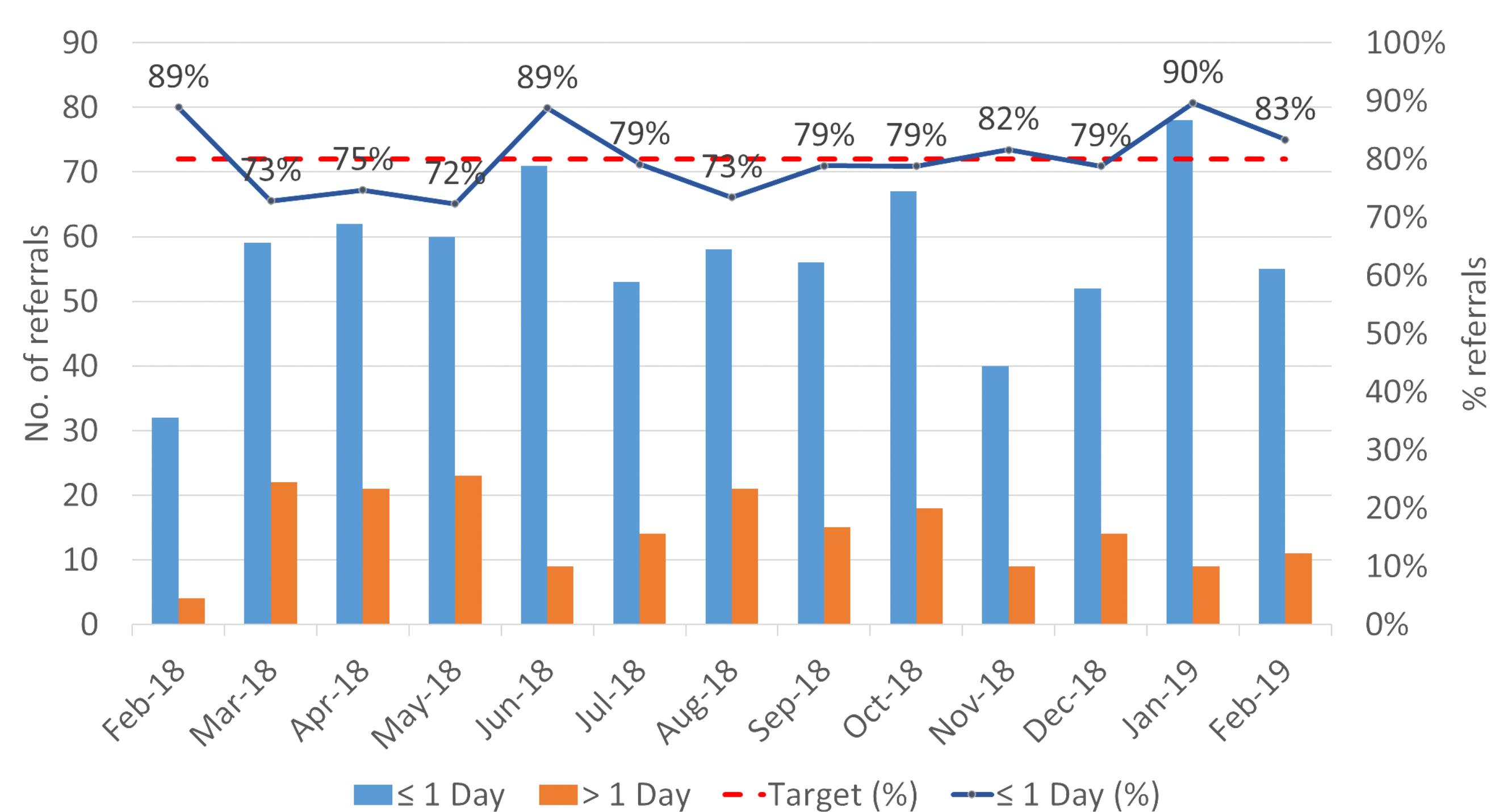
## Results

Turnaround time was measured from the date of referral submitted by KTPH, to the date of admission in YCH.

### Turnaround time (TAT)

- For the expedited referral process, the turnaround time (TAT) was shortened by **60%** on average.
- Between Feb'18 to Feb'19, the average TAT for the non-expedited workflow was 3.12 days, whereas the average TAT for the expedited workflow is **1.25 days**.

### % Transfers within 1 day (Expedited referrals)



## Conclusion

- Expedited referrals from AH to CH through workflow improvement and leveraging on existing IT systems is a feasible and cost-effective way to re-design the AH to CH care and flow that not only benefits the patient, staff but also the hospital system.

## Project Impact

- For the period Feb '18 to Feb '19, we transferred a total of **969 patients** using the expedited workflow. This has resulted in yearly productivity savings of **1,647 patient days**, an equivalent of **\$1.07M cost savings\***.
- Upon full roll out of the project in Apr'19 with the full use of e-referral system, we transferred a total of **2,638 patients** using the expedited workflow from May '19 to July '20, this has resulted in productivity savings of **5,776 patient days**, an equivalent of **\$3.75M cost savings**.
- The target was also achieved such that **81% of the cases** (2,143/2,638) were transferred within 1 day. In total, this has resulted in **productivity savings of 7,423 patient days**, an equivalent of **\$4.80M cost savings**.

## Sustainability

- The joint governance committee continues to meet every month for review and to obtain feedback from stakeholders. The committee aims to reduce any kinks from the expedited referral processes.
- The process has been converted to a simplified e-referral form, and the team is working on maintaining/improving the outcomes. The team has also **achieved to sustain 80% of AH-CH transfers within 1 day** as shown below:

