

APPROPRIATE AND VALUE-BASED CARE CONFERENCE 2025

Maximising Value for All

16-17 OCTOBER 2025 AVBC
Appropriate and Value-Based Care

One Care Team

Dr Lee Yin Yee | Ms Liu Wan Zhen | Ms Fan Aimin Emilia

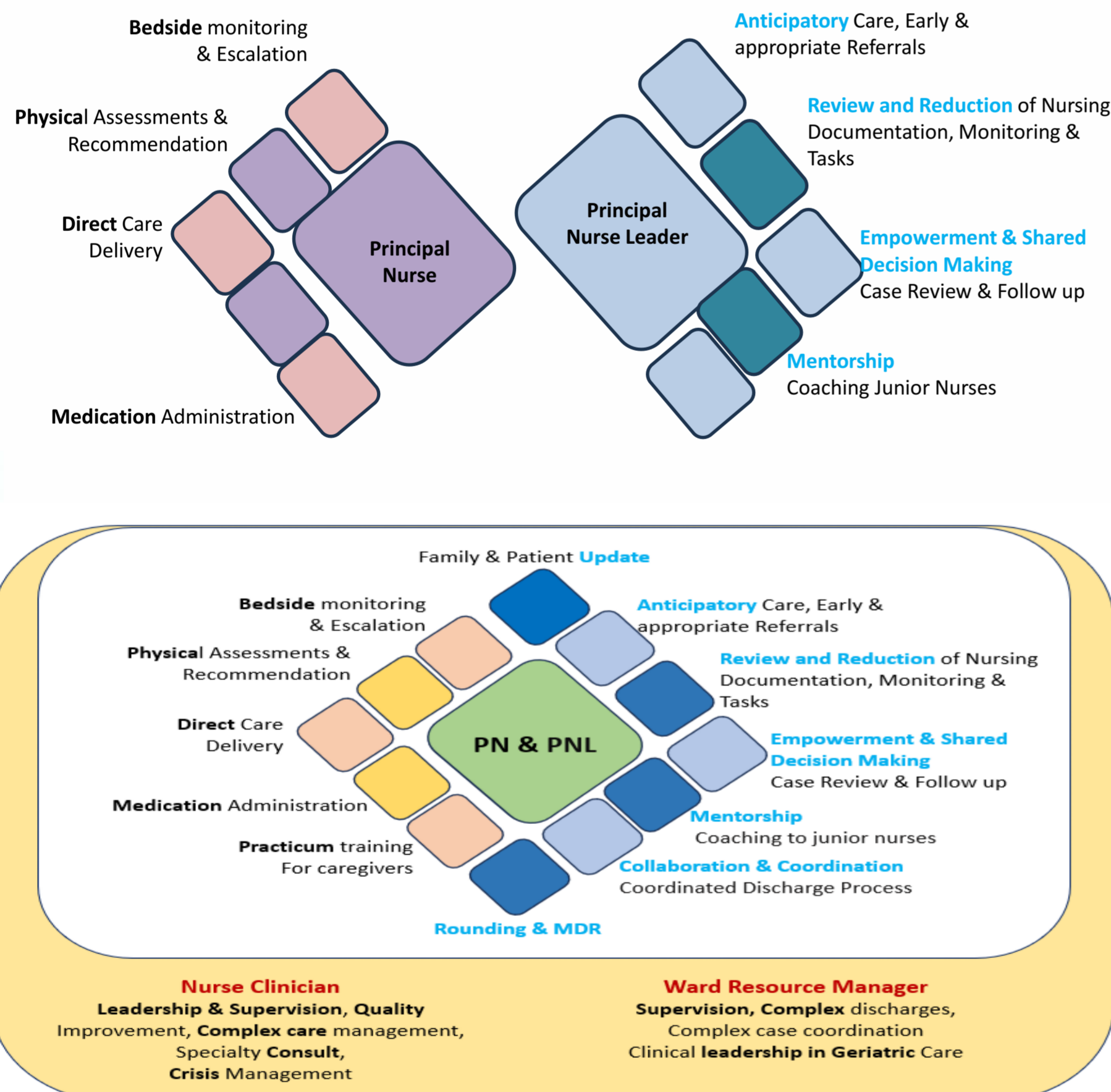
Consultant, General Medicine | Senior Nurse Manager, Nursing Service | Nurse Clinician, Nursing Service

Background

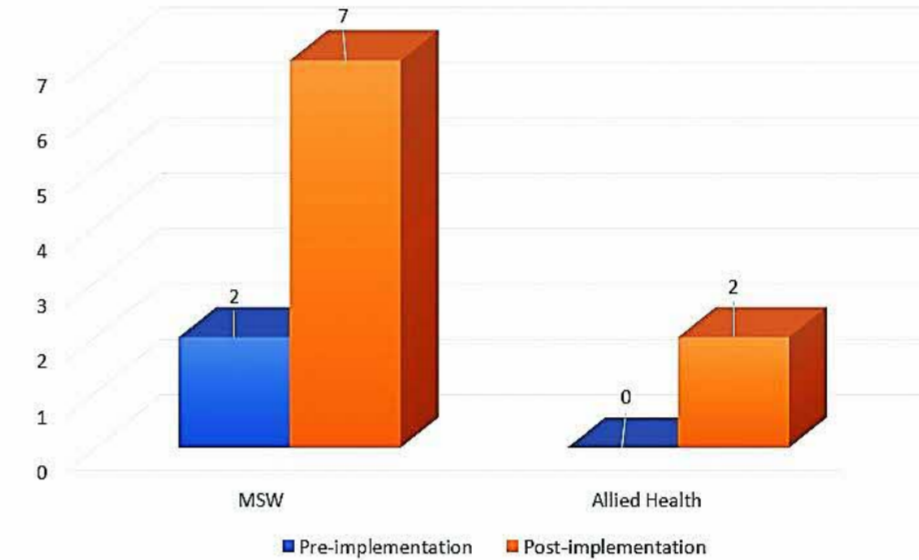
Nurses have always been central to patient care, but increasing complexity in healthcare has fragmented traditional communication models. One Care Team (OCT)- a shared governance approach, enhances patient-centred, right-sited care while optimizing resource allocation. By reducing non-essential allied health referrals and nursing workload, OCT enables early discharges, reduces stress for general nurses, and improves patient and caregiver experiences. This is achieved without additional manpower, through streamlined workflows and added nursing oversight.

Methods

All ward-based healthcare professionals are part of OCT. PNLs are trained in clinical assessment and act as the main liaison in the mornings and early afternoons. They review care plans, initiate early family engagement/updates, expedite or defer services appropriately, and coordinate MD discussions—especially for complex cases. Nurse-led discharges follow a criteria-based workflow, identifying patients a day prior, removing the need for senior clinician review. PNLs also ensure succinct, essential clinical information transfer to community care partners via EPIC system.



Inappropriate referrals held off (2 months pre and 2 months post One Care Team)



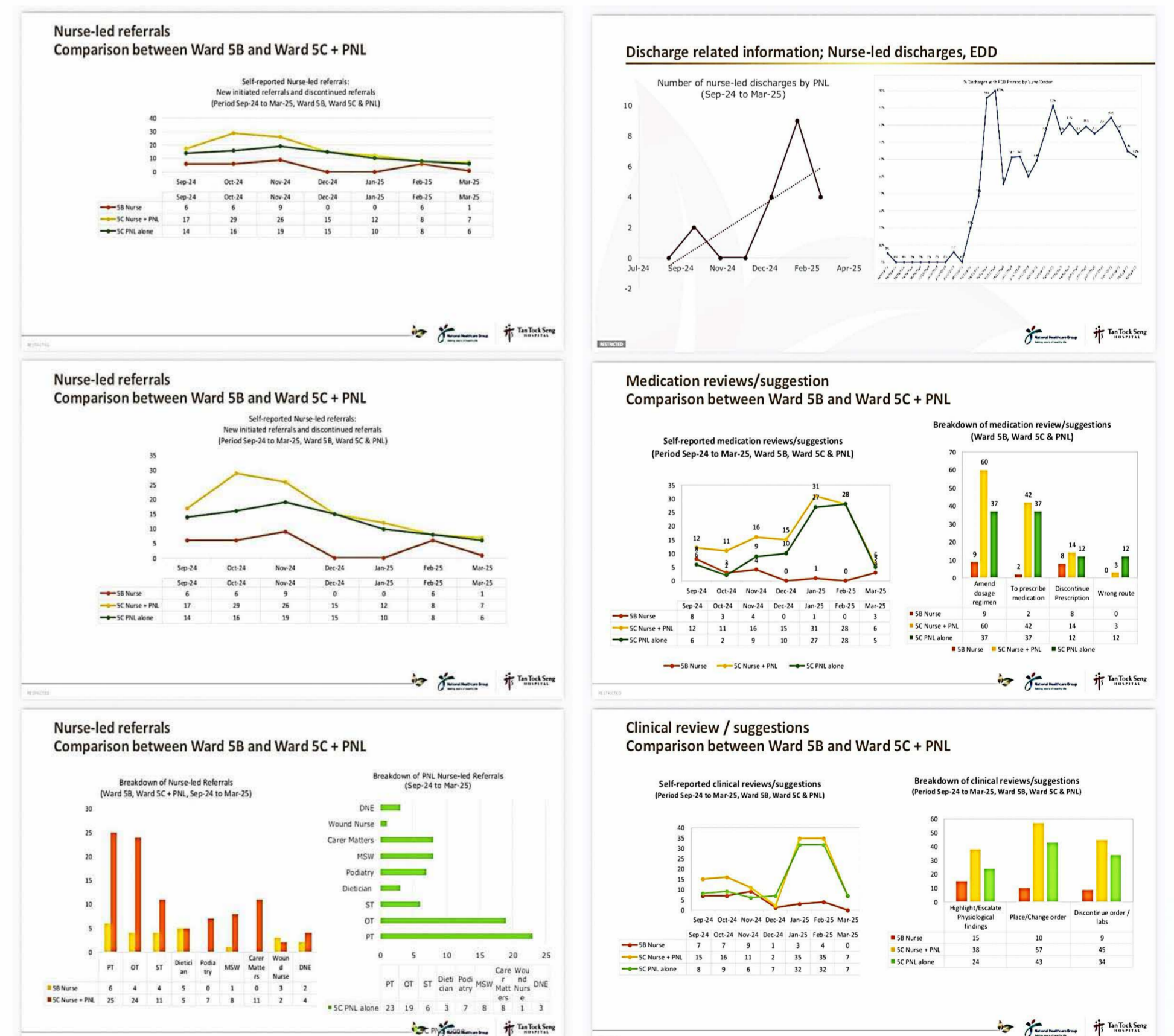
Estimated Time / Costs Saved per patient

Reduction in Monitoring & Documentation	Estimated Time Taken	Frequency	Total Time saved per patient	Nursing Time saved per patient	Predictive: if continued for 3 days* more
Vital Signs reduced from 4 hourly to 6 hourly	3min	2x/day	6min	18min	18min
Postural monitoring removed	7min	2x/day	14min	42min	42min
Conscious Level Chart removed	5min	3x/day	15min	45min	45min
CIWA-Aq removed	5min	4x/day	20min	60min	60min
Capillary Blood Glucose (CBG) removed	1min	3x/day	3min	9min	9min
			(\$7/test before subsidy)	(\$21/day/patient)	(\$63/patient)

*Estimated length of days before the monitoring is reduced by Clinicians or when patient is discharged

Results

In 2024, average length-of-stay decreased by 0.7 days compared to 2023. Early discharges (before noon) increased to 31% compared to a control ward (22%). Patient and caregiver satisfaction improved. Medication-related interventions (amendments/new medication prescription and discontinuation) rose by 288%, and clinical suggestions/escalations increased by 290% compared to the control ward.



Discussion

With evolving care paradigms and technological advancements, sustaining effective multidisciplinary teams is essential. The One Care Team (OCT) model addresses this by redefining the role of experienced ward nurses, empowering them to co-lead clinical huddles and multidisciplinary (MD) discussions that have been routinely medically led. A key feature is the Principal Nurse Leader (PNL) role, which augments bedside nursing with direct engagement in decision-making and care coordination.

Conclusion

PNLs are key to fostering collaboration, anticipatory care, and mentorship. Together with administrative and operational leaders, One Care Team enhances care quality, system efficiency, and team accountability.

