

Mission Statement

Reduce wrong booking of lab appointment at QT NHGD patient within 6 months time

What are you measuring? No. of patient being booked into the correct appointment slot	Numeric Goal: Reduce wrong booking by 80%	Time frame for completion Within 6 months
	Stretch goal: Reduce wrong booking by 100%	

Team Members

	Name	Designation	Department
Team Leader	Jael Tan	Medical Technologist	Laboratory
Team Member	Dr Tham Hooi Man	Doctor	NUP
	Dr Jacquelyn Melody	Doctor	NUP
	Chew Choon Chee	PSA	Laboratory
	Janice Hoe Sook Fun	Senior PSA	NUP
	Tock Bee Choo Anie	Senior PSA	NUP
Facilitator	Eileen Lim	Executive	Laboratory

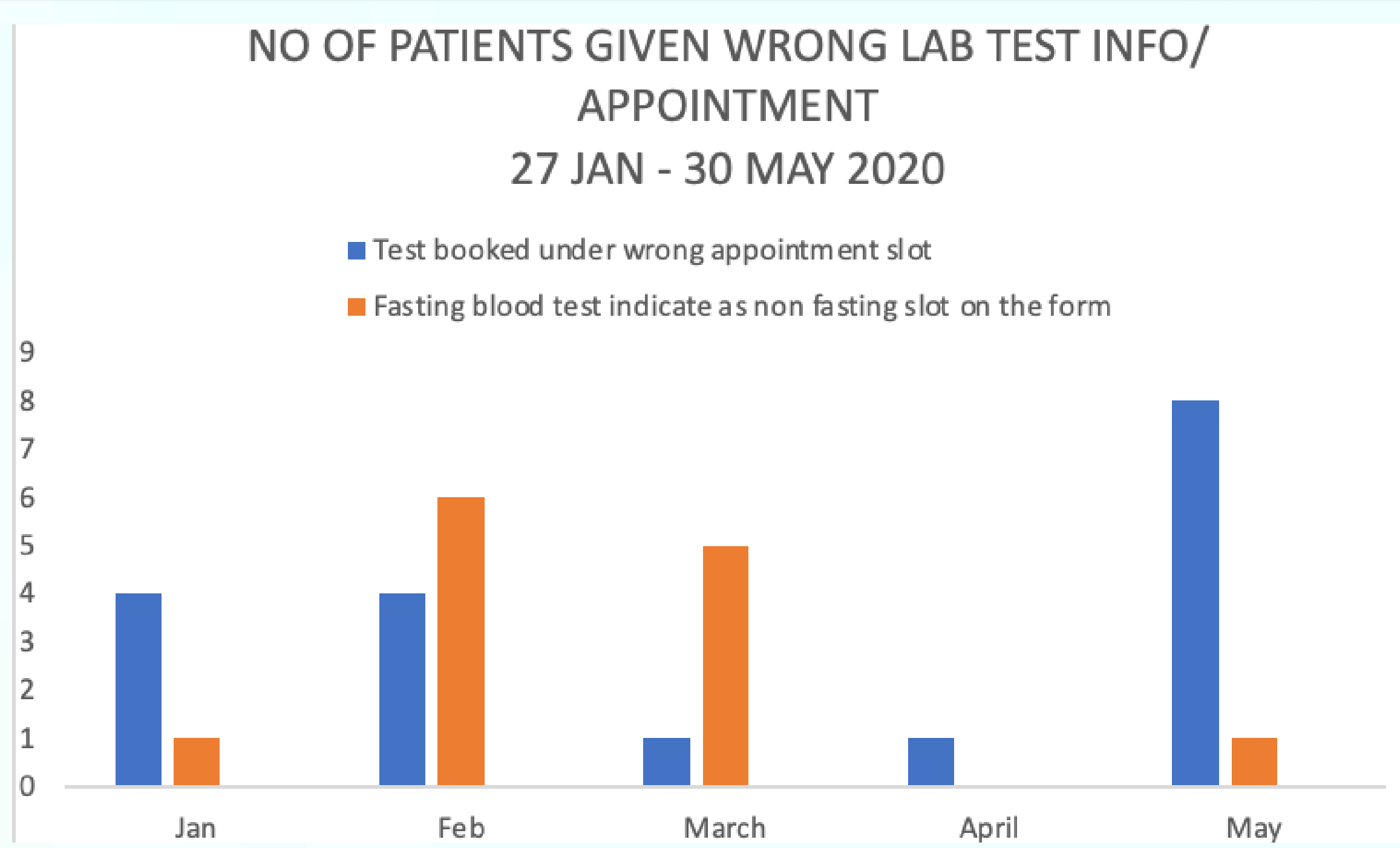
Evidence for a Problem Worth Solving

There has been a persistent trend on the wrong booking of lab appointment. The errors originated from:

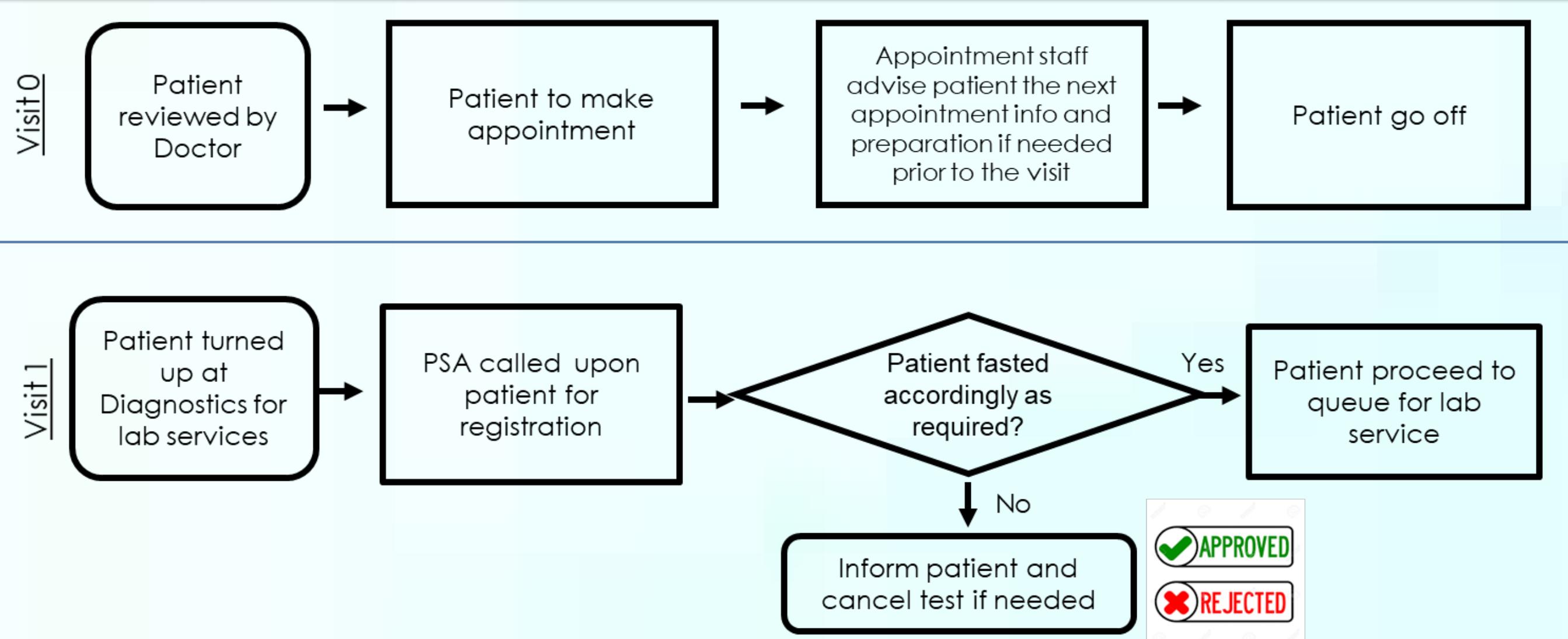
- 1) Wrong fasting information indicated on lab order request form by doctors i.e. fasting lab test indicated as non-fasting test.
- 2) Wrong appointment booked by polyclinic appointment counter staff i.e. fasting test booked under non-fasting slot (correct indication on lab order request form)

The total number of wrong appointment per month in Jan - May 2020: 31 at average of 6 per month

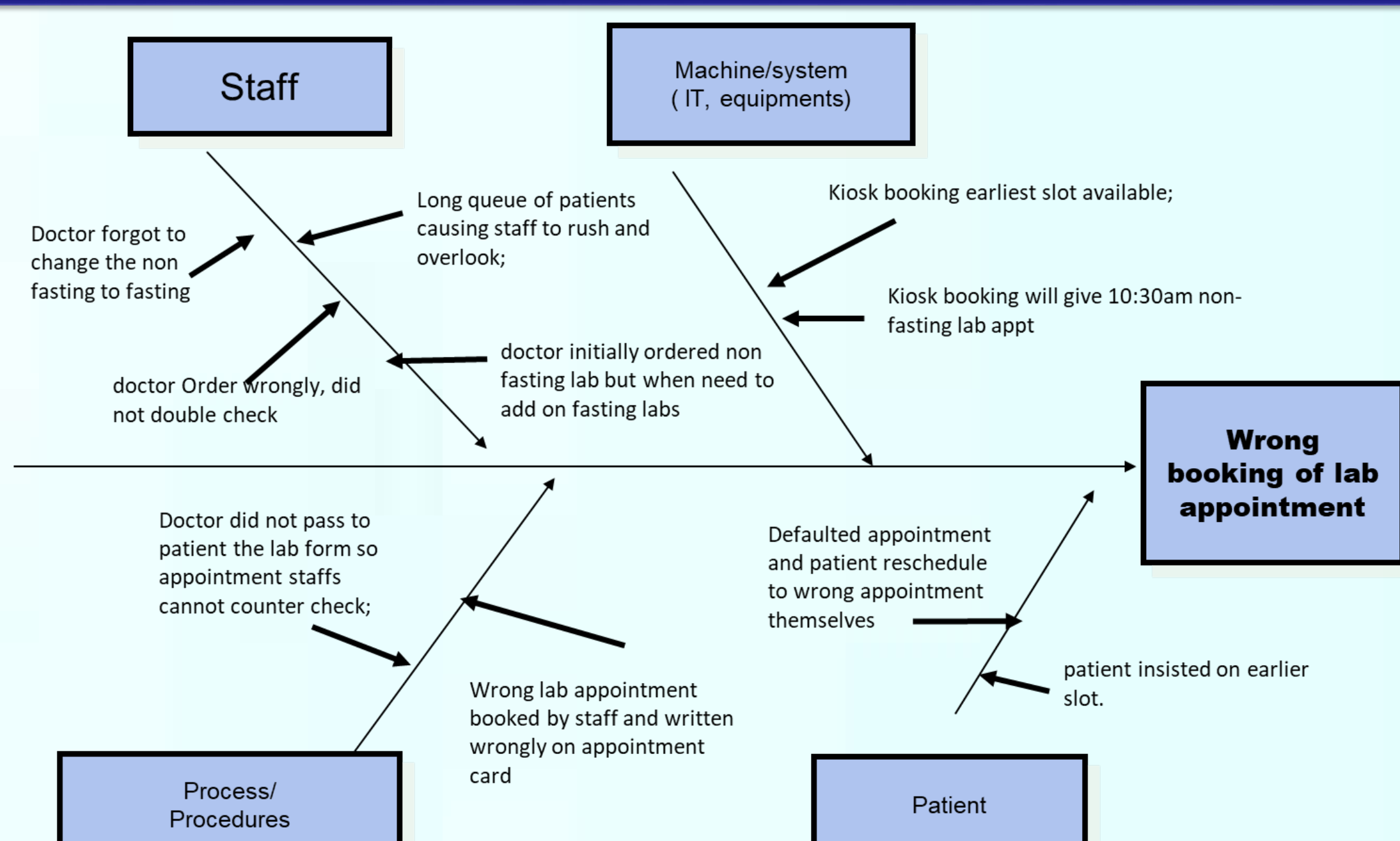
Current Performance of a Process



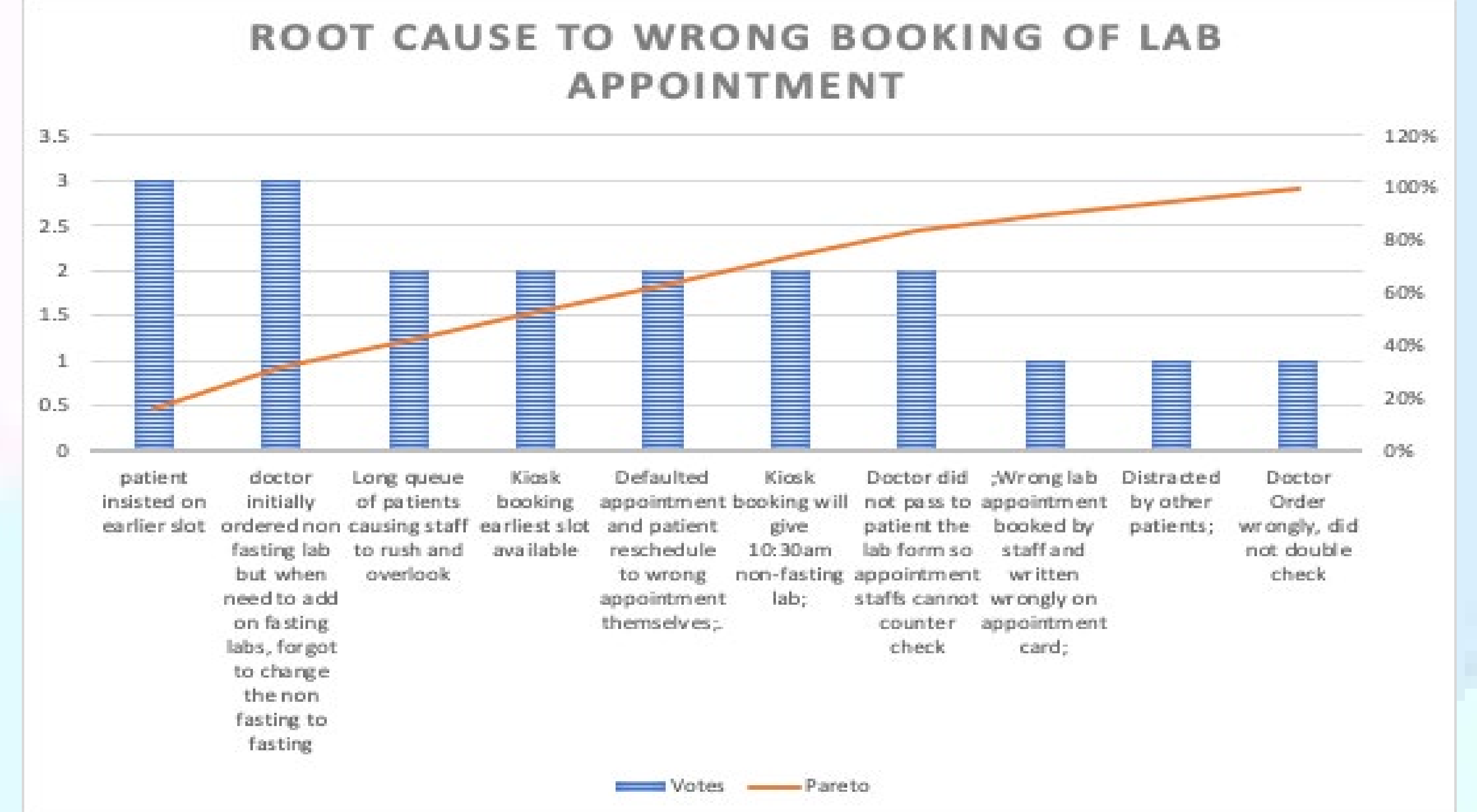
Flow Chart of Process



Cause and Effect Diagram



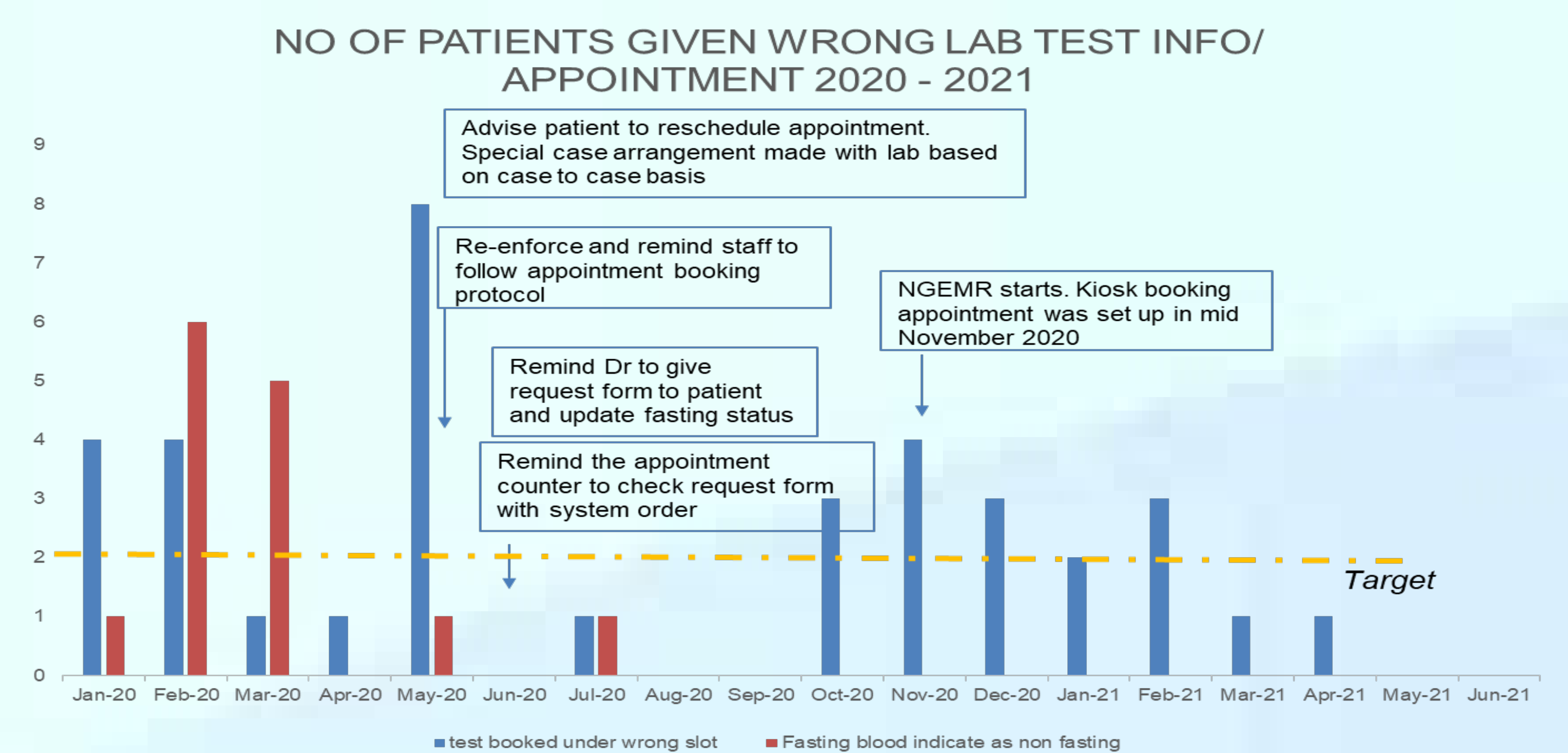
Pareto Chart



Implementation

	Root Causes	Countermeasure proposed	Date of experiment
1	Patient insisted on earlier slot	Advise patient to reschedule a different date. For Elderly, PSA will arrange according to the lab queue.	18 May 2020
2	No lab form for appointment staff to verify appointment type	-reminded the doctor to pass request form to patients - Informed the appointment booking to make sure the system and request form are giving the same information.	18 June 2020
3	Dr forgotten to update fasting status after adding on of test	Enforce appointment counter to check with the doctor and lab when received not match information	
4	Ops staff to rush and overlook	Enforce staff to follow the protocol of booking appointment	18 May 2020
5	Kiosk booking give 10:30am as non fasting slot.	Changes be made post NGEMR go live	After Oct 2020

Results



Cost Savings

On an average where 30 min was spent on service recovery (~ \$9.80), the reduction in feedback from 6 cases/month to post intervention estimate ~ 2 cases/year equate to \$40 saving per month.

Beside the monetary saving, the reduction in rejection lead to better utilisation of appointment slot, and less adverse event due to delay patient's diagnosis.

Problems Encountered

As the project involved multiple department, it took some time and several discussion before the team obtained a clear understanding of the workflow. Open communication and feedbacks are keys to allow each stakeholder to escalate the issue and ensure the respective department was on-board and supportive of the changes.

Strategies to Sustain

No	Purpose	Task	Who	When/ How often
1	Ensure appropriate booking of lab appointment	feedback to ops on any wrong booking	Lab staff	Daily