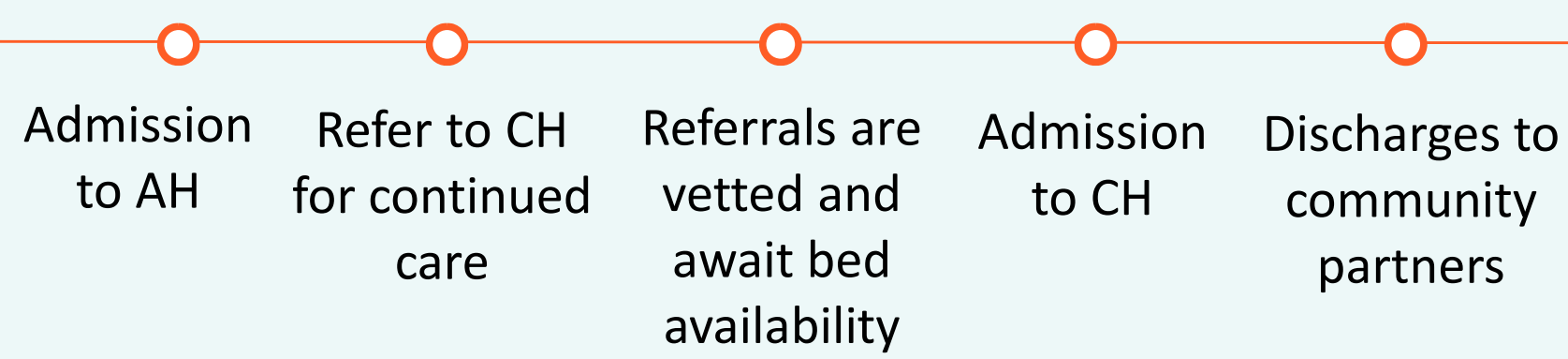


OCH-SGH Green Lanes – Achieving Seamless & Integrated Care Transition

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Problem Statement



- 1 Multi-step process in arranging patient transfers from SGH campus to OCH
- 2 Long waiting time for admission to OCH due to long wait list
- 3 Lack collaboration with community partners to enable timely discharge planning from OCH

Potential Solutions

PLAN

Identify suitable conditions and establish green lanes and fast track Protocols for transfers

ACT

Modify green lanes protocols e.g. refine patient criteria and re-test the updated protocols

DO

Implement the green lane protocols

STUDY

Analyse data and impact on outcome and process measures and unintended outcomes (e.g. u-turn rate)



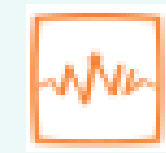
Examples of Green Lanes/ Fast Track Protocols On SGH Campus



(With SGH) Patients with Total Knee Replacement, Total Hip Replacement, Hip Fracture, Spinal Fusion and patients who completed breast cancer surgery or colorectal surgery



(With NHCS) Patients with CABG (POD 3-5) and Valve Replacement OCH patients needing urgent transfer to NHCS due to onset of STEMI - Cath Lab activation



(With NNI) Stroke patients - Streamlined transfers to OCH, as part of Neuro-Recovery



(With NCCS) Palliative care patients - Referral and care management

With Community Partners

Fast track admissions for OCH Total Knee Replacement patients to SPD & NTUC Health



Project Aim

Outcome measure	Bed-Days Saved
Process measures	Average Wait Time (days)
	Average AH-CH Length of Stay (days)
Balance measures	U-turn Rate
	Readmission Rate

Lessons Learnt



Engaging in **collaborative** efforts with others can lead to unexpected outcomes: what were once seen as insurmountable obstacles can be overcome, ultimately resulting in the greatest benefit for patients.



In a system characterized solely by common cause variations, **fundamental** changes are necessary before improvement can be seen.

Outcomes & Impacts

Bed-Days Saved [Computed for the top 13 DRGs (by volume) for FY2022]

1,244 AH days saved
(~105 AH admissions)

1,292 CH days saved
(~53 new CH admissions)

2,536 Total bed days saved
(~69 AH-CH bundled admissions)

FY22 vs FY21 Performance

Improvements were observed in the following measures:

- ✓ Average Wait Time ▼ -1.18 days
- ✓ Average AH-CH Length of Stay ▼ -1.54 days
- ✓ U-Turn Rate ▼ -0.56
From CH to AH within 72 hours of admission to CH
- ✓ Readmission Rate ▼ -1.54
To AH within 30 days post-discharge from CH