

Expansion of Short Stay Surgical Unit to Day Surgery Centre

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Problem Statement

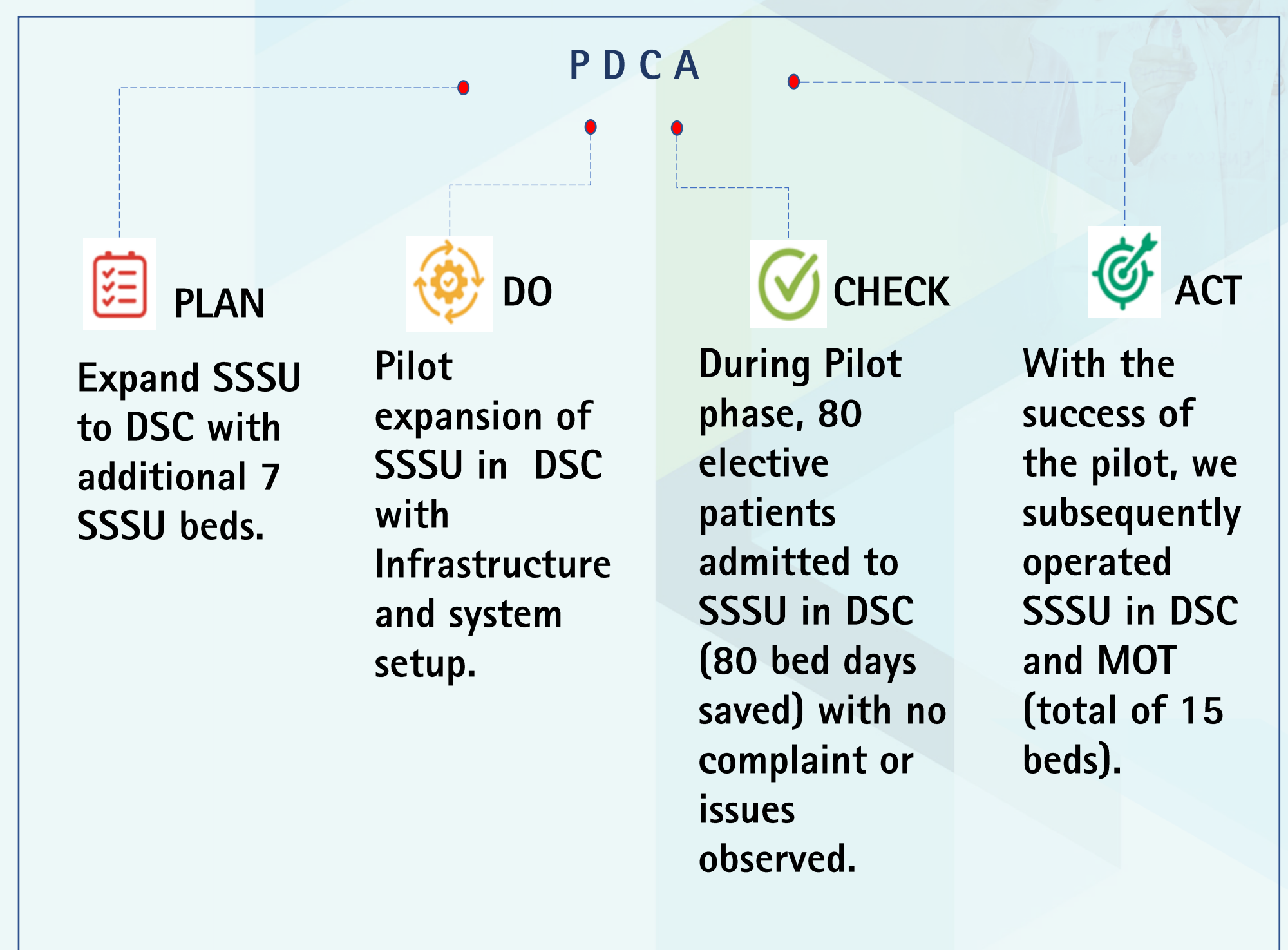
The Short Stay Surgery Unit (SSSU) is a surgical care unit at KTPH that manages surgical admissions within a 23hour period.

The SSSU service was first started in Major Operating Theatre (MOT) and consists of 8 trolley beds located at the holding area.

The average utilisation of MOT SSSU had increased from 23% in 2019 to 45% in 2020, with close to 100% utilisation on every Tuesday and Wednesday.

Potential Solutions

The PDCA methodology was adopted for this project.



Project Aim

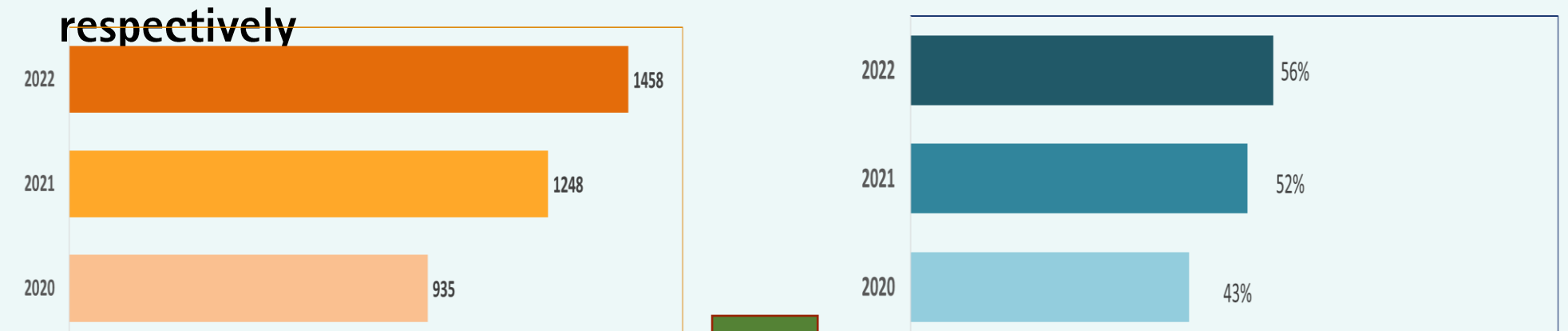
This project aims to expand the SSSU service to Day Surgical Centre private holding bays (7 beds) to support or cope with the increasing demand / request for beds in a bed crunch situation and streamlining work processes initiatives in Yishun Health.

Lessons Learnt

- While planning a QI initiative, it is important to engage the relevant stakeholders (including support services and IT team) to ensure a smooth implementation of solution/ project.
- Due to the limited space constraints in MOT and DSC. There is a need to redefine ambulatory care to encourage surgeries to be performed as Day Surgery or SSSU. A dedicated 23-hour surgical ward is needed not only for surgical patients, but for patients currently admitted for procedures in DDR and CVC.

Outcomes & Impacts

- ✓ SSSU workload increased by 30% & 55% in 2021 & 2022 respectively
- ✓ SSSU utilisation increased to 56%



- ✓ Better rationalization of the use of limited resources.
- ✓ There is also a reduction in the number of avoidable admissions and length of stay.
- ✓ The reduced use of hospital beds and optimization of the resources saved cost to the organization and patients.
- ✓ The expansion of SSSU beds also gave opportunity to relief the ever demanding tight bed situation at A&E. Allow surgical departments to adjust practices and adapt to the new normal. For example, Orthopaedic Department and team had streamlined Total Knee Replacement work processes.

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<Insert Name>

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Problem Statement

What's the problem and why is it worth solving?

- May include pareto chart, process maps, flow charts, etc.

Potential Solutions

What changes did the team test to achieve improvement in the targeted process/outcome?

- Include process maps, flow charts, etc.

Project Aim

What was the measurable change expected over what period of time?

- Include process and outcome indicators and timeframe for expected change

Lessons Learnt

What did we wish we knew and what could have been done differently?

- Share the top 2 challenges faced and the strategies employed to overcome them. Provide practical tips and recommendations for initiating and executing QI initiatives, if any.

Outcomes & Impacts

How did we know which changes led to an improvement?

- Share data (preferably annotated run/control charts) to demonstrate the impact of the initiative. Tables, bar, and pie charts can supplement run charts but should not be used alone for describing improvement over time.
- Use of short stories or quotes to illustrate the application of improvement methods, particular those that speak to patient or provide experience, is encouraged.
- Share the next steps for scale and spread, if any.