

National Quality Improvement Conference

Decongesting SGH Emergency Department with Mobile Inpatient Care at Home

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Problem Statement

- Mobile inpatient care (MIC) at home is a nascent acute care at home model in SGH (SGH@Home), undergoing a 2-year sandbox pilot with MOHT from Apr 2022 – Mar 2024.
- SGH@Home provides in-patient level care at patient's home. It supports early discharge for patients to continue acute treatment and monitoring at home, and avoids hospital admission for patients identified early at the Emergency Department (ED).
- However, it is difficult for ED Dr/Nurses to look into MIC patient criteria and assess suitability for MIC in a high-paced environment
- ED utilisation of MIC at home is low, out of 248 MIC admissions, only 17.7% (n=44) were from ED locations for the period 1 May 2022 – 30 Aug 2023.

Project Aim

- To increase referrals and admissions to MIC from ED location during MIC sandbox pilot.
- To ensure safe and seamless MIC-to-hospital care escalation without adding burden to ED.

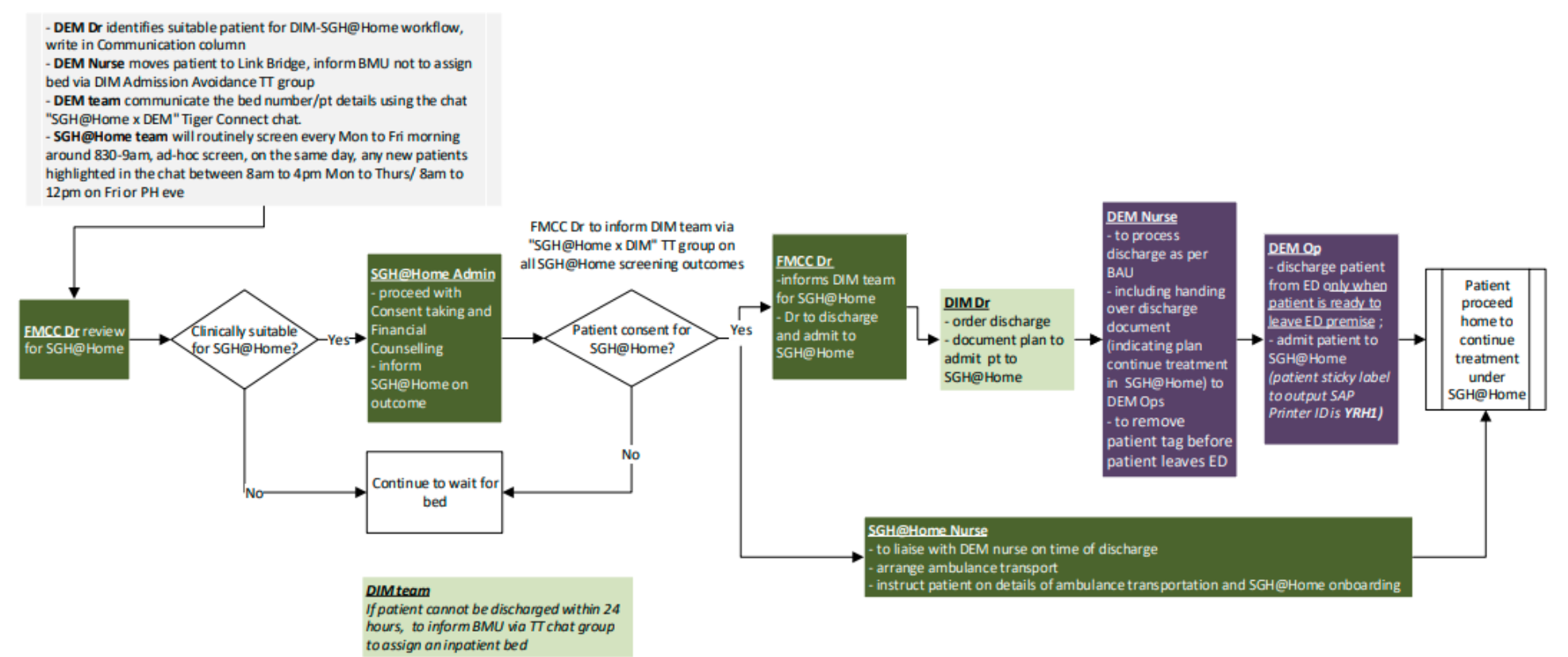
Lessons Learnt

- MIC at home can play a bigger role to help de-congest ED and reduce bed waiting time when suitable patients are identified timely to receive acute care at home.
- Multi-team approach and a well-coordinated workflow that facilitate safe and efficient MIC onboarding can increase MIC uptake from ED location and ensure seamless care escalation from MIC to hospital.

Potential Solutions

- ED-MIC admission workflow was jointly developed by clinicians & operations teams from ED & MIC to identify & onboard MIC-suitable general medicine cases to SGH@Home with support from Department of Internal Medicine (DIM).
- An understanding and agreement for seamless escalation to Internal Medicine ward was established for patients requiring care escalation to hospital.
- The new ED-MIC workflow aims to coordinate activities to enable upstream assessment of MIC suitable patients. It targets patients with general medicine conditions and are lodging at ED, awaiting to be admitted to DIM ward.

Patient Admission Process for DIM lodgers to SGH@Home

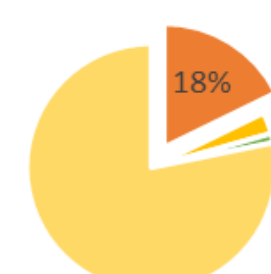


Outcomes & Impacts

- Within 1.5 months of implementation (17 Sep – 26 Oct 2023) of the new workflow, MIC received 31 referrals from ED, and MIC admissions from ED location has increased to 26.2% (11 out of 42).
- 2 of the 11 patients who required care escalation from SGH@Home to hospital ward were transferred to DIM and a direct ward admission was facilitated.

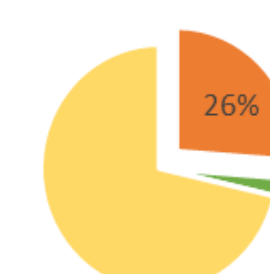
Admission Source	ED	SOC	Community	In-patient Ward transfer	Total admission to MIC
Before MIC-ED workflow Implementation (May 21 - Aug 23)	44 (17.7%)	7 (2.8%)	3 (1.2%)	194 (78.2%)	248
After MIC-ED workflow Implementation (18 Sep - 25 Oct 23)	11 (26.2%)	0	1 (2.3%)	30 (71.4%)	42

MIC Admission source (Before Implementation)
1 May 21 - 30 Aug 23
(n=248)



ED SOC Community In-patient Ward transfer

MIC Admission source (After Implementation)
18 Sep - 25 Oct 23
(n=42)



ED SOC Community In-patient Ward transfer