

# VALUE-BASED HEALTHCARE CONFERENCE 2024

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## Appointment-based step-down care to polyclinics

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### Aim

The initiative aimed to improve the quality and efficiency of step-down care from hospitals to National University Polyclinics (NUP) by leveraging on a New Generation Electronic Medical Records ('Epic') referral e-order.

### Background







Patients are referred from hospitals to primary care every day for further follow-up. These include step-down care referrals for doctor consultations, diagnostic investigations and nursing services.

#### Prior to implementation of the new step-down care workflow

There was no specific way of placing a referral to NUP. Hospitals stepped down care to polyclinics using various modalities such as through memo or through an e-order using one of two Epic referral e-orders. They then either made an appointment for the patient through the Contact Centre or asked patients make their own appointment or even just walk-in. Only "Referral to Polyclinics" e-order flows to the NUP referral work-queue.

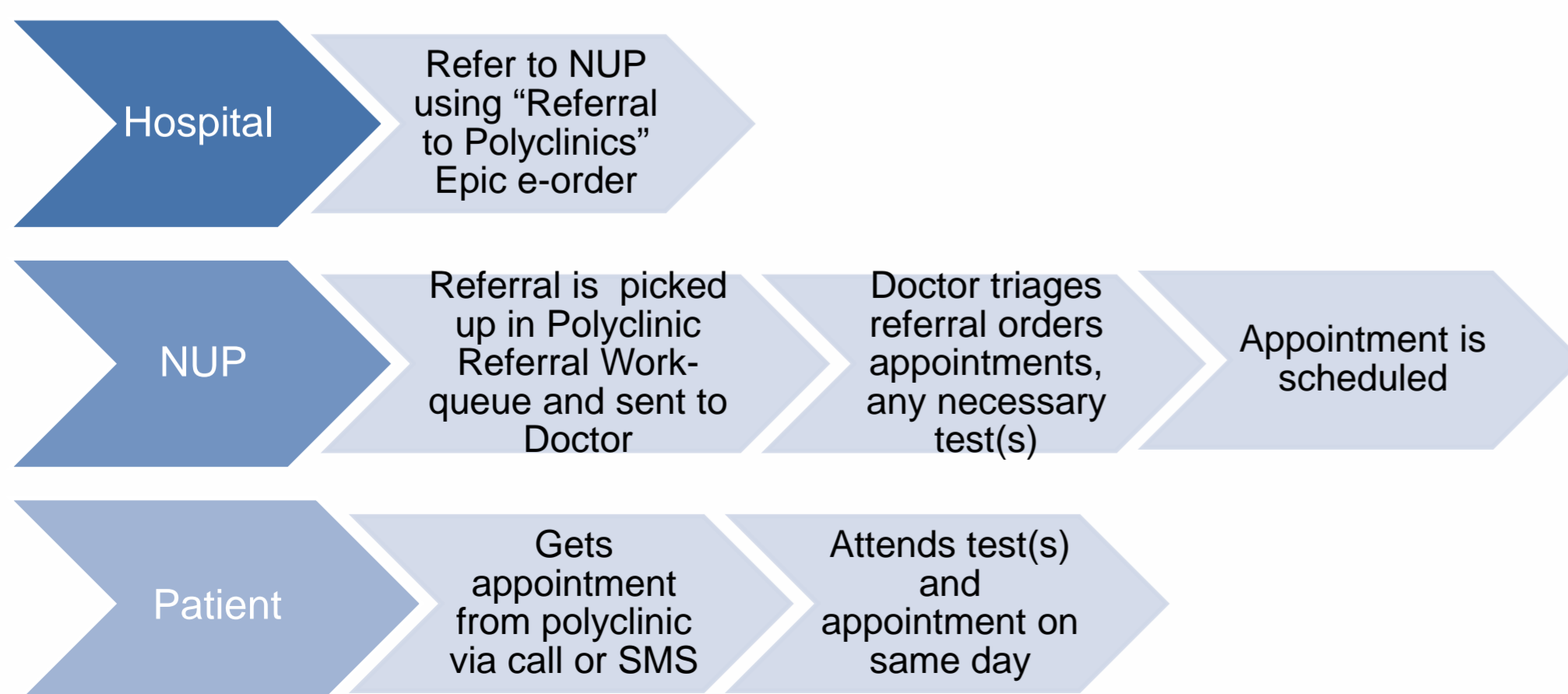
The lack of a clear workflow resulted in less predictable and less efficient use of polyclinic resources which are already heavily stretched due to the persistently high demand for subsidised primary care.

#### Pre-implementation problems observed

-  Polyclinic doctors unable to access step-down care instructions if patient forgot to bring the referral memo
-  Hospital clinicians unclear which primary care provider to refer the patient to
-  Additional work for hospitals in scheduling appointments for patients stepped down to polyclinic
-  Longer wait times for patients who were stepped down without appointments
-  Additional visits for diagnostic tests which could not be performed at the initial polyclinic visit
-  Not leveraging on existing polyclinic appointments for step-down care resulting in unnecessary visits

### Methods

NUP's Chief Family Physician Office put in place a formal workflow to ensure patients are given an appointment for step-down referrals.



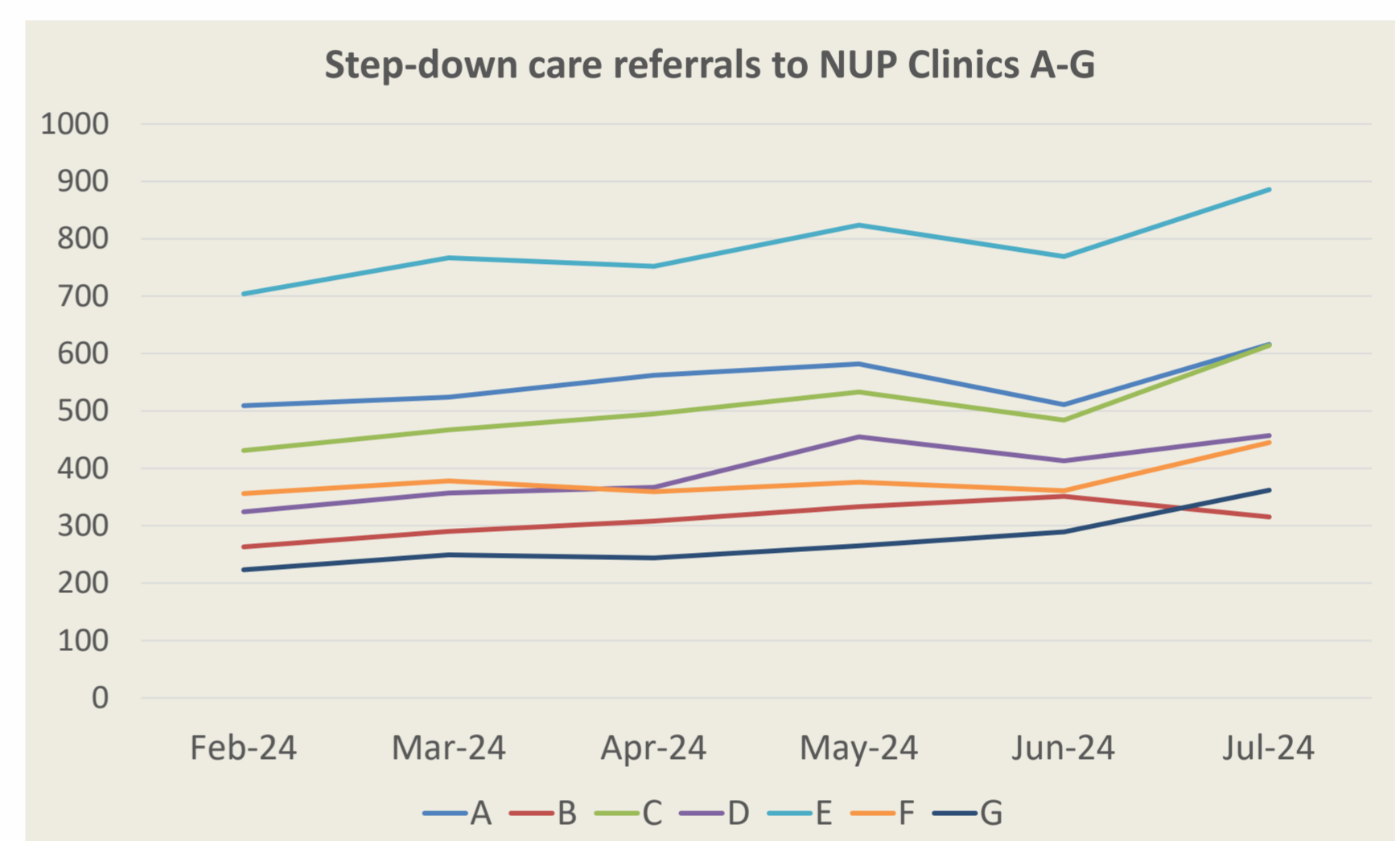
To facilitate the workflow, the Epic referral e-order to NUP polyclinics was updated with additional fields and process instructions to help the hospital clinician use the correct Epic e-order which will then flow to the specific polyclinic's work-queue for appointments to be scheduled.

The new workflow was communicated to NUHS hospital clinicians at medical board meetings, through the NUHS intranet and via regular feedback from polyclinic doctors to hospital counterparts.







### Results

#### After implementation of the new workflow

There were clear increases in the number of step-down care referrals placed using the correct Epic "Referral to polyclinic" e-order over a 6-month period across all NUP polyclinics (20-62%).



#### Post-implementation benefits observed

-  Step-down care referral could be accessed in Epic
-  Hospital clinicians aware that they had to check and refer to patient's own primary care provider
-  Hospitals did not need to schedule polyclinic appointment
-  Patients came by appointment leading to reduced wait times
-  Diagnostic tests and appointments could be scheduled on the same day as doctor consult
-  Suitable referrals could be merged with existing appointments, saving patients additional visits

These benefits have led to more predictable and efficient use of polyclinic resources as well as better patient/provider satisfaction.

### Challenges and Limitations

Lack of awareness of the workflow among hospital clinicians remains a major challenge. The key limitation is that hospitals which are not on Epic are unable to use this workflow. The other important limitation is that appointments requested within 2 days may not be triaged in time for appointments to be given to the patient.

### Conclusion

Appointment-based step-down care provides tangible benefits for the patient, provider and polyclinic. The workflow should be expanded to all public health institutions using Epic to help enhance step-down care for patients.