

# VALUE-BASED HEALTHCARE CONFERENCE 2024

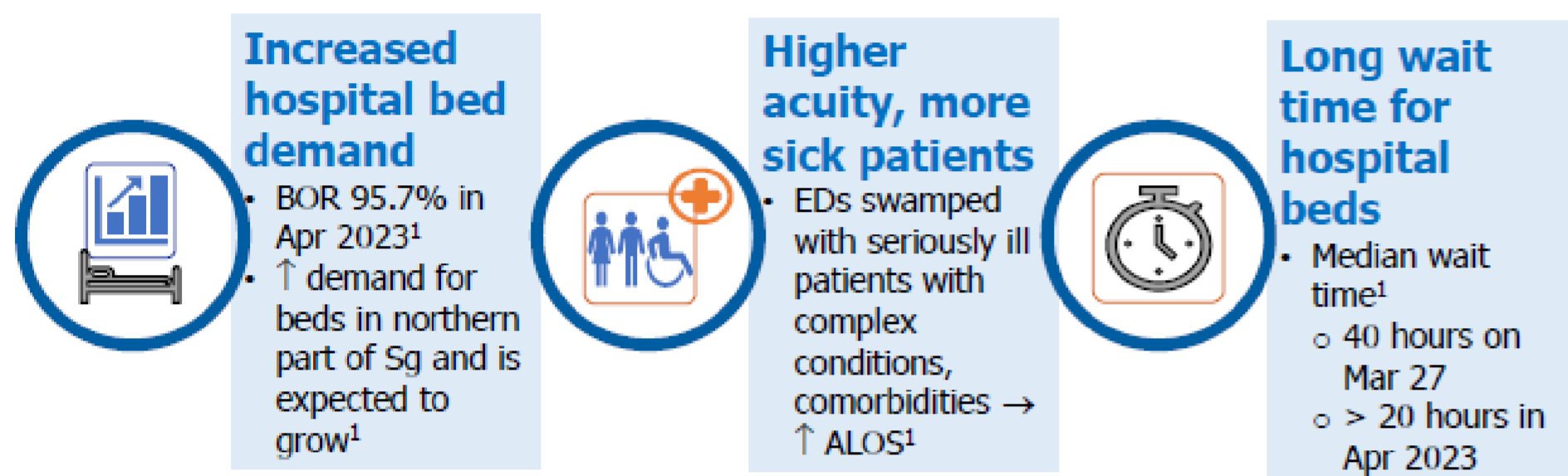
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## Ambulatory Care in Emergency Surgery (ACES): Reducing Admissions and Length of Stay of Surgical Patients

Authors: Jerry Goo Tiong Thye, Ng Wei Xiang, Kang Min Li, Lee Jingwen, Tew Chee Wee, Shobhit Swarup, Lim Woan Wui, Ong Yu Jing, Lee Ngok Lin, Lee Ching Ching

### Background/Aim

#### Challenges for healthcare sector:



- Acute surgical cases contribute significantly to this burden:
  - ~ 2500 ED admissions yearly
  - ~ 54% discharged within 72 hours
- **ACES**: Ambulatory Care in Emergency Surgery
- AIMs**: to enhance outpatient care and reduce inpatient admissions for suitable patients

### Methodology

- ACES, initiated in June 2022, targets uncomplicated cases suitable for conservative treatment, aiming for discharge within 24H.
- Streamlining processes:
  - patients can undergo investigations and procedures directly from EDTU
  - patients receive post-discharge phone consults within 3 days

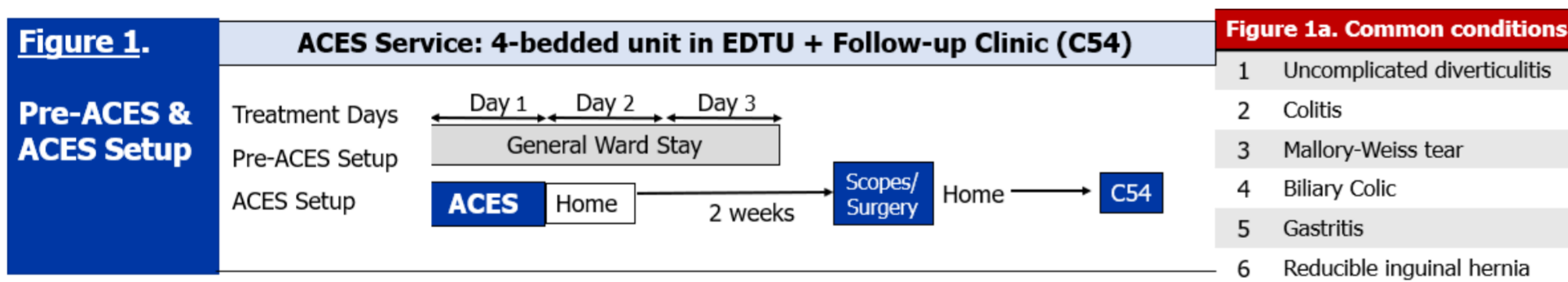
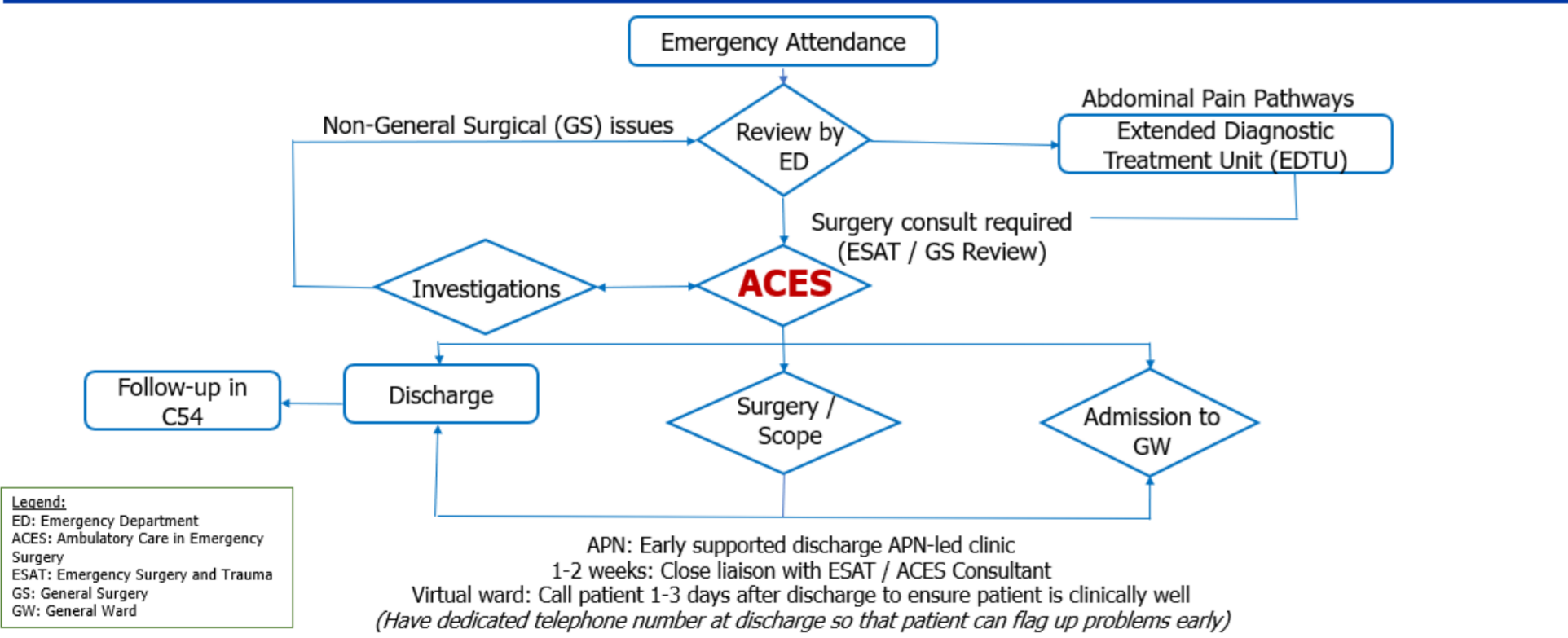


Figure 2. KTPH ACES Referral Flow Diagram



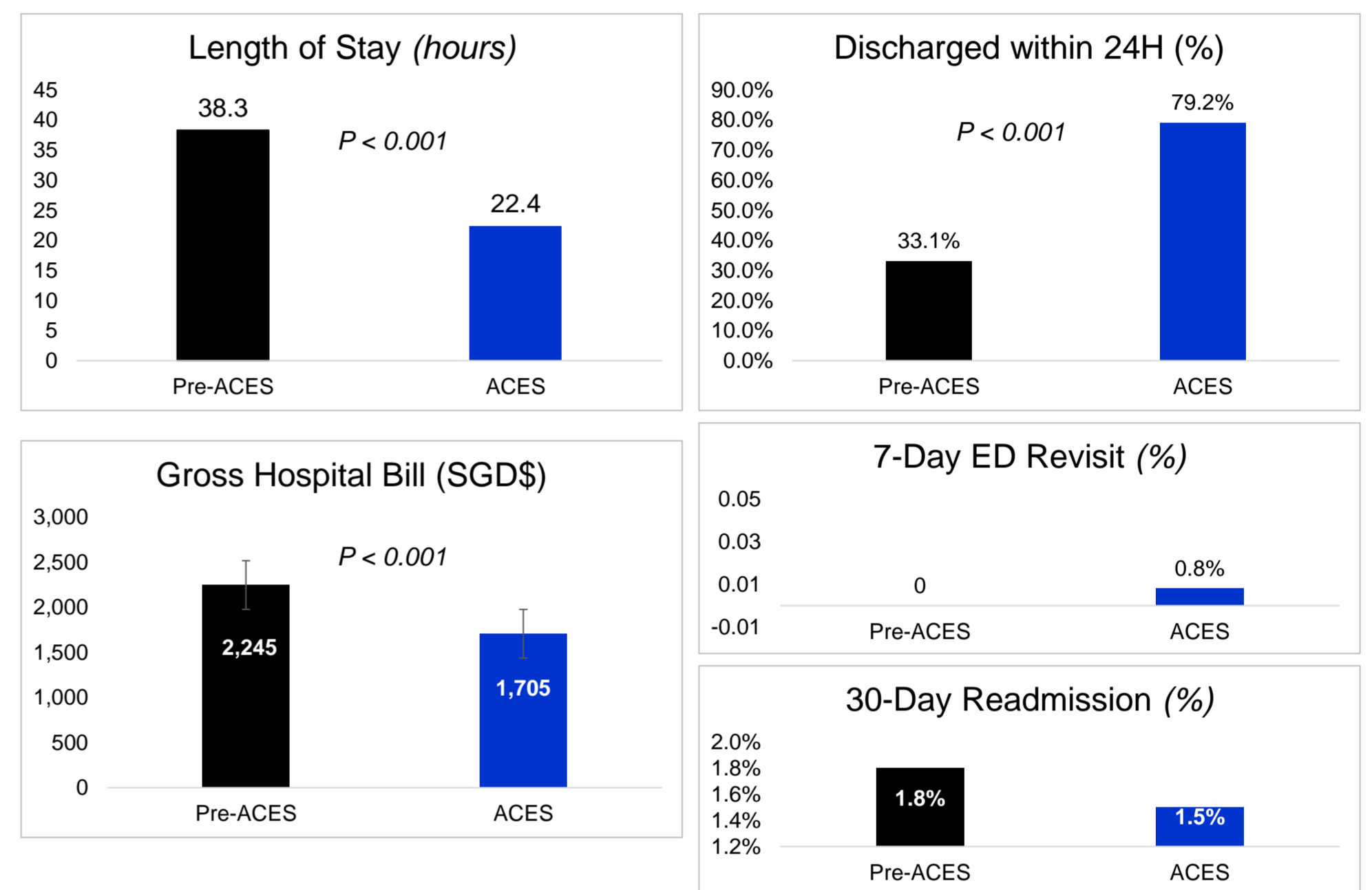
ACES initiative is a pilot service for the management of acute surgical conditions under the department of GS led by the ESAT team in tandem with ED and KTPH Think Centre

#### References

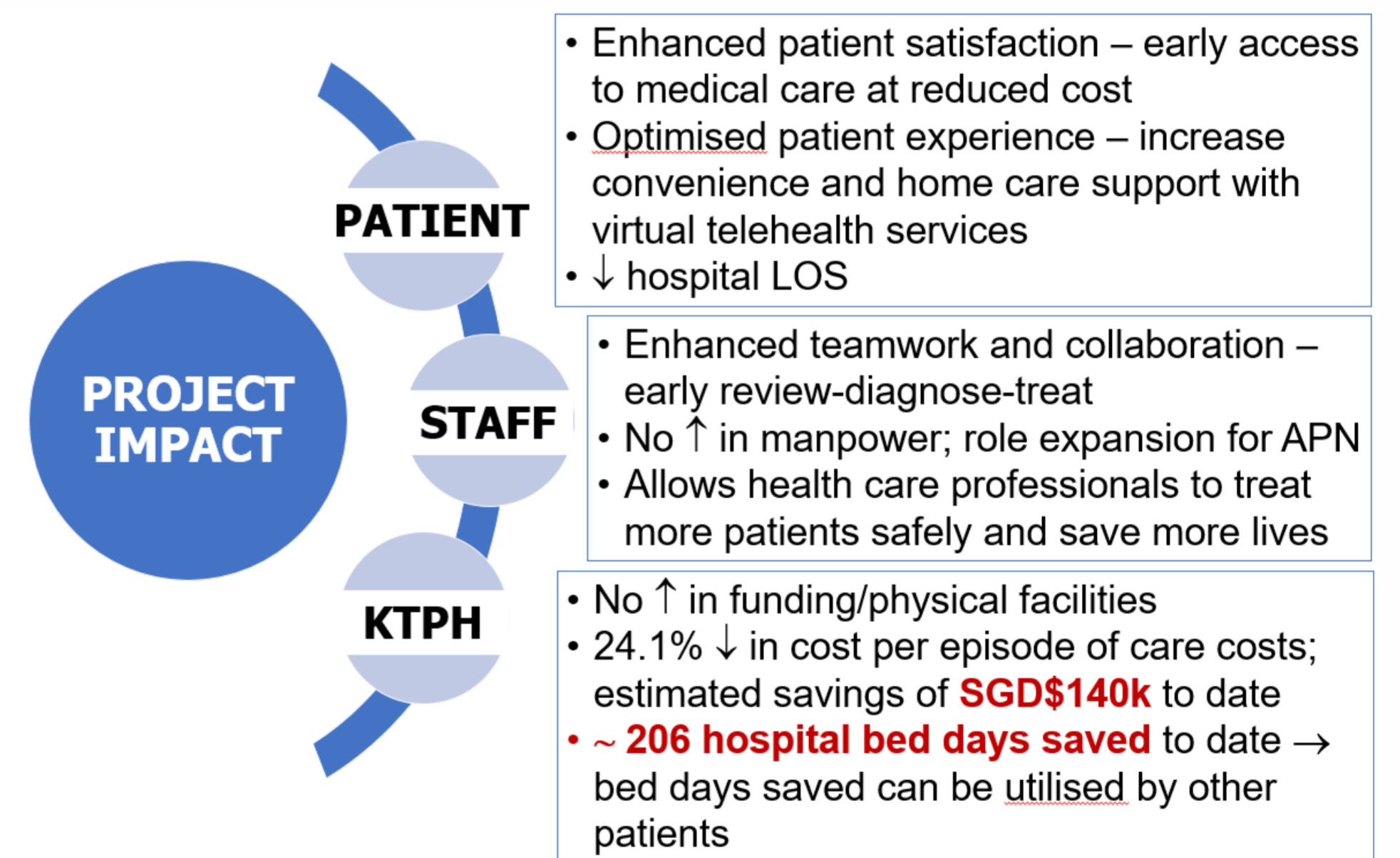
- Longer waiting times for beds in some hospitals, but treatment not delayed: MOH. The Straits Times 21 Apr 2023. Accessed on 26 July 2023
- Singapore hospitals trial bringing care to patients' homes. Hospital Management Asia 10 June 2021

### Results

<b>Pre-ACES</b>	May 2020 – May 2022, n = 272
<b>ACES</b>	June 2022 – June 2024, n = 259



### Operational Resilience & Staff Well-being



### Strategies to Sustain & Conclusion

- ACES model is achievable and sustainable
- Continuous and ongoing review/audit
- ACES has **EXPANDED**:
  - included other diagnosis: symptomatic inguinal hernia, simple appendicitis
  - ↑d bed capacity
  - Pamphlet/video for patient education
- ACES workflow, the 1<sup>st</sup> of its kind in local context, has integrated itself within KTPH workflow and become an essential part of the pathway to right site surgical patients to the best possible care.