Introduction
Current Problem: NTEC eye clinic received patients’ referral for triage and appointment booking till clinic closing time (5:00pm) despite cut off time for “walk-in” was 4:30pm. However, this “30 minutes” service gap created multiple problems among patients, on call Eye doctor, clinic nurse and A&E department, which were “avoidable”.

Impact: Upon receiving of referral (between 4:30pm to 5:00pm), clinic nurse would call “on call” doctor & handover content of referral to him/her for decision. With only limited clinical information available on referral even though with “alarming”, “urgent” wording documented, patients would be directed to attend A&E. Despite with referral, patients had to go through normal workflow of attending A&E. Occasionally, patient was seen by A&E doctor during midnight & discharged with “another” new referral instead of seen by eye doctor. Or, some patients might eventually “run-away” after registration. These end up in patients’ dissatisfaction and complaint.

Objectives
1. To align cut off time for “walk-in” & “triage referral” so as to seal up 30 minutes service gap
2. To lean unnecessary “A&E attendance” “long waiting time & “on call service” for those non-urgent eye consultation.
3. To maintain patient safety after changes

Methodology
Taskforce group formed (nurses & doctors) to review service gaps & to propose solution to lean “waste” meanwhile maintain patient safety. It was proposed to align cut off time for “walk-in” & “triage referral”, viz., not to triage eye referral after 4:30pm. To maintain convenience to patient, a designated drop box was designed for collecting referral after 4:30pm with alert notice distributed to patient for triage time (next working date) for managing patient’s expectation and to maintain patient safety just in case there “ocular emergency”. The above proposal was endorsed in
department meeting & implemented & reviewed in 1 months’ time.

**Result**
After changes, 100% of cases were triaged timely within next working date without delay. For July 2017, total 37 numbers of referral were collected in drop box in July 2017. All of them were not indicated to “walk in”. 10.8% was given 1 week appointment, 89.2% was given P2 or R appointment. No case was referred to A&E “unnecessarily”. Patients’ long waiting time in A&E was “avoided” & no case was reported to have “delayed” eye consultation. Staff satisfaction (both medical & nursing) was enhanced.