



Service Priorities and Programmes
Electronic Presentations

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Quota based system for transfer of patient to extended care

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New service model

Introduction

A new quota based system was adopted in 3Q2015 for transfer of M&G patient from acute (PMH) to extended care (LKB). This is a two-year review on the pros and cons, and the impact of the new system on throughput, compare with the conventional, occupancy based system.

Objectives

To improve the throughput of extended care;

To improve patient safety;

To ensure appropriate patient is selected for transfer;

To reduce non-value added work in the process.

Methodology

An agreed quota is set for number of patients to be transferred each day, contingent on the seasonal acute admission figure. Number of transfer is delinked from occupancy of the extended care beds.

Appropriate patient selection was ensured by: guideline and review by a designated nursing coordinator.

Case MO was informed 2 days ahead of the transfer and discharge summary and drug is prepared in advance. A electronic system was developed to aid logistic.

Patient was given info and expectation on the purpose of the transfer before going to LKB to facilitate discharge planning.

Patient will be transferred early in the morning after nursing review on vital sign.

Patient arrived in the morning at LKB.

Develop clinical programmes in LKB to add meaning and value to patient care.

Result

Quarterly figure:

Number of transfer: increase from 685 to 780 in 4Q2017

Number of transfer-back: reduce from 97 to 68 in 4Q2017

Occupancy: reduce from 100% to 91% in 4Q2017

Other benefit:

NEATS welcomed the change as they are more available in the morning;

Pharmacy reported improved logistic as drug is prepared in advance;

Shorten waiting list as only appropriate patient is put into the waiting list;
Better organized logistic using a hospital developed electronic system reduced
manual work and communication overhead.
Patient and family better prepared for the transfer, reducing conflict and cancellation.