QLL26

IMPROVING TURN AROUND TIME (TAT) FOR OUTPATIENT PHYSIOTHERAPY SERVICES IN THE TREATMENT CUBICLES

TEAM MEMBERS

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INTRODUCTION

Physiotherapy sessions are essential for patients to regain mobility, strength, and function. Patients spend a predetermined amount of time with the Physiotherapist. Physiotherapists are worried that the average treatment length in the cubicle is more than an hour, which will lead to insufficient time to assist with the substantial number of cases referred for visits while providing each patient with the high-quality care they require. To monitor treatment, turn around time (TAT) for each outpatient treatment cubicle within 60 minutes or less for each therapist.



ACTION PLAN

Introduce the new intervention for Physiotherapist to monitor the minimal time spent for exercise at range less than 15 minutes.

METHODS

Information was collected from the time the patient was registered until the end of their treatment. To decrease the cubicle's occupancy, the study investigates a modified form of exercise therapy without using bed. Data collected from 12th July 2023 until 26th July 2023 shows an average time utilization per treatment cubicle of 69 minutes.

| Sampling Techniques | : Purposive Sampling | |
|--------------------------------------|--|--|
| Data Type Physiotherapy Staffs | : Continuous Data : Three (3) Physiotherapists | |
| Inclusion Criteria | : Out-patient new case and follow up with one area to be treated. | |
| Exclusion Criteria | : In-patient and out-patient treatment involve more than one area to be treated. | |
| Outcome Measure | : Turn around time each of patient spent in one cubicle. | |





CURRENT SITUATION

| Exercise Using Bed | | Occupied th Bed Longer | e |
|----------------------------------|--------------------------------------|---|---|
| 1 | | | |
| Start Procedu | Additional 15 - 30 mins | Release Bed to Next Patient | End of Procedure |
| | MATERIALS | METHODS | MACHINES |
| Possible Caused | Limited number of cubicles | Lack of monitoring time consumed for exercise in cubicles | Modalities duration are varies |
| Solving Capability | Possible | Possible | Possible |
| Effect If Cannot Be Solved | Less number of patients | Increase waiting time for cubicle | Increase waiting time for treatment |
| Analysis | Utilize the remaining capacity | Manage exercise time | Manage treatment time |

RESULT

The practice of modified exercise therapy without using a bed from a Physiotherapist has shown that the average TAT for each cubicle has been reduced to 18.8%, and the average TAT per Physiotherapist is 56 minutes.

| Physiotherapist | Total Average Treatment Time (Before) | Total Average Treatment Time (After) | Target Average |
|-------------------|---|--|-------------------|
| Physiotherapist 1 | 1:20:00 | 00:55:00 | 60 |
| Physiotherapist 2 | 00:57:00 | 00:53:00 | 60 |
| Physiotherapist 3 | 1:12:00 | 00:59:00 | 60 |
| Total | 1:09:00 | 00:56:00 | 60 |



Limitation of the study:

Cubicle is still needed for patient required privacy for exercises.

DISCUSSION

Overall, the modified exercise therapy approach is promising in optimizing patient treatment and reducing cubicle occupancy. By continuing to refine these strategies, the department can potentially enhance patient outcomes and overall efficiency in the long term. The results suggest that this modified approach not only improves efficiency but also has the potential to increase patient satisfaction by reducing waiting times. Future studies could focus on measuring patient outcomes, direct improvements in department configuration, and cubicle growth.

REFERENCES

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