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Summary

This study focuses in Clinic B, one of the twenty specialist out-patient clinics situated in the National University Hospital (NUH). Diagnostic Imaging is excluded in our study.

This project aims to reduce the consultation waiting time and new appointment waiting time to fulfill the required key performance indicators (KPI) while meeting the budgeted volume numbers for patient load. The consultation waiting time is defined as the duration of time patients wait till seeing the doctor. Our team identified two main causes namely (1) Patient appointment scheduling and (2) Lack of man-power in certain procedures.

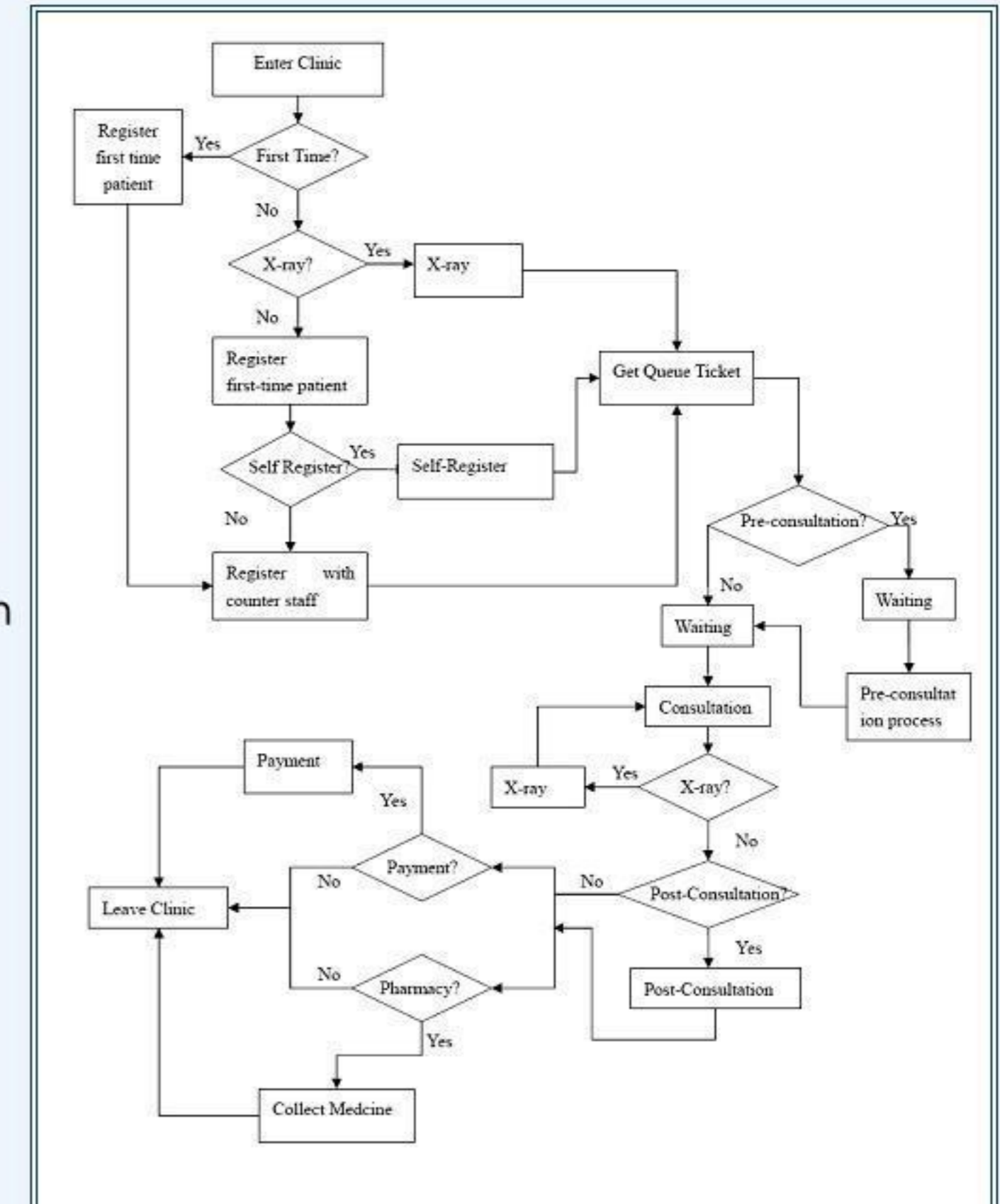
We proposed solutions for these two problems using simulation on (1) Scheduling Methodology and (2) Increasing staff capacity.

From the simulation results, rescheduling the appointment times proved to be a much more effective solution as it reduces waiting time most cost-effectively.

Flow-diagram of clinic B, there are these following procedures-

1. Registration
2. (X-ray)
3. Pre-consultation
4. Consultation
5. Post-consultation
6. Payment & collect medicine

This is the first step in understanding the system



Data Analysis

Process Time	Mean	Standard Deviation	Fitted Distribution
Registration	5	2	Exponential
Pre-consultation	24	15	Gamma
Consultation	14	10	Normal
Post-consultation	21	13	Normal
Payment	3	2	Gamma

* All figures in minutes

The process time for each individual procedures and the distribution most closely fitted to them.

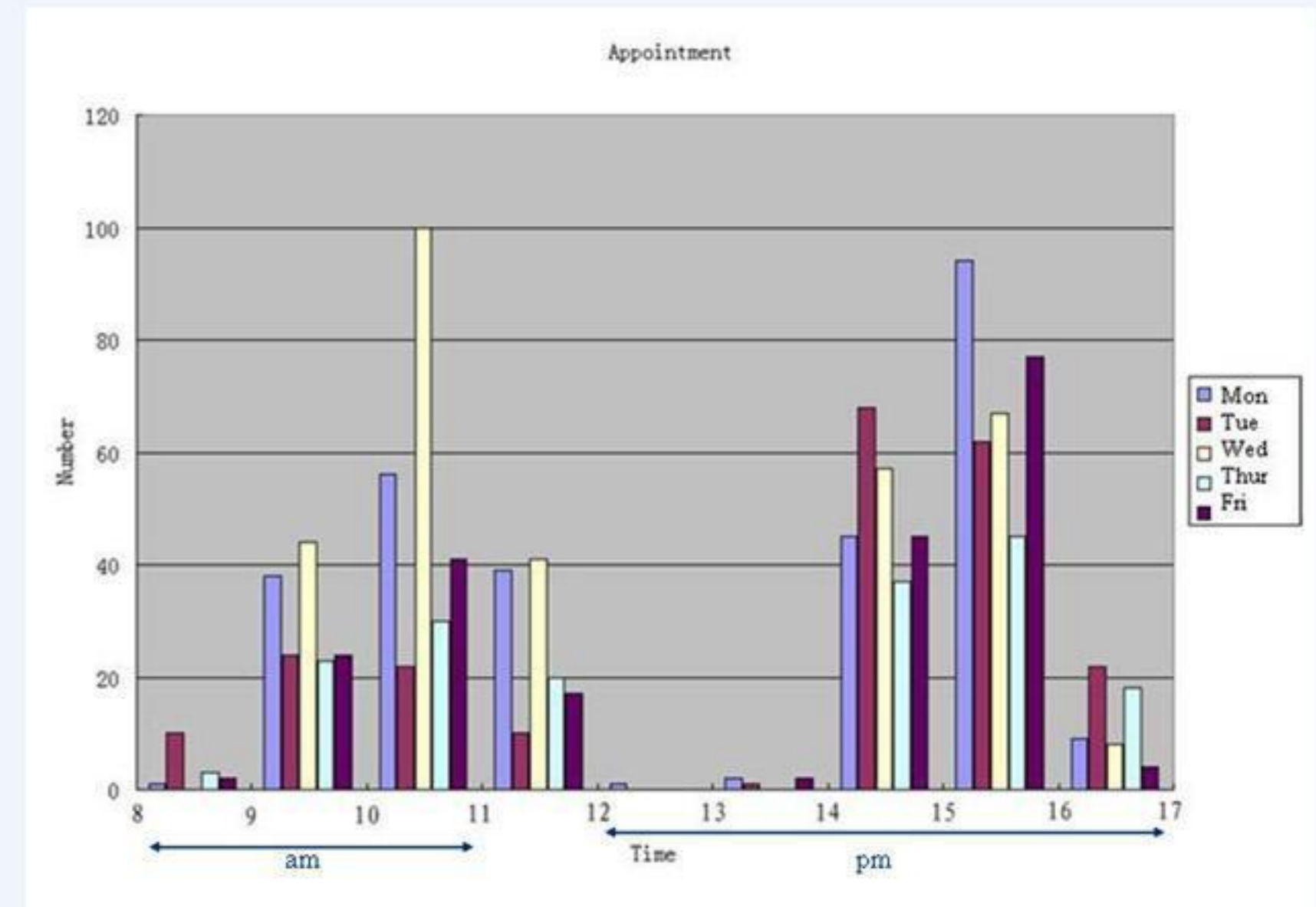
Problem Analysts

	Monday	Tuesday	Wednesday	Thursday	Friday	Total
Patient	191	151	206	135	163	846
Congested Appointment	35	34	30	34	42	231
Percentage	0.20	0.25	0.26	0.33	0.35	0.27

Congested Appointment: Appointments that are less than 2 minutes apart from the previous or the next appointment, it can be viewed as a kind of "forced appointment".

Simulation Model Assumptions

1. Simulating, the day with the highest number of patients
2. Inter-arrival times of patients is deterministic
3. All patients will arrive before the appointment time
4. Patients who might arrive later than the appointment time, do not affect the system
5. No first time patients
6. No patients require X-ray services after entering the Clinic
7. Equal proportion of patients require Pre-consultation and Consultation directly
8. Patients will not consult doctor more than once per appointment



The graph of each day's appointment distribution. It peaks at around 10-11am and 3-4pm. It is an indicator that the appointments are often congested during the peak hours.

Final Summary of Results

	Current	Mod A	Mod B	Mod C	Mod D	Mod E	Mod F
Cycle Time	94	55	58	59	38	57	61
Registration	7	4	4	4	3	6	4
Pre-Consultation	16	11	11	13	9	11	11
Hand Consultation	27	11	23	20	6	21	27
Otho Consultation	50	25	18	25	10	19	21
Post-Consultation	22	15	20	13	13	18	20
Payment	3	3	3	3	3	3	3

* All figures in minutes

ModA: Congested appts removed, ModB: Simple rescheduling, ModC: rescheduling+1 more doctor+2 more post-consultations, ModD: Appnts interval 15 mins, ModE: ModB+1 more registration staff, ModF: ModB+more patients