

GROUP QUALITY AND CLINICAL GOVERNANCE

NHG's Group Quality and Clinical Governance (GQCG) develops, implements, and evaluates corporate strategies and plans to achieve quality and patient safety, and manages clinical risk across the Group and in the Regional Health System. While the COVID-19 pandemic disrupted standard operating processes, it also presented opportunities for process redesign, and in turn, for GQCG to provide leadership and guidance to staff, the community, and the healthcare fraternity in matters of safety, risk, improvement, and innovation.

STEPPING UP TO FIGHT COVID-19

VOLUNTEERING ON THE FRONTLINES

When COVID-19 cases started to surge, more than 50 per cent of staff from GQCG stepped forward to help out at the frontlines. Between February and November 2020, they were deployed across NHG Institutions, migrant worker dormitories, and the Community Care Facility (CCF) at Singapore EXPO, to augment manpower and support the nationwide effort to contain the virus. They took on various roles and duties, including managing crowds, screening patients and visitors, packing and checking medications, and process auditing.

ENHANCING HEALTH AND SAFETY OF MIGRANT WORKERS

When COVID-19 outbreaks were detected among the migrant worker population in Singapore, NHG helped set up Medical Centres for Migrant Workers (MCMW) in the dormitories. GQCG worked with the Ministry of Manpower (MOM) to create a new audit framework, train staff in auditing practices, and audited 13 MCMW.

"All patients desire to be heard, understood, and shown empathy when seeking medical care. The human touch is essential in building trust and relationships, and helps patients achieve desired outcomes."

Ms Tracy Gan Director, Service Leadership & Patient Relations, National Healthcare Group Polyclinics



FRONTLINE EXPERIENCE

Mr Edrei Quek, Senior Executive, GQCG, was deployed to Institute of Mental Health's (IMH) Pharmacy Service Centre (PSC) between February and June 2020. He and team were responsible for checking medications prior to dispatch to patients' homes.



UPLIFTING STAFF DURING COVID-19

Staff working on the frontlines and in care settings not only faced a higher risk of exposure to the virus, but also heightened levels of stress, anxiety, and fear. GQCG together with Group Human Resource (GHR) implemented a peer support programme for staff at NHG HQ to provide psychological support for staff.

GQCG staff learnt virtual collaboration, including new tools and tips on working remotely. There were also team-bonding activities to bring cheer to staff. The department regularly connected over social media and virtual activities such as group walks, *Jukebox Over Lunch*, and *Kopichat* to share topics of interest.

Left: A/Prof Tai Hwei Yee, Group Chief Quality Officer, NHG, (centre) leading the NHG team to audit Medical Centres for Migrant Workers.

PRESSING ON WITH QUALITY

ENHANCING SAFETY AND QUALITY IN CLINICAL CARE

The NHG Harm Reduction Collaborative unit held its on-boarding meeting in July 2020 to welcome members of the Implementation Committee and Expert Panel. Helmed by institution representatives and in partnership with external experts, the unit aims to implement enhanced safe practices in clinical care.

As part of on-going efforts to strengthen risk awareness, GQCG launched a new publication, *Quality Bulletin*, which shares bite-size information on patient safety and quality improvement across NHG. In addition, training resources on the management of clinical risks were developed for the first time to complement training programmes at NHG Institutions.

In April 2021, Associate Professor Tai Hwei Yee, Group Chief Quality Officer, NHG, shared NHG's journey in building a culture of safety and management of clinical incidents with leaders from the Singapore Armed Forces (SAF) Medical Corps.



NHG Quality Webinar 2021.

NHG QUALITY DAY

In April 2021, the annual NHG Quality Day was conducted as a webinar, titled *Person-Centred Care in the New Normal*. Experts and panellists discussed topics such as influencing the making of national policies for person-centred care, preventive health, caring for vulnerable groups, and home care.

INAUGURAL INSTITUTE OF HEALTHCARE QUALITY VIRTUAL WORKSHOP

During the COVID-19 pandemic, the Institute of Healthcare Quality (IHQ), GQCG's training arm, leveraged on technology to train and share best practices among staff through virtual and hybrid platforms. Educators and administrators across IHQ reformatted existing curriculums and built capabilities to conduct effective virtual training programmes and workshops. In October 2020, IHQ held its first virtual workshop on "Measurement", to determine if changes implemented to processes/programmes have led to improvement in outcomes.

"At times, there will be external challenges or changes in our environment that may detract us from our core values. Especially during crisis when faced with the pressure to respond fast to the situation at hand, we need to bear in mind that patients are at the front and centre of what we do."

Associate Professor Tai Hwei Yee
Group Chief Quality Officer, NHG

IN THIS TOGETHER JAN 2021

THE Right PATIENT

Patient identification is the process of (1) correctly matching a patient to the intended interventions and (2) communicating information about the patient's identity accurately and reliably over the entire course of care delivery.

The risk of wrong-patient errors lurks behind a multitude of patient encounters occurring in various care settings, awaiting to rear its ugly head the moment we are not careful. And these represent only the tip of the iceberg:

- Admitting a patient under another patient's medical record or creating duplicate records at registration
- Asking a patient to confirm his or her name ("Are you Mr X?") instead of asking the patient to state his or her name ("Your name, please?")
- Relying on patients with impaired ability to confirm their identifying information

We probably are aware of more. The incidents on this list (intranet link) are more than just cautionary tales, alerting us to the real danger of patient misidentification at NHG.

Healthcare staff are the patient's first line of defense by practising safe patient identification practices such as:

- Speak up if you observe deviations from the patient identification policy.
- Adopt measures to avoid mix-ups when patients on the same unit have similar names.
- Confirm two patient identifiers, approved by the organisation (intranet link), at the beginning of each patient encounter.

More tips here (intranet link).
ECRI's advice for leaders (intranet link).

ANNOUNCEMENTS

come, co-create knowledge with us!

Have you read something somewhere that could be helpful for the NHG workplace?

OR

been involved in a work improvement project that has achieved results?

Watch this space for the sharing and recommendations by those who have

Questions? Email us at Q&A@nhg.com.sg

Click here to find out more.