

Mission Statement

To increase the uptake of Influenza Vaccination for High Risk Patients* from 13% to 30% in Hougang Polyclinic Teamlets** within 6months.

* Patients who are either 65 years and above, or detected with diabetes / asthma / COPD / heart diseases (CHD, HF, AF)

** Model of empanelment for patients with chronic diseases

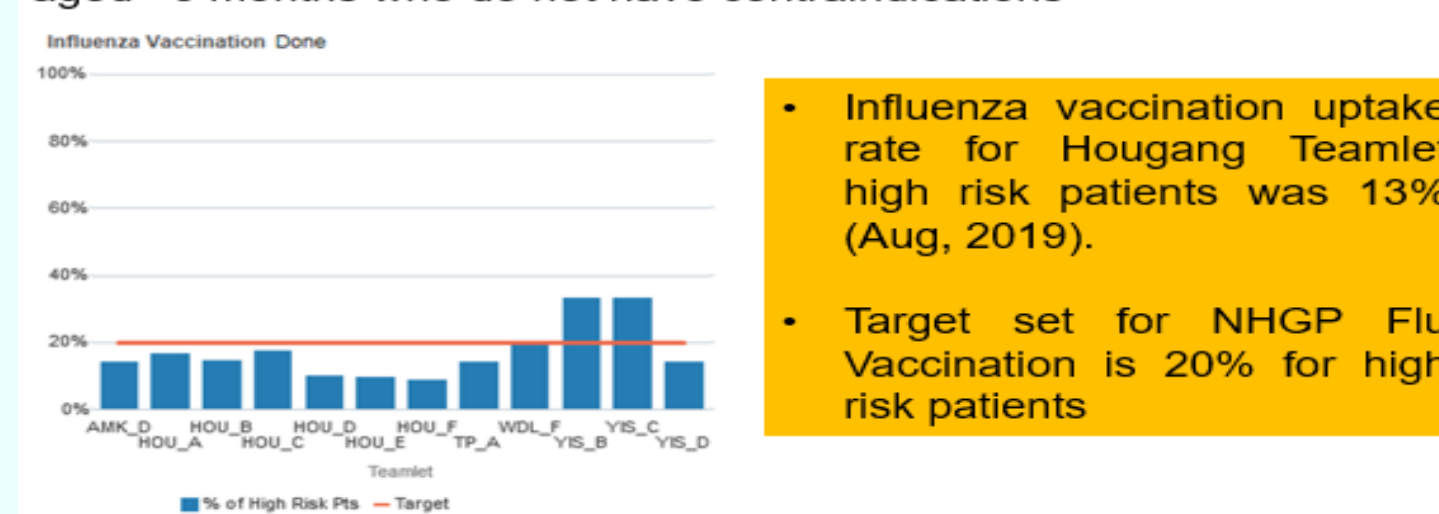
Team Members

	Name	Designation	Department
Team Leader	Ong Siew Leng	Care Manager	Nursing
	Ye Rui Jing	Care Manager	Nursing
Team Members	Lau Pei Ern	Vaccination Nurse	Nursing
	Low Siew Chyn	Care Coordinator	Nursing
	Dr Jonathan Foo	Doctor	Medical
	Ooi Hui Fen	Pharmacist	Pharmacy
	Jasmine Neo	Patient Service Associate	Operation
	Angela Tan	Financial Counsellor	Allied Health
Sponsor	Elane Zhang	Senior Nurse Manager	Nursing
	Sharon Foo	Nurse Clinician	Nursing
Facilitator	Winnie Poh	APN (Nurse Clinician)	Nursing

Evidence for a Problem Worth Solving

Influenza can result in pneumonia, hospitalization or even death, especially in populations at higher risk of developing complications of influenza. Older adults typically account for >90% of influenza-associated

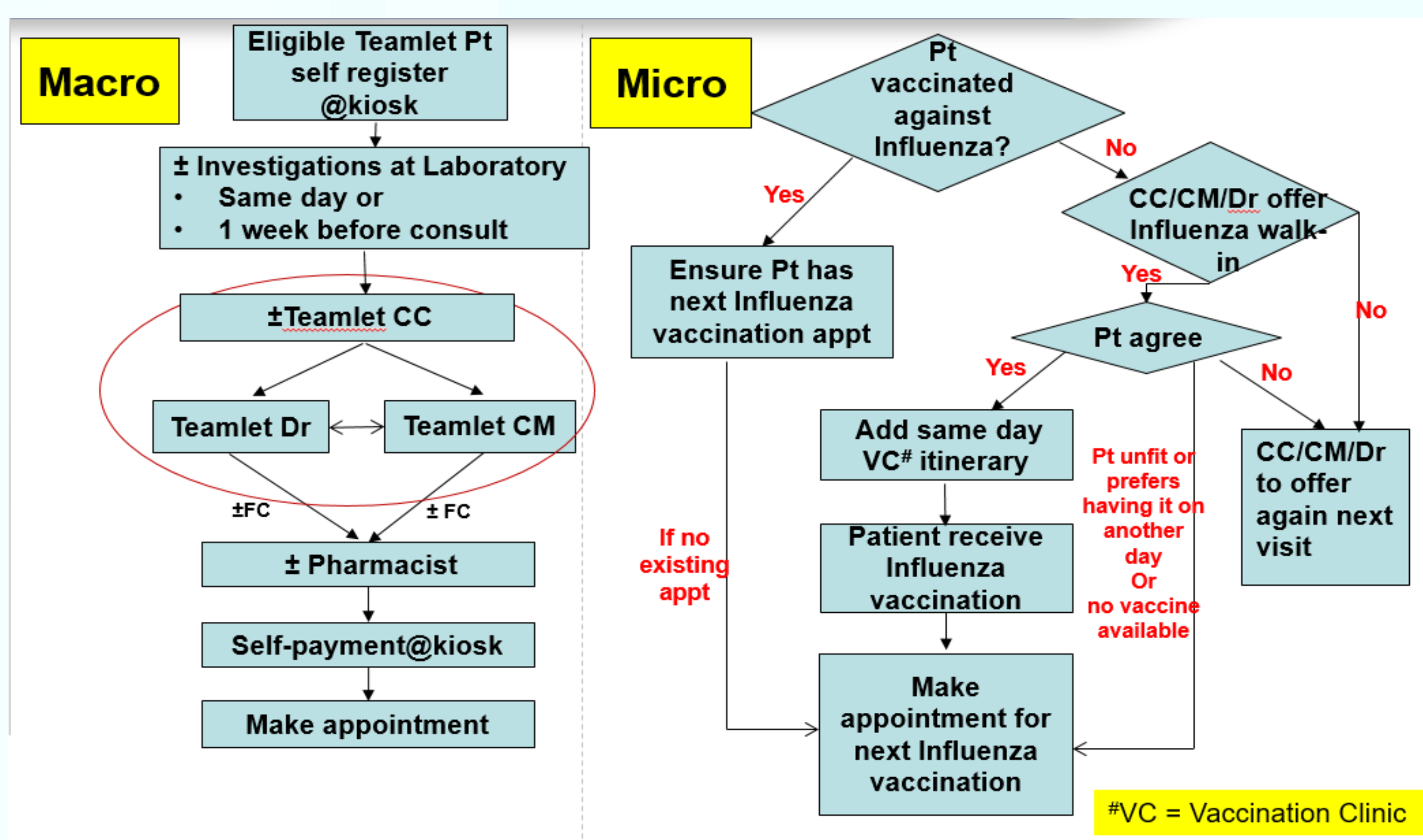
Routine annual influenza vaccination is recommended for all persons aged ≥6 months who do not have contraindications⁶



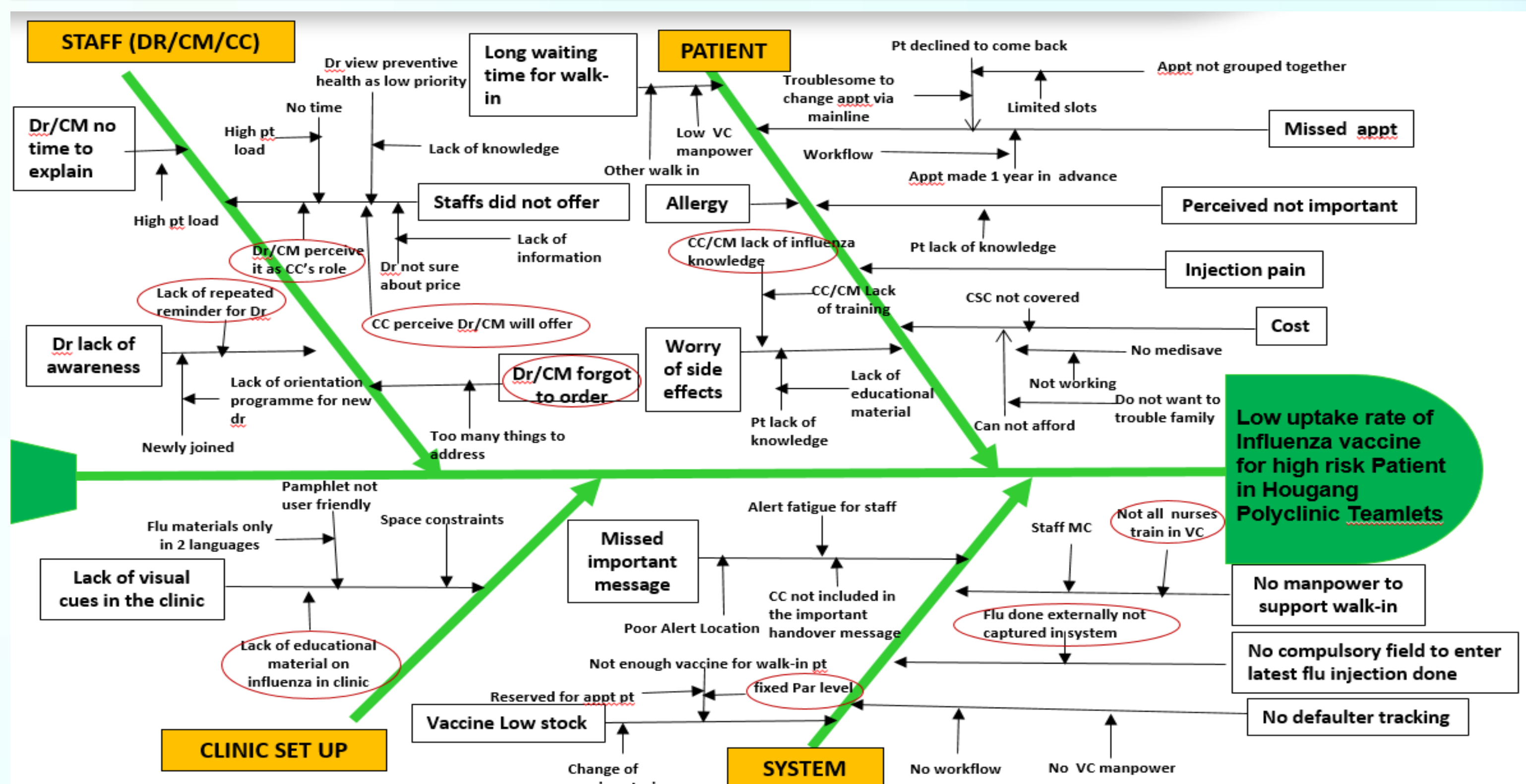
Current Performance of a Process

Teamlet	Jun-19			Jul-19			Aug-19		
	Done Vaccination	Total No. of Patients	% Done Vaccination	Done Vaccination	No. of Patients	% Done Vaccination	Done Vaccination	No. of Patients	% Done Vaccination
HOU Teamlet A	515	3,538	15%	577	3,515	16%	585	3,473	17%
HOU Teamlet B	484	3,534	14%	524	3,592	15%	530	3,611	15%
HOU Teamlet C	655	3,481	19%	664	3,561	19%	621	3,571	17%
HOU Teamlet D	344	3,532	10%	351	3,503	10%	342	3,468	10%
HOU Teamlet E	297	3,474	9%	313	3,479	9%	324	3,447	9%
HOU Teamlet F	145	1,741	8%	170	1,921	9%	179	2,034	9%
HOU All Teamlets	2440	19900	13%	2599	19571	13%	2581	19604	13%

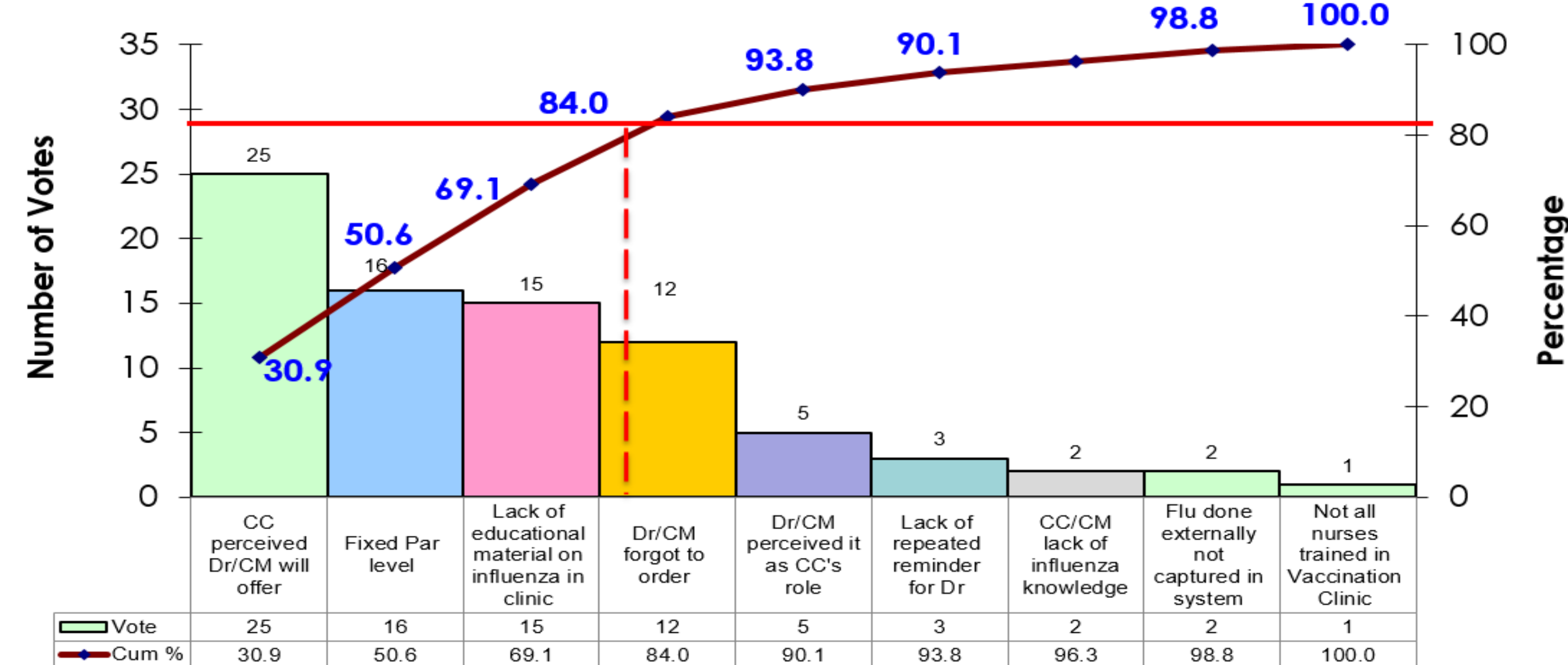
Flow Chart of Process



Cause and Effect Diagram



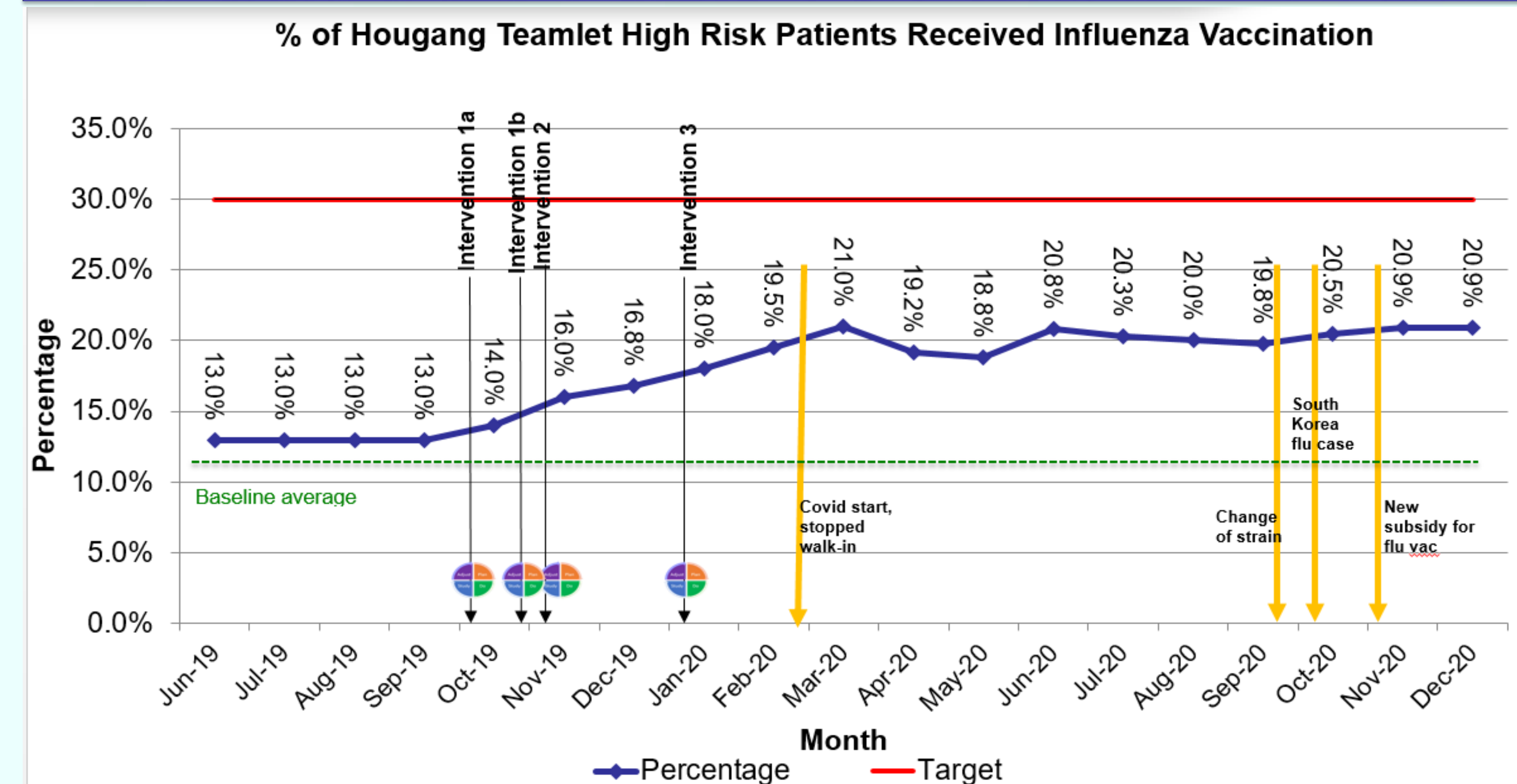
Pareto Chart



Implementation

CAUSE / PROBLEM (Refer to Pareto Chart)	INTERVENTION	DATE OF IMPLEMENTATION
1. CC perceived Dr/CM will offer Influenza vaccine to patient	a. CC to make use of CC scrub list to identify/tag/refer patient for Influenza walk-in or appointment.	07/10/2019
	b. CC to tag patients who refused Influenza walk-in or appointment by inserting a specific message in the ePOS system, under Patient Preference, Dr/CM to reinforce to the benefits/importance of receiving Influenza vaccination.	21/10/2019
2. Fixed Influenza Vaccine par level.	To ensure adequate Influenza vaccine supply for daily use.	18/11/2019
3. Lack of educational materials on Influenza in the clinic.	To provide different sources of Influenza vaccination information (such as poster, pamphlets, HealthHub SG app) for patients reference when needed.	02/01/2020

Results



Cost Savings

Direct Saving	Indirect Saving
Cost saving for patient hospitalisation on the average of 8 days from C class to B1 class is around \$ 344-\$2008.	For working adults, need to take MC and away from work, less productive.
For B1 class in Public hospital, 1 day inpatient cost is around \$251, and 8 days cost around \$2008.	For elderly patient, care givers need to apply leave and send patient to see Dr.
For B2 class in Public hospital, 1 day inpatient cost is from \$77-87, and 8 days cost around \$616-\$696.	More hospital beds can be spared for patients who are sicker.
For C class in Public hospital, 1 day cost around \$ 43, and 8 days \$ 344.	
The cost for influenza vaccine is \$16 for patient who are 65 years old and above OR those belongs to high risk group, and medicase claimable.	

Problems Encountered

Starting from mid-Feb 2020, all non-essential services were stopped due to Covid-19, including Vaccination Clinic, service only resumed in mid-August 2020. From mid-Sep 2020, due to change of flu vaccine strain, walk-in patients are stopped for a few days. NHGP has temporarily ceased the use of Vaxigrip Tetra vaccine from the 26 Oct 2020, due to incidents happened in South Korea. All influenza appointments are rescheduled, stopping walk-in patients as well. Influenza vaccine service resumed from 2 Nov 2020 followed by advice by MOH.

Strategies to Sustain

We will conduct regular update for Influenza vaccine to all staffs during monthly clinic meeting.
Get regular feedback from clinic staffs and patients.
Our CPIP interventions have been well adopted by our clinic staffs. During Covid-19 period, we did not actively push for flu vaccine, however, the vaccine rate is able to maintain relatively stable.
Share with other clinic during Nurse Manager meeting.