



Ode to JOY



MEDICATION-RELATED problems (MRPs) are often a cause of concern for patients discharged from hospitals to polyclinics.

In fact, a study conducted by [NHG Pharmacy](#) and [NHGP](#) between December 2017 and February 2018 found that 57.5 per cent of patients transiting from hospitals to primary care had MRPs. Furthermore, many were not taking their medications appropriately, with about 80 per cent having low to medium adherence.

One reason for MRPs is that

patients seldom tell their polyclinic doctor if their medications

were changed following their hospitalisation. Doctors also do

not have enough time during the consultation to do a thorough medication reconciliation.

As a result, MRPs are often caught by pharmacists only when patients collect their medicines. The pharmacist will have to call the doctor to amend the prescription, a process that on average results in 40 minutes of unnecessary waiting for the patient.

Furthermore, as the doctor is interrupted in the midst of a consultation, there is a risk of prescribing errors with the other patient





Staff viewing posters on display before the start of the Quality Day. This year's event was themed "Empowering Staff, Celebrating Joy In Improvement".



148
QIA submissions



83
EIAA nominations



9
EPCA winners

as well.

To tackle these issues, Toa Payoh Polyclinic piloted a medication clinic in December 2017, targeted at post-hospitalisation patients.

The process starts with hospital nurses being required to email NHGP's contact centre a list of inpatients who are discharged to continue their care with NHGP.

These patients are booked 30 minutes before their consultation with the doctor to meet a pharmacist, who will interview the patients, obtain their medication history and address any MRPs before the patient sees the doctor. They will communicate their findings to the doctor,

who can make better prescribing decisions with the additional information on hand.

The pharmacist also educates the patients on the importance of adhering to medications, and proposes solutions to problems that are hindering adherence.

These interventions reduced prescribing errors from 18 per cent in the control group to 6.9 per cent in the intervention group.

Near-misses were reduced by 77 per cent and the number of MRPs addressed resulted in cost avoidance of more than \$820,000.

This quality improvement project, led by Dr David Ng from Toa Payoh Polyclinic and Ms

Lim Li Ching from NHG Pharmacy, was given the Best Award for Innovation in Healthcare, during this year's [Quality Improvement Awards \(QIA\)](#) ceremony at Quality Day.

Held at the Lee Kong Chian School of Medicine, this year's Quality Day saw a surge in QIA submissions, increasing from 98 last year to 148 this year. Separately, nine Exemplary Patient and Caregiver Awards were handed out. Another 22 individuals and eight teams were given Excellence in Action Awards, out of 83 nominations.

The bumper crop of submissions underlines NHG's commitment towards quality improvement, which has always been



Ms Lim Li Ching (left, in red) from NHG Pharmacy received the QIA Best Award for Innovation in Healthcare at Quality Day, while attendees played games to learn more about quality improvement tools before the event (right).



“an integral part of NHG’s DNA”, said Quality Day chairman Dr Leow Yung Hian.

He noted that the daily improvement work put in by NHG staff had contributed to good clinical outcomes in the past year, as well as improvement in productivity and patient safety-related issues.

But with increasing demands and rapid changes in healthcare, “we have to ensure that we are able to maintain our passion and enthusiasm”, said Dr Leow, a senior consultant dermatologist from NSC.

That is why this year’s theme “Empowering Staff, Celebrating Joy In Improvement” is especially pertinent.

Indeed, empowering staff would allow them to respond quickly whenever situations arise, so they can tap on one another’s strengths. This can help eliminate stress, said keynote speaker Goran Henriks, chief executive of learning and innovation at the Qulturum in the County Council of Jönköping, Sweden, who shared various tips with the audience during his hour-long address.

The traits that are helpful for Joy In Improvement are reflected in the Quality Day artwork (see cover page). The design has a human face that represents NHG’s people, with an eye to see, ear to listen and no mouth. It also has an open mind that thinks out of the box and explores opportunities for improvement.

Close to 500 people attended the event, including Guest-of-Honour

and NHG Group CEO Prof Philip Choo, as well as NHG Board members Mr Seow Choke Meng and Mr Ramlee Buang.

In between the speeches and award ceremonies, they were treated to a performance by staff band TTSH Jamz, which had everyone clapping to their rendition of pop songs “Top Of The World” and “Just The Way You Are”.

Thanking them for their lively performance, Group Chief Quality Officer Tai Hwei Yee pointed out that artistic expression “opens our hearts and allows us to relax”, which can help staff find joy in work.

She urged the audience to think about the purpose of their work, how it links to patient outcomes and how everyone can support each other to make work better.

“How can we feedback to each other to learn? How do we understand our work today and improve it, so that the next person doing this job has an easier task?” she asked.

“Share your stories with your colleagues. That will help us to grow and connect with our purpose of working in healthcare. I’m sure you will inspire a lot of our colleagues to make a positive change.”



Staff band TTSH Jamz put up a lively performance with renditions of pop songs “Top Of The World” and “Just The Way You Are” (top), and Quality Day Organising Committee and helpers celebrate the successful conclusion of this year’s event (below).

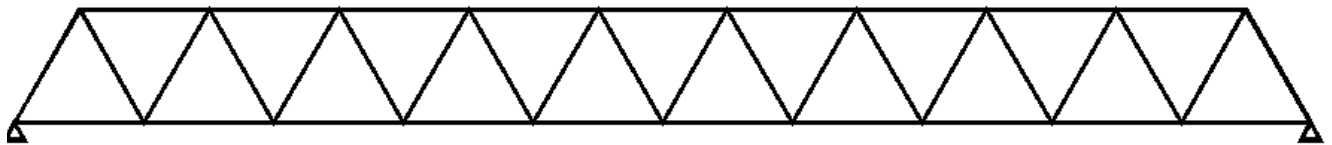




Mrs Elsie Ting (left), a PSS at IMH's EPIP and Mr Samuel Yee, a volunteer at NHGP were among the nine Quality Day EPCA winners. Next to Mrs Ting is her award nominator Ms Lorynn Mazlyna Mazli.



Bridging doctors



and patients

THREE times a week, at 9am, Mr Samuel Yee commutes by bus and MRT from his home in Bukit Batok to Woodlands Polyclinic.

It takes him some 30 minutes, but he is not making this journey for medical treatment – in fact he only goes to Woodlands when he is not sick.

This is because Mr Yee, 67, is a volunteer at the polyclinic – and one of their most dedicated. Affectionately known as Uncle Samuel, the retiree has become a familiar face to both staff and patients since he began volunteering last year.

He helps patients register and pay bills at the self-help kiosks, or find their way around the polyclinic.

Despite the time and effort required, Mr Yee wanted to volunteer because it is an opportunity for him to give back to the polyclinic, whose staff has been caring for him since 2009.

“They took very good care of me during my check-ups,” said the patient who goes for regular follow-ups for his blood pressure and cholesterol.

“I’ve gained much from their care. That’s why I still volunteer

there although I moved out of Woodlands last year.”

Mr Yee was recognised for his dedication at Quality Day, as one of nine recipients of this year’s NHG Exemplary Patient and Caregiver Award (EPCA). The award commends patients caregivers, or volunteers who demonstrate desirable behaviours, actions and attitudes, and had attributes of service ambassadors.

Another EPCA recipient who volunteers is Mrs Elsie Ting, who has been a Peer Support Specialist (PSS) to caregivers at



Mr Samuel Yee (left), volunteers at Woodlands Polyclinic every week, helping patients register and pay bills at the self-help kiosks.

“I encourage patients to volunteer because it's a good way to give back.”

Mr Samuel Yee (left), EPCA award recipient and volunteer at Woodlands Polyclinic

IMH's [Early Psychosis Intervention Programme \(EPIP\)](#) since 2012.

EPIP provides care to those who have early psychosis or those at-risk of developing it. A caregiver herself, Mrs Ting has spent many hours sharing her experiences, participating in forum group discussions and providing support to other caregivers. She has also helped to assemble a caregiver self-care kit.

Volunteers like Mr Yee are key to improving patient experience, because they can better understand what other fellow patients go through.

Before the new [Yishun Polyclinic](#) opened in July this year, for instance, Mr Yee went down for a site preview, to walk the patient's journey and share feedback and challenges one may encounter.

With the increasing workload on healthcare staff, Mr Yee, who also won the inaugural NHGP's iCARE Volunteer Award last year, feels patient volunteers can “act as a bridge” between patients and staff, as he understands their experience better. A patient may also be more amenable to hearing an explanation from another patient.

“We could share with them the challenges that doctors are facing, for example, if there are more patients today than usual,” he said, adding that volunteering has been a fruitful experience.

“I encourage patients to volunteer because it's a good way to give back.”

Mr Yee's sincerity has left an impression on those around him. “Uncle Samuel has served us tirelessly,” said Mr Yee's award nominator Mr Tang Chee Kai, operations executive at Woodlands Polyclinic.

“He possesses genuine care for all patients alike.”



EPCA winner Mr Leon Chester Stewart cooperated very well with his care provider at NHGP to maintain good diabetic control. With him are his wife (left) and his award nominator Dr Tricia Chang.

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Mr Goran Henriks addressing the crowd during Quality Day. As a token of appreciation, he received a calligraphy piece from GCEO Prof Phillip Choo. Translated from Mr Henriks' full name, the characters (following page) mean "a friendly and kind gentleman with decorum and strength".

Stay curious and explore



WHEN 25-year-old Christian Farman first started dialysis at the Ryhov County Hospital in Jonkoping, Sweden, he felt miserable about having to visit the hemodialysis clinic three times a week and be reliant on others.

He told the nurses, "I don't want to live any longer."

Through the nurses' help, Christian surprised everyone with his ability to use the dialysis machine, read and interpret results, document his care, and clean up the instruments all by himself. Before long, he was already managing his dialysis independently and even moved on to help other patients learn to do the same.

Suddenly they had 18 patients

doing self-dialysis and gained 20 per cent additional resources in the ward, said renowned healthcare innovation expert Mr Goran Henriks, Chief Executive of Learning and Innovation, Qulturum, Jonkoping County Council, Sweden.

Partnering patients

Delivering the keynote address at NHG Quality Day, Mr Henriks cited the story of Christian as a positive example of how radical change can happen when we partner patients in improving the work processes.

Today, the Jonkoping healthcare system has a "living library" with 40 employed patients all ready to participate in different

types of improvement work. This helps to ensure that conversations always start off "through the patients' eyes", and not with professional needs.

Relating back to the NHG Quality Day theme "Empowering Staff, Celebrating Joy in Improvement", Mr Henriks said: "Joy is when I am part of an inspirational workplace and the processes that improve my workplace. So focusing on the meaning and purpose is the most efficient way to help people to achieve joy in work, and get them motivated to improve quality in work."

It is therefore critical to build a system that empowers staff to create meaning in their work

and experience joy as they improve their work.

Joy in Improvement

To that end, he touched on a few possible ways to build joy in improvement.

First, the organisation would need to develop leadership that responds to constant change demands and expectation, as well as understands the importance of partnering stakeholders beyond the classical care limits. As Mr Henriks puts it, “the only way we can improve things is to do it together with the patients”.

Second, it needs to develop protocols and guidelines to ensure standardisation as work processes improve, so that everybody in the same system will use the same tools.

Third, it would need to foster a culture which empowers everyone to monitor work processes and respond by themselves whenever situations arise. This would help us to tap on one another’s strengths and eliminate stress from such situations.

Illustrating this with a clip of football superstar Zlatan Ibrahimovic’s goals, he pointed out that while the Swedish striker is a challenging player to manage, he enables his teammates to perform better because he brings them into play effectively, by moving to open spaces and anticipating their opponents’ actions.

Finally, as competencies are developed through repeated rounds of practice and learning, it is important to develop leadership that encourages learning and builds up the necessary network for support. One example of a learning platform Mr Henriks illustrated was Practice Visiting, a peer-to-peer method of assessing various aspects of general practice, which includes inspection, observation, anal-

ysis, and recording of practice activity followed by feedback of results.

we need to have community care in the hospital,” he said.

“While this requires a com-



“Focusing on the meaning and purpose is the most efficient way to help people to achieve joy in work.”

Mr Goran Henriks

Building joy in improvement



» Leadership understands the importance of partnering stakeholders, responds to change demands and expectations



» Develop protocols and guidelines to ensure standardisation



» Foster culture which empowers staff to monitor work processes and respond independently



» Leadership encourages learning, builds up network for support

“We should understand the importance of helping people to mirror or be together with someone that deals with the same problem. It’s absolutely the most effective way of learning,” he explained.

Integrate and optimise

Looking ahead, Mr Henriks believes the challenge for next generation’s healthcare workers is not only to optimise their own work, but to integrate and optimise multiple teams and processes, including routine care, collaborative care and specialty care.

“We need to have specialty care out in the community, and

pletely new set of professionals and would inevitably increase complexity, we can make it happen by setting rules on how we should work together.”

Urging NHG’s staff to “stay curious and explore”, he cited a quotation from Swedish Nobel Prize winner Tomas Transtromer: “Deep in the forest there’s an unexpected clearing that can be reached only by someone who has lost his way. So please, help each other, respond, explore, have fun in your daily work.

“Everybody has stages in life where it is hard. You’ll need a colleague that can help you. So keep together.” ☺



The CPIP team led by Dr Allison Tso (above) held multiple sessions to review literature, study practices worldwide, and debated on controversial areas before reaching a consensus as a team.

Beyond hospital walls

IN today's complex healthcare system, it is important that care for our patients go beyond the hospital walls.

One key focus is to ensure that they receive the appropriate care needed even after discharge, including proper follow-up of medications or vaccinations.

Without proper adherence, the effectiveness of treatment reduces significantly. These problems led two [Clinical Practice Improvement Programme \(CPIP\)](#) groups to embark on projects to improve the processes involved.

They shared their projects and lessons learnt at Quality Day, which also included a video

tribute to the early leaders and cultivators of NHG's hallmark training programme.

The first team from IMH – led by Advanced Practice Nurse (APN) Mr Shepherd Xia – sought to help IMH psychiatric patients improve adherence to their prescribed medicine, one month after they are discharged. Poor adherence affects recovery and could lead to re-admission.

By engaging patients through focus groups, the team gained insights on the key reasons for non-adherence, which included patients' unwillingness to accept their own illness, a lack of family supervision, and concern about the drugs' effectiveness and side-effects.

The team realised that no proper medication adherence counselling was available to motivate patients to change. Furthermore, they learnt that educating patients on medications alone does not improve adherence, if the patients do not see how medications can help them with their personal goals.

They tried to simplify their medications whenever possible. The team also engaged patient peers to share their experiences and encourage patients to go on depot injections – a form of long-acting anti-psychotic medication which improves adherence because it is administered every four weeks, but is often refused due to fear of needles and



The IMH team realised that it was important to have proper medication adherence counselling for patients so that they would be motivated to adhere to their medications.

“It is very important to include patients' experience and perspective in any patient-related projects that we do.”

IMH APN Mr Shepherd Xia

unknown side effects.

The APN documents the counselling sessions, so that patients' concerns and goals can be shared among the team.

After six Plan-Do-Study-Act (PDSA) cycles, the team managed to increase medication adherence one month after discharge from 38 to 86 per cent. At the same time, the re-hospitalisation rate decreased from 24 to 2.3 per cent, translating to a cost avoidance of \$93,000.

“We learnt that while we utilise evidence available to guide our interventions, it is also very important to include patients' experience and perspective in any patient-related projects that we do,” noted Mr Xia.

Meanwhile, the second CPIP team from TTSH brought together doctors, nurses, pharmacists, medical social workers and patient service associates to improve the uptake of pneumococ-

cal and influenza vaccinations in newly diagnosed lymphoma and myeloma inpatients – who have weakened immune systems – from 17 per cent to 100 per cent.

Led by Dr Allison Tso, the team mapped out the patient's journey from hospital admission to their discharge as an outpatient. Other than the lack of a comprehensive patient counselling programme, they also found that there was no consensus within the department regarding the appropriateness, timing and cost effectiveness of vaccinating patients, especially around the time of chemotherapy.

Recognising the importance of changing people's mindset in ensuring the sustainability of any interventions, multiple rounds of sessions were held to review literature, study practices worldwide and debate on controversial areas before finally

reaching a consensus as a team.

By introducing interventions at multiple points along the journey, they also developed a systematic process which actively encouraged the uptake of vaccinations at the start of admission, and ensured that patients who require follow-up vaccinations would receive them after their discharge. As a result, the team successfully achieved 100 per cent uptake of vaccinations for newly diagnosed lymphoma and myeloma inpatients, up from 17 per cent.

The interventions were then extended to all existing myeloma and lymphoma inpatients, increasing their uptake from 0 to 75 per cent. The project potentially saves over 4,000 bed days per year, translating to a cost avoidance of \$1.65 million. Most importantly, about 70 lives a year will be saved, said Dr Tso.

In her closing remarks, Group Chief Quality Officer A/Prof Tai Hwei Yee commended the work of the two CPIP teams for their efforts in pulling together a multidisciplinary team and galvanising everyone to achieve the change in mindset and process.

“Through these stories, we can see that when relationships are built on trust, purpose, active participation and learning together, a new reality of better care for our patients is created.”

“When relationships are built on trust, purpose, active participation, and learning together, a new reality of better care for our patients is created.”

NHG GCQO A/Prof Tai Hwei Yee





CELEBRATING QUALITY

To celebrate and learn about quality work, several institutions held their own quality-themed events over the last few months

KTPH/YCH

At the Yishun Health Quality Convention on 5 September, guest speaker A/Prof Kenneth Mak, Deputy Director of Medical Services, MOH and former Chairman, Medical Board, KTPH spoke about professionalism.

In the past, professionalism was synonymous with mastery, and it centred around the individual's ability to perform to high standards. Increasingly we are recognising that professionalism is multi-faceted, and the focus has shifted to one's ability to work in teams.

Prof Mak highlighted that professionalism requires not just mastery, but also compas-

sion, stewardship and accountability. It is not just a list of do's and don'ts but a set of principles to guide our actions. Our patients have the right to care that is good quality, appropriate, safe, respectful and trusted.

The event rounded up with an awards ceremony to recognise service champions and a presentation of Yishun Health's corporate scorecard by KTPH COO Ms Yen Tan.

NHGP

NHGP celebrated its Quality Day on September 21 at the NUS Shaw Foundation, attended by over 200 staff from HQ and the polyclinics.

NHGP celebrated their Quality Day themed 'Cultivate. Ideate. Innovate' at the NUS Shaw Foundation on September 21.

In her opening address, NHGP and Primary Care CEO A/Prof Chong Phui-Nah explained this year's theme 'Cultivate. Ideate. Innovate.' It highlights the importance of innovation and encourages staff to continue the good work of quality improvement.

When making improvements, it is also critical to focus on adding what is of value to the patients, she reminded the audience.

Her address was followed by two insightful sharing sessions by keynote speakers Mr Peter Ho, CEO of HOPE Technik, and Ms Lim Choon Heong, Head, Agile and Operational Excellence at



Staff at NSC's Quality Day listening to the welcome speech (left) and having a go at the games booths during the pre-event segment (top).

DBS Bank. They both had a similar message – keep pushing and challenging the status quo.

Mr Ho said innovation is “getting comfortable at doing what we are uncomfortable at doing”. “If you are setting a milestone of change, set it big. If not, you will be obsolete very fast,” he urged.

Quality improvement project posters and compliments for colleagues demonstrating the principles of 4P7R were displayed at the event, which also saw 22 awards handed out for service excellence and achievements in quality improvement work. Other quality awards were given out to staff at the CEO Townhall sessions.

NSC

Taking the lead from NHG HQ's

Quality Day theme “Empowering Staff, Celebrating Joy in Improvement”, 245 staff gathered to celebrate joy in their work at NSC Quality Day on October 17.

Dr Leow Yung Hian, who is also the chairman for this year's NHG Quality Day delivered the welcome speech, stressing to staff the importance of having an open mind, exploring new possibilities and thinking out of the box to ensure success and innovation in any quality improvement initiatives.

To encourage NSC staff to achieve “joy in work”, three game booths namely ‘Trick or Treat’, ‘Jigsaw Puzzle’ and ‘Separation Anxiety’ were set up during the pre-event segment, putting participants’ hand-eye coordination to the test.

The event also recognised 18 staff for going the extra mile in their services through the Service Champion awards, another staff for demonstrating NHG's 4P7R through the Excellence in Action Award, and a team for excelling in its quality improvement project through the NHG Quality Improvement Award.

The event rounded up with two sharing sessions by Mr Samuel Wong, NHG Cluster Information Security Officer and Dr Madeline Ho, Infection Control Committee Chairperson.

The former touched on the importance of cybersecurity awareness, while the latter examined the latest NSC flu vaccination survey results and debunked common myths of flu vaccination. ➤



KTPH COO Ms Yen Tan presented Yishun Health's corporate scorecard (left) and an awards ceremony was held to recognise service champions (right) at Yishun Health's Quality Convention.