

HO/ MO Orientation

Increasing time-efficiency, participation and enhancing communication between patients and stakeholders

Michelle S.L Wee, KK Women's and Children's Hospital
Serene S.H Pok, KK Women's and Children's Hospital
Eunice M.Y Ngiam, KK Women's and Children's Hospital

Background

- HO/MOs are posted on a quarterly and half yearly basis to all institutions.
- Hospital wide orientation programme
 - To equip these doctors with critical information and knowledge
 - Help them to transit and settle into the hospital's daily grind

Full day programme on the first day of the HO/MO posting

- 9am – 4pm , 15 speakers
- HO/MO also have other training programmes (eg.CLMM)

Issues faced with full day orientation programme

- Manpower shortage at ward and clinics
- Lecturers have to give repeated lectures 5 times a year
- Out of phase doctors who are out of the regular postings have to wait for the next orientation to be conducted. Hence, they are unable to familiarize with critical protocol and information as soon as they are posted to the hospital.
- Unsatisfactory participation rate of the HO/MO for the orientation programme as clinical manpower is required in the wards and clinics.

Methodology – Accelerated Model of Improvement (AMI) Charter

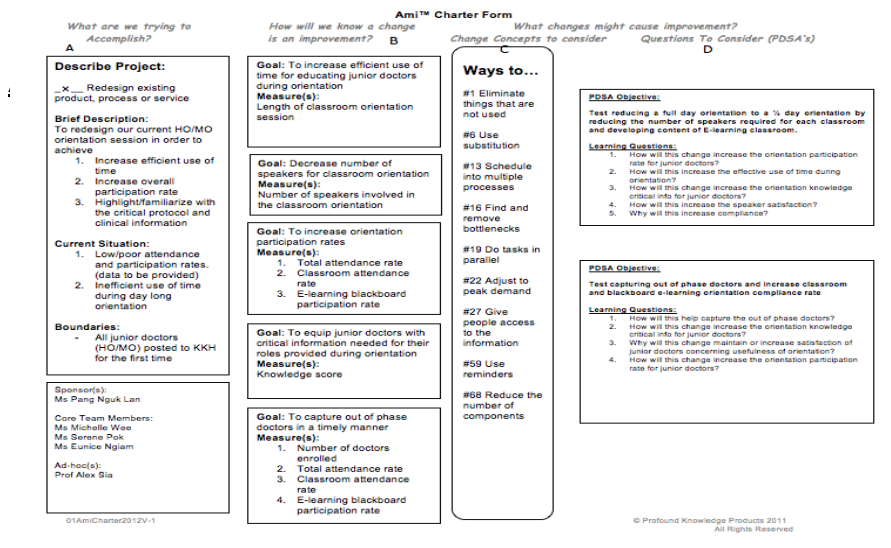


Fig1. Project outline – Objectives, goals and strategies

Need for improvement

1. To increase participation rate by minimizing impact to manpower in the ward and clinics
2. To equip newly posted doctors with the relevant and critical protocols and clinical information as soon as they are posted to the hospital
3. To free up the lecturers' time so that their clinical duties will not be disrupted

Improvement changes made

1. The programme has successfully reduced to half a day
2. Introduction of Blackboard e-learning
3. Reduced number of speakers from 15 to 5

Indicators:

- Participation rates of junior doctors
- Length of each classroom session
- Knowledge score
- Satisfaction rate of junior doctors
- Number of out of phase doctors we are able to capture

Orientation Programme Outline

Programme Outline - PAST			Programme Outline - REVISED		
TIME	TOPIC	SPEAKER	TIME	Item s	Speaker(s)
9:00 - 9:20	Breakfast and Registration	Medical Affairs	9:00am - 9:15am	Breakfast	CMB, Division Chairmen, ADO, JOC Chairman
9:20 - 9:35	Welcome address opened by CMB	A/Prof Anette Jacobsen, Acting CMB	9:15am - 9:30am	Welcome by CMB	A/Prof Anette Jacobsen
9:35 - 9:45	Corporate Vision	Medical Affairs	9:30am - 9:45am	Division of Surgery	A/Prof Anette Jacobsen
9:45 - 10:00	Associate Dean Posters	Prof Phua Kang Bo (representing Prof Tan Chung Lin)	9:45am - 10:00am	Division of Medicine	A/Prof Chong Chia Yin
10:00 - 10:35	Junior Officers Committee	Dr Tan Thiam Chye, Chairman, Junior Officers Committee	10:00am - 10:15am	Division of O&B	A/Prof G4 Tan
10:35 - 10:50	Care & Consent Committee	Dr Chong Bao Ling, Member, Care and Consent Committee	10:15am - 10:30am	Junior Officer Committee	Dr Tan Thiam Chye
10:50 - 11:00	Clinical Quality & Patient Safety	Mr Wong Ngai Lin, Assistant Director, Medical Affairs	10:30am - 10:50am	Patient Safety*	Me Pang Ngak Lan
11:00 - 11:30	Good documentation Practices	Dr Chong Chue Yee, Chairman, Patient Records Review Committee	10:50am - 11:00am	DDIT*	A/Prof Harvey Tee
11:30 - 12:30	Lunch	Medical Affairs	11:00am - 11:10am	Pharmacy*	Me Irene Quay
12:30 - 12:45	Registration	Medical Affairs	11:00am - 11:20am	Patient Records Review Committee*	Dr Oh Jean Yin
12:45 - 12:55	Division of O&B	A/Prof Tan Koh Hoon, Chairman, Division of O&B			
12:55 - 13:35	Division of Medicine	Prof Chay Oh Bala, Chairman, Division of Medicine			
13:35 - 13:45	Needlestick Injury & Basic Infection Control	Dr Nalini Tan, Department of Paediatric Medicine			
13:45 - 14:00	Diagnostic Imaging Protocol	A/Prof Harvey Tee, DDIT			
14:00 - 14:15	Laboratory Protocols	Mr Peter Lim, Chief Medical Technologist			
14:15 - 14:30	Pharmacy Protocols	Mr Oh Ching Ching, Pharmacy			
14:30 - 14:45	M&S Safety for Medical Personnel	Ms Tan Kar Sin, DDIT			
14:45 - 15:00	Medical Records Protocols	Mr Ling Cheong Wang, D&MS			

Fig2. Significant reduction of classroom orientation programme

Orientation Compliance rate

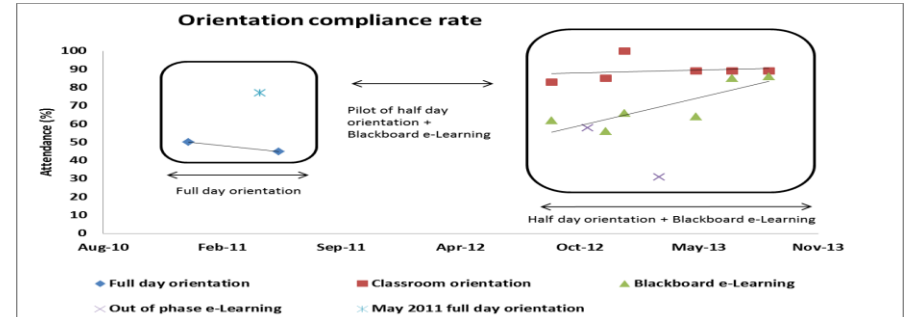


Fig 3. Comparison of attendance of full day orientation vs. half day classroom orientation & blackboard e-learning. Increased compliance of half day classroom orientation and increasing trend of compliance for blackboard e-learning

Junior doctors satisfaction survey (Classroom & Blackboard e-Learning)

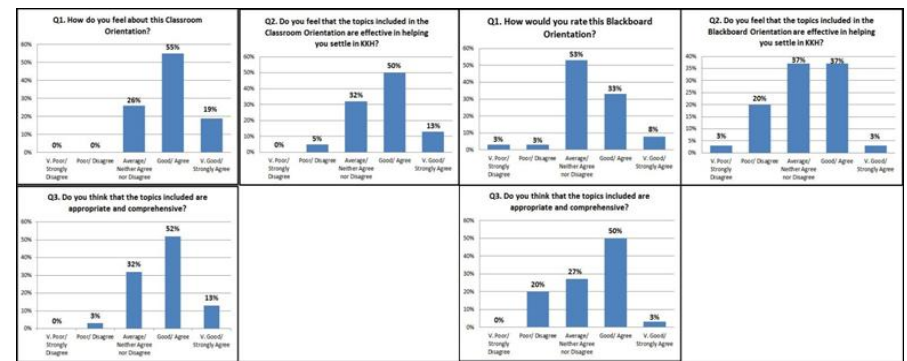


Fig 4. Junior doctor's were largely favorable to the structure of the orientation programme

Knowledge score of Blackboard e-Learning modules

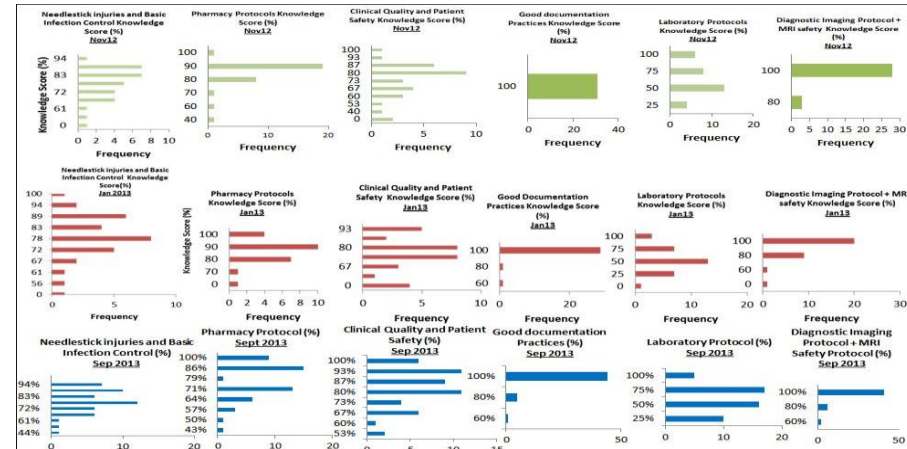


Fig 5. Analysis of content and result of blackboard e-Learning

What did we accomplish?

- Increased participation rate for classroom orientation
- Disruptions between lectures are minimized since our doctors are allowed to attend the virtual session at their own time and pace
- Blackboard e-Learning participation rate increased following collaboration with the HODs since July 2013.

Quality Enhancement Savings

- Speakers are freed up to perform their clinical duties in the clinics and ward
- Minimized waiting time of patients waiting in the clinics and wards while they are doing their presentation

Challenges

- Difficult to change people's mindset
- Need support from all departments to increased and encourage participation of junior doctors to attend the sessions
- Implementing the blackboard eLearning requires more administrative work, i.e. monitoring

Suggestions for Spread and Sustainability

- Changes can be easy to implement
- For long-term sustainability, it will be good to tie in the orientation participation with the doctor's medical curriculum → compulsory for them to attend the sessions.
- Regular review of the contents on the blackboard will be necessary
- To work with Singhealth Academy to consider better virtual platform which is more user friendly and for easier monitoring