







Managing Risks in a **Major Makeover Project**

Albert Tan (Author) Cheryl Ong (co-author)



Background

Renovation in any healthcare facility is a risky event. Inadequate control and management of these projects could impact medical care, service to our patients and cause great inconveniences to caregivers and staff.

Replacing the existing building façade aluminum cladding of SNEC's podium block in year 2013 was one such project, but to renovate the Centre's main lobby and demolish the existing driveway and construct a new one all at the same time will require a robust risk mitigation plan and a great team that can execute it well.

With the introduction of Enterprise Risk Management (ERM) in year 2012, SNEC has been using the structured mitigating strategy and process to conduct risk assessment before executing any major renovation project. The project team faced many challenges to coordinate these 3 projects with 3 different main contractors. With a very tight timeline and limited resources, these projects was slated to be completed by July 2013 for a major international conference in SNEC.

Aim

The main objective of this proactive risk management plan for this project is to identify potential negative events that may occur during the project period and employ counter measures to adequately address them.

Methodology

Using the risk management process, a cross-functional team comprising representatives from SNEC Operations Department, **SNEC Procurement** Department, SingHealth **Facilities Development and Campus Development** was formed to proactively discuss, identify and assess risks from all objectives from Strategic, financial, operational, compliance, reputational, reporting prior to the start of the project.

Risk Impact									
Risk Likelihood									
Return to Parameters									
Return to Introduction									
Strategic Objective	Compliance Objectives								
Financial Objectives	Reputational Objectives								
Operational Objectives	Reporting Objective								

The risks were then assessed and evaluated based on their existing controls. For risks that were deemed to be under-controlled, additional controls were identified and incorporated in the risk treatment plan. For example, any damage on the window panels to the operating theatre will compromise infection control. Additional measures taken to address this included protections to the window panels. Actions in the risk treatment plans were then implemented before the project. Parameters for assessing the effectiveness of these treatment plans were also determined for monitoring purpose.

Factor possible interruptions / Contingency to project schedule ent objects falling fro







Inspection of Scaffolding

Patient seated below glass roof







Barricade from Public

Results

		No of occurrence															
		2012					2013										
Risk	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct		
Injury to Public	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Injury to Patient	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Violation of law & regulations	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Compromise infection control	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Noise affecting consultation	0	0	0	1	0	0	0	1	0	0	0	0	0	0	0		
Risk		2012					2013										
Meet project schedule	Yes	Yes	No	No	No	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes		

Conclusion

The Enterprise Risk Management's systematic approach in addressing and mitigating risks has enabled SNEC to manage potentially negative events in this project effectively. The 3 projects were completed on schedule and patient care was not compromised during the project period. We received many positive feedback from patients, caregivers and staff after the completion of these projects.

Despite the closure of the main entrance for the cladding work and on-going construction at our driveway during our JCI audit in December 2012, we successfully attained our JCI reaccreditation.









