

Implementation of '@CGH'

Collaborative Model



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Introduction & Background

Population ageing presents a great challenge to hospital's service delivery. With the ageing population demographics in the eastern part of Singapore, the number of CGH patients requiring specialised and complex care is expected to increase proportionally. Together with the SingHealth institution partners, CGH has built-up the collaborative care efforts to meet multidimensional health needs of the eastern population and to optimise the hospital's efforts to offer integrated, continued, consistent and evidenced-based care. Apart from the access to care issue, the other challenges behind the initiative include the increasing need for a common platform to establish quality improvement and other developmental frameworks between CGH and its SingHealth institution partners.

Aims

- Address population's needs for access to care.
- Establish a platform for collaborative development initiatives with SingHealth institution partners.

Methodology

We envisioned '@CGH' collaborative model to establish closer and deeper collaborations between CGH and the partnering SingHealth institutions, providing both CGH and the partner institutions with a common platform to come together to address the eastern population's needs for appropriate care access and quality care. The '@CGH' collaborative model was guided by the principles that the patients should enjoy the clinical standards and service level no less than what they would have enjoyed at the Outram Campus.

The collaborative model focused on:

- i. Addressing population's needs for access to care through:
 - Clinical service development.
 - Capability and capacity development.
- ii. Establishing a platform for collaborative development initiatives through:
 - Joint governance.
 - Training, education, research and innovation.
 - Collaborative identity (co-branding).

CLINICAL SERVICE DEVELOPMENT

Development of clinical services based on patient needs and profiles

Development and refinement of existing pathways

Provision of timely and integrated care

Commitment to service sustainability

CAPABILITY & CAPACITY DEVELOPMENT

Training of staff in support of service expansion

Cross-training of staff in other specialties to augment triaging / screening capabilities

Access to Care

'@CGH' Collaborative Model Thrusts

Framework for joint governance:

JOINT GOVERNANCE

-Clinical standards and guidelines

-Mutually-established KPIs

-Provision of feedback on

Provision of co-leadership and co-supervision

staff performance

Participation in joint risk management activities

Facilitation of organisational development

TRAINING, EDUCATION, RESEARCH & INNOVATION

Manpower support for training and teaching:
-Undergraduate programmes
-Residencies

-Continuing medical education
-Nursing and AHP education
-Fellowships

Provision of support in research and innovation

COLLABORATIVE IDENTITY (CO-BRANDING)

'@ CGH' Co-branding

Branding and displaying of the National Centres' logos at mutually-agreed locations within CGH

Support and participate in each other's cobranding activities

Platform for Collaborative Development Initiatives

Implementation & Results

The '@CGH' collaborative model offers more comprehensive care and improved access to care for the community in eastern Singapore with the launch of:

- O NCCS Oncology Clinic @ CGH
 - Medical Oncology (2013).
- SNEC Eye Clinic @ CGH
 - Ophthalmology (2016).

NNI Neuroscience Clinic @ CGH

- Neurology & Neurosurgery (2017).
- NDCS Oral & Maxillofacial Surgery @
 CGH
 - OMS and Inpatient Care (2018).

For example, prior to the opening of the NCCS Oncology Clinic @ CGH, all of the CGH's oncology patients who required chemotherapy would have had to be referred to NCCS at Outram Campus. The opening of the clinic in 2013 enabled CGH to better provide seamless care to the patients.

On top of that, the '@CGH' collaborative model serves as a platform for improved comanagement of care, development and refinement of clinical pathways, stronger joint governance frameworks, and professional development.

The co-branding initiative and activities also provide reputational boost for both CGH and SingHealth institution partners, leading to more developmental opportunities and heightened collaboration awareness.

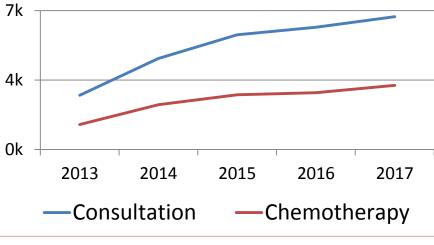
'@ CGH' Collaborative Model

Official Launch of NCCS Oncology Clinic @ CGH

NCCS Oncology Clinic @

Patients at NCCS Oncology
 Clinic @ CGH can be ensured
 a consistent standard of care,
 as the clinic is staffed by NCCS
 oncologists and nurses.

Benefitted 25,959 consultation visits and 12,372 chemotherapy visits since its inception on 2013.



NCCS Oncology Clinic @ CGH

Collaborative Development Initiatives

Access to Care

- Regular Oversight Committee Review to ensure consistent

standard of care:

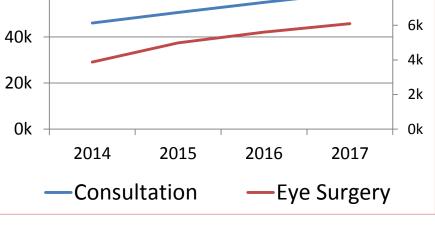
- Subsidised new case appointment lead time was kept consistently around 10 days in average.
- 100% of the 1st
 appointment and once
 every three patient visits
 were seen by a specialist.

SNEC Eye Clinic @ CGH



- Providing patients with new treatment possibilities through innovative multidisciplinary programmes codeveloped with other clinical departments in CGH.
- Ophthalmology outpatient consultation visits and surgery workload grew by 28% and 57%, respectively, in three years (2014 – 2017).

SNEC Eye Clinic @ CGH



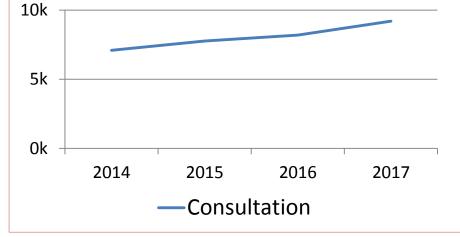
- Joint efforts to expand the range of eye care services in CGH and to improve the quality and value of care.
- Development of Comprehensive Integrated Eye Referral Clinic (CIRCLE) to facilitate patient right-siting and to bring down appointment lead time (in progress).

NNI Neuroscience Clinic @



- Closer collaboration between NNI and CGH to extend and deepen the offerings of neurology and neurosurgery services in CGH.
- Neurology & Neurosurgery outpatient workload increased from 7,090 (2014) to 9,197 (2017), grew by 30% over three years.

NNI Neuroscience Clinic @ CGH



NDCS Oral Maxillofacial Surgery Clinic @ CGH



- The clinic focuses primarily on subsidised care in Oral and Maxillofacial Surgery and hospital dental services.
- The collaboration provides the opportunity for CGH and NDCS to optimise and improve the service delivery to the patients in the east.
- NDCS and CGH are in the midst of exploring to possibility to co-develop Geriatric and Special Care Dentistry for stroke patients in CGH (in progress).
- Development of Hyper-Acute Stroke Centre in CGH (in progress), to address eastern population's needs for hyper-acute stroke services.
- Enhanced stroke management measures in CGH saw the Door to Needle (DTN) ≤ 60 mins improved from by 15.1% (2016-2017),
 12.1% above the target.
- o 2,223 A&E stroke attendance in 2017.
- o 336 Stroke activations in 2017.
- Development of ValuedCare of Stroke Programme: A collaboration among NNI@CGH, CGH Rehab Medicine and CGH Geriatric Medicine (in progress).

Conclusion

Placing patients' needs in the centre of the care delivery process. The extended and deepened '@CGH' collaborative model had showed significant improvement results in addressing the eastern population's needs for appropriate access to medical oncology, eye and neurological health care with the development of clinical services' capacities and capabilities based on the patient needs and profile. Supported by strong joint governance frameworks and long-term collaborative goals, the '@CGH' collaborative model had effectively brought the institutions together to co-develop various quality improvement and developmental initiatives to enable the delivery of integrated, continued, consistent and evidenced-based care.

Moving Forward

CGH shall continue to work closely with the SingHealth institution partners to heighten the close partnerships built through the '@CGH' collaborative model.

We will leverage on each others' strengths and expertise to enhance the depth and width of the clinical services and explore ways to better serve the healthcare needs of the eastern population.