

# SELE-SERVE PROJECT

Wang Xun Wu, Sim Woei Ling, Ong Yi Ling, Heng Bing Cheng, Siti Syazwani Binte Mohamed Noor, Haron Bin Kamarudin, Alagammal Parameswari D/O Supaya, Yang Sook Ching Selena, Nur Farhana Binte Kamarudin, Zainuddin Bin Mohamed, Cheryl Lim



**Hospitality & Environmental Services** 

## Tan Tock Seng

#### BACKGROUND

Inpatient ward visitors are required to register daily. The four modes of registration are counter, self-registration kiosk, online & pre-registration.

There was a low take-up rate for the self-registration modes compared to counter registration. Visitors depended heavily on the counter staff for registration, leading to over-reliance on human interventions and longer waiting time for registration.

A survey conducted showed that visitors prefer self-registration modes if these are easily available to them.

## OBJECTIVE

- To improve the usage of visitor self-registration modes so that visitors can see their loved ones in the quickest possible time with least frustration
- To reduce the reliance on counter registration, thus allowing staff redeployment and better workload management

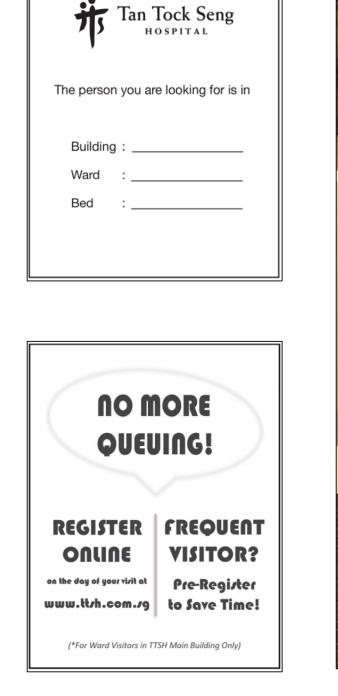
#### METHODOLOGY

4 interventions were implemented with the strategic focus of changing visitors' behaviour:

#### 1) Advocate self-registration

- a. Information on self-registration modes are strategically displayed on ward memo pad, public lifts and the registration areas
- b. Pre-registration forms made visible for visitors with the tagline "Save Time and Skip the Queue" to entice visitors
- Online registration displayed in the form of an QR code







### 2) Easy 4-step guide

A 4-step guide is placed on all kiosks to educate the visitors on the ease on using self-registration.



### 3) Overhaul counter queue layout

The counter queue layout was redesigned to redirect visitors to the self-registration kiosks, thus reducing their waiting time to be attended by a counter staff.



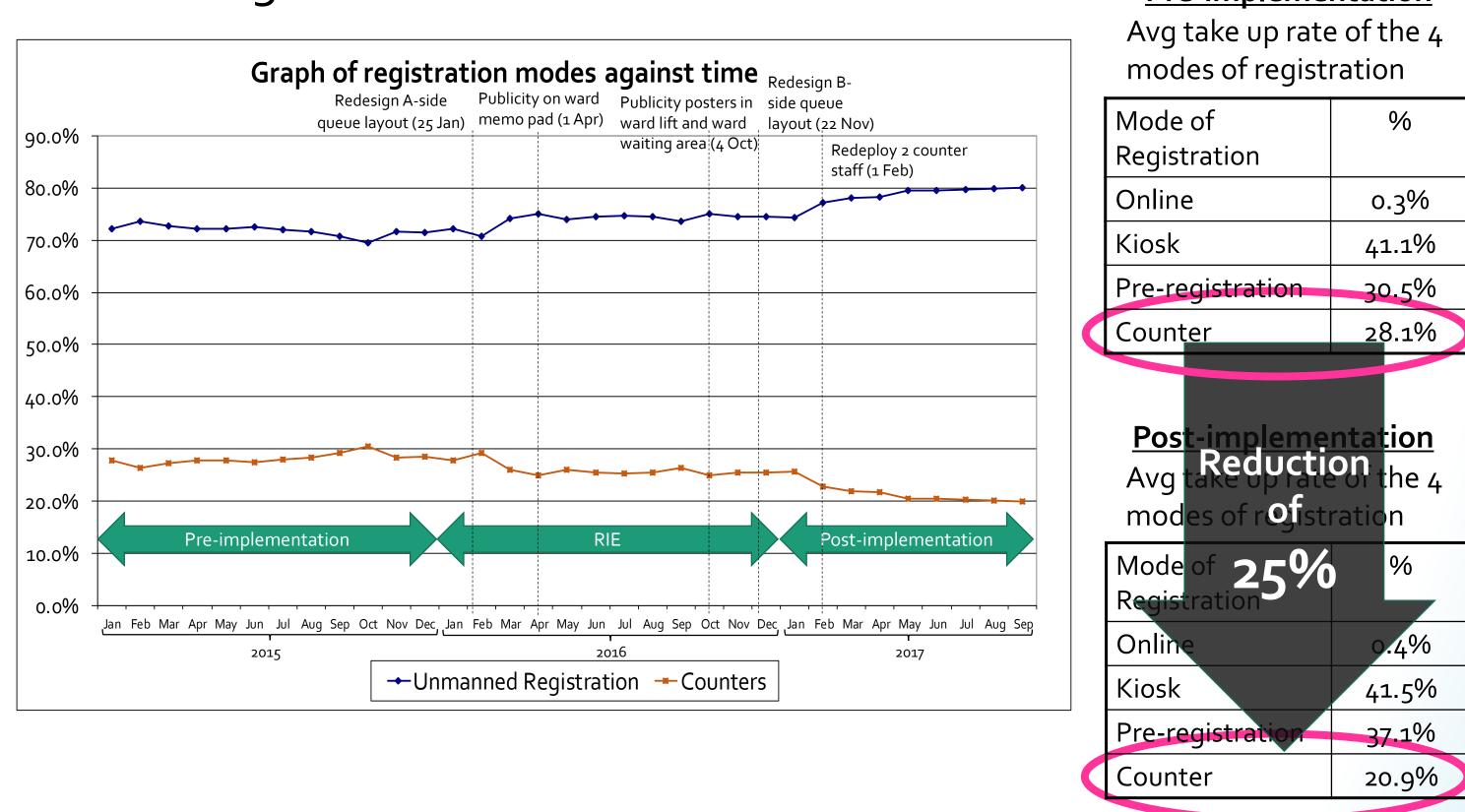
#### 4) Redeploy counter registration staff

Staff are redeployed to roving duties, leaving only 1 staff each at the 2 registration areas to handle counter registration during the visiting hours. This encourages visitors to self-register, instead of waiting in the queue to be served.

#### RESULTS

With the implementation of the 4 interventions, counter registrations decreased drastically as more visitors are aware and choose to self-register.

A significant drop of 25% in counter registration was observed as more visitors opt for the self-registration modes after various efforts put in to educate visitors on the other different registration modes available. Pre-implementation



The reduction in human intervention – made possible after the implementation of a post-project intervention; resulted to an increased staff productivity, translating to an estimated man-hour savings of 8 hours per day.

4 staff are redeployed to the Information Counters for 2 hours to assist with way finding during the afternoon busy hours.

### CONCLUSION

From the results, a change in visitors' behavior was observed to contribute to the outcome. In addition, there were varying staff feedback and reactions which the project team took into considerations prior to the conclusion of the implementations. The department anchored change management in the staff to welcome and adapt to the operational changes. These subsequently contributed to the success of the project.

The project team aims to further study the feasibility of opening a new information counter at a strategic location to expand the way finding services coverage within the hospital with the increased productivity.