



# Revamp the counter duties for payment initiatives

Singapore Healthcare Management 2019

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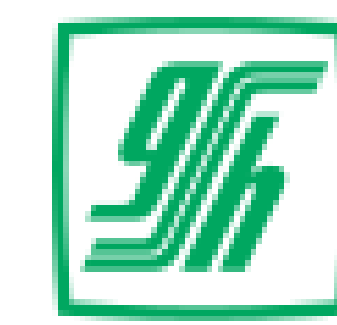
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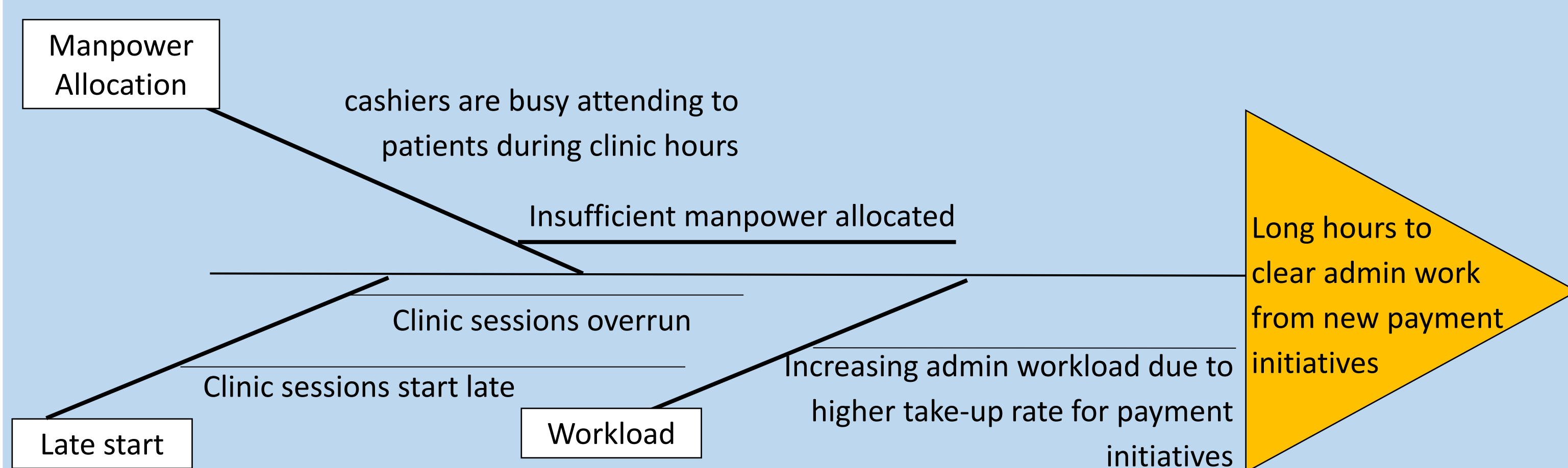
## Background of the problem

The Centre for Digestive and Liver Diseases (CDLD) sees an average of 502 patients a day. 41 out of 58 clinic staff are Patient Service Associates (PSAs), who handle the administrative and customer service aspects of patient experience. It was found that since the start of new initiatives such as "Drop & Go", CDLD PSAs were staying back long hours to clear administrative backlogs. Drop & Go allows patients to leave the SOC right after their doctor's consultation, skipping the payment and re-appointment queue. Since the start of the scheme in March '18, take-up rate has stabilized at about 20% of daily patient workload in CDLD. While the new initiative benefits patients, the change in patient journey necessitated a review of clinic processes to enhance operational efficiency and job satisfaction.

## Mission Statement

To adjust existing workflows so that staff can maintain operational efficiency and work-life balance at CDLD.

## Analysis of problem



## Stakeholders and Potential Impact

### Clinic staff

Less likely to do overtime and improved morale

### Clinic in-charge

Able to satisfy multiple stakeholders

### Patients

Shorter amount of time taken for SOC patient journey

## Root Causes Identified

1 Insufficient manpower allocated to clear admin work arising from payment initiatives

2 Increased back-end admin workload due to higher take-up rate for payment initiatives

## Solutions Development

Aim of project	Concepts to address root causes	Specific Solutions	Time Saving	Cost Saving	Feasible	Sustainability	Total Score
To adjust CDLD work processes to the new operational needs arising from new payment initiatives	Insufficient manpower allocated to clear admin work arising from payment initiatives	Reduce time needed for processing of payment initiatives	4	2	2	3	11
		Convert all counters to dual function (registration and payment), reduce number of counters, and assign a staff to clear admin work	5	4	5	5	19
	Increased back-end admin workload due to higher take-up rate for payment initiatives	Enlist help from backroom staff for appointment-making on heavy clinic days	5	5	3	2	15
		Distribute increased workload evenly between all clinic staff	2	2	2	2	8

Legend: Average rating given by staffs on a scale of 1 to 5 with 1 being Strongly Disagree and 5 being Strongly Agree.

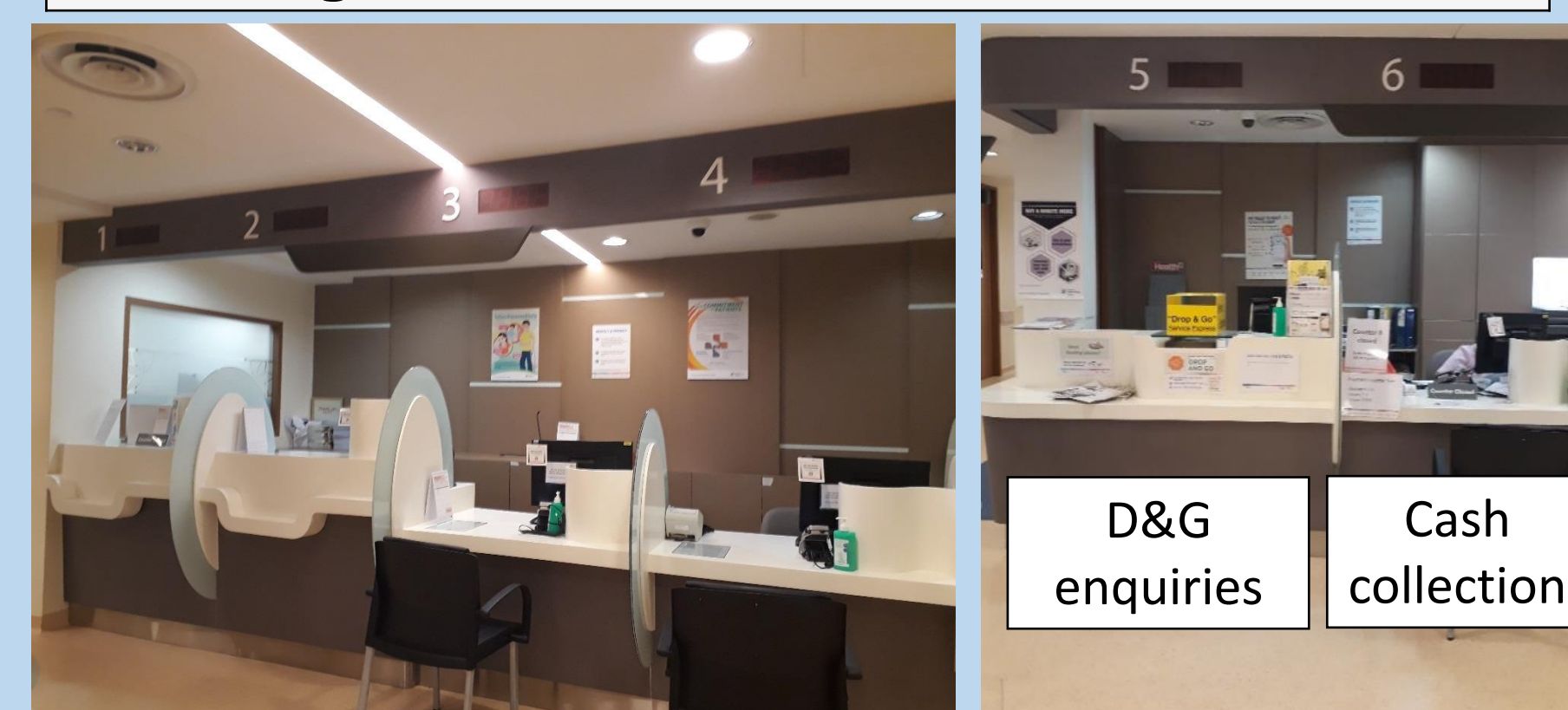
## Solutions Implementation

Both of the selected solutions were implemented within 1 PDSA cycle (Jul-Sep 2018) by optimizing resources.

### 1 Converting 4 out of 7 counters to dual use

Signages demarcating 'cashier' and 'registration' counter areas were removed. Cashier features were installed in registration counters to enable billing functions. These included phone lines required for NETS terminals and enhanced OAS billing modules. Next, appointment functions were installed in registration counters. Carestream RIS was installed to enable booking of Ultrasound abdomen appointments  $\geq 6$  months away, which is currently done by CDLD staff.

**This allowed us to free up 2 cashiers daily for other manpower-intensive job scopes like assisting doctors.**



### 2 Enlisting help of backroom staff on heavy clinic days

A test period showed that backroom staff were able to support D&G administrative workload on days with heavier clinic workload as they were familiar with the resource set-ups and appointment booking system.

## Feedbacks

We were wary of the changes at the start, but so far everything has gone pretty smoothly and we get to go home on time now, so it's a good thing! - SPSA Paramjit

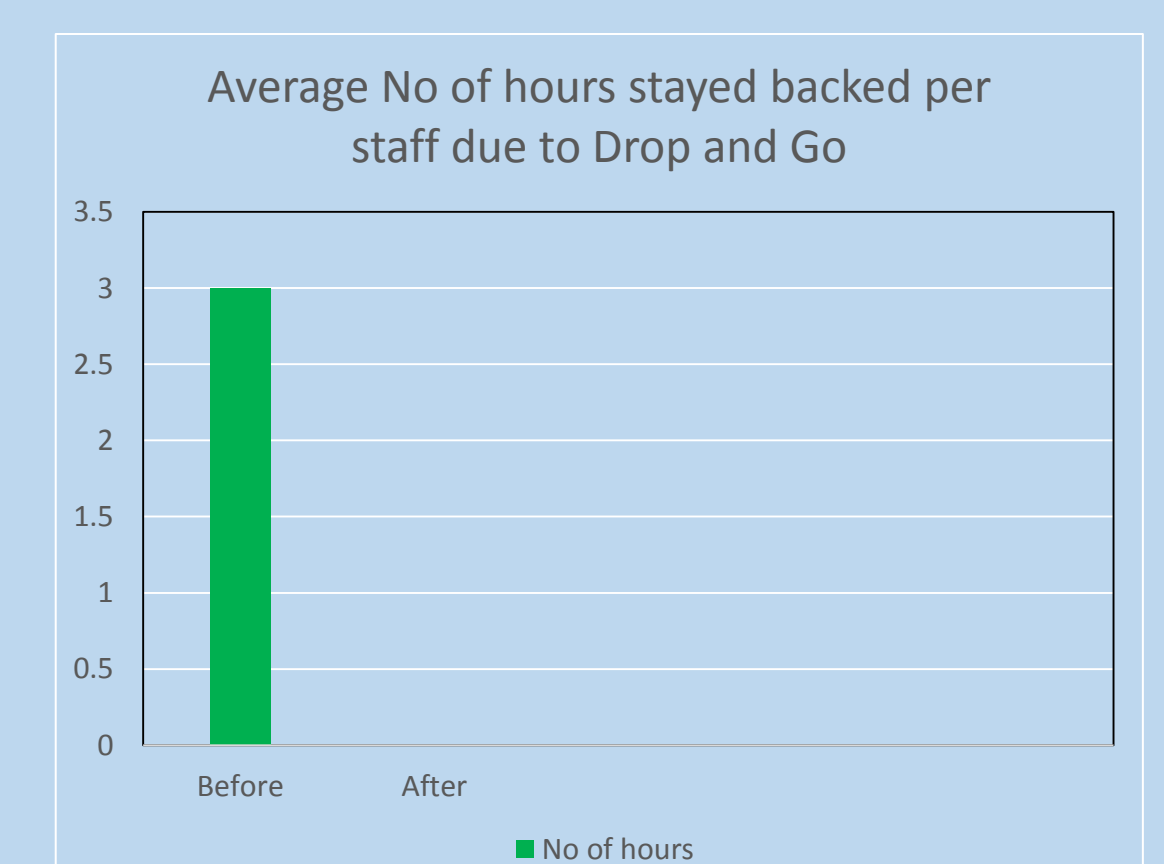
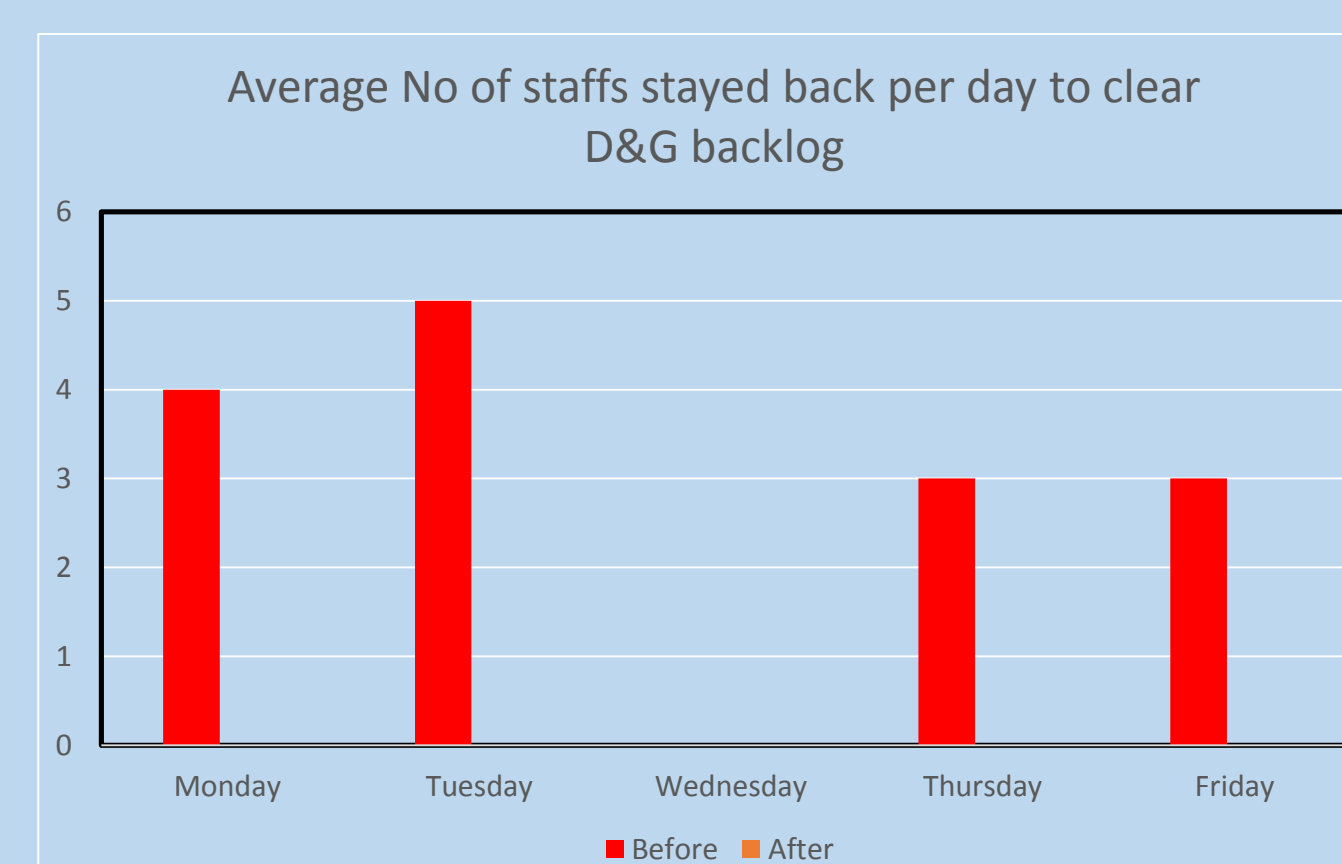
0 complaints were received due to delays in payment and appointment processing after the change in counter operations. -SPSA Atiqah



I am happy because I can now be served by any counter whether it is for registration or payment, and I will not be held up because of a jam at 1 counter. - Anonymous CDLD Patient



## Results



The reduction of manpower allocated to the frontline counters resulted in an unintended effect of relieving the load in other administrative areas of CDLD, i.e. room assisting.

## Sustainability Plans

A standard work process has been put in place and staff have adjusted well to it. All staff now proactively clear "Drop and Go" workload as it accumulates through the day, and backroom staff have also been activated to help out on days when clinic staff manpower is insufficient due to heavy clinic sessions.

## Conclusion

Efficient assignment and manpower planning is required to achieve staff work-life balance and job satisfaction. Supervisor plays an important role to review processes and the downstream effects of the new implementation.