



Singapore Healthcare  
Management 2019

# Understanding ESTHERs' Journey in SGH

ESTHER  
Network for Health & Social Care  
SINGAPORE

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## Starting by listening to ESTHER's voice

### ESTHER Café & patient journey

#### (2 different Tuesdays in Neuro SOC/Clinic L)

- 6 different visitors of Clinic L (patients/caregivers)
- 3 first visits to Clinic L

Background information to  
understand ESTHERs better.

Also a way to map the journey  
without following them  
outside of clinic

Patient Journey

Actually the part where  
ESTHERs might speak up the  
most. Cover areas the  
questions did not

Feedback on Possible Interventions, also  
a tool to get ESTHERs thinking so that  
they can share more

#### Neuro SOC: Patient Journey & interview.

Where did you come from? (Home/office)

Time arrived

How frequent do you visit? (Clinic /Hospital)

How long do you have to wait for your appointment?

Start to end, time taken (Registration, waiting, consultation, appointment, payment, pharmacy; others)

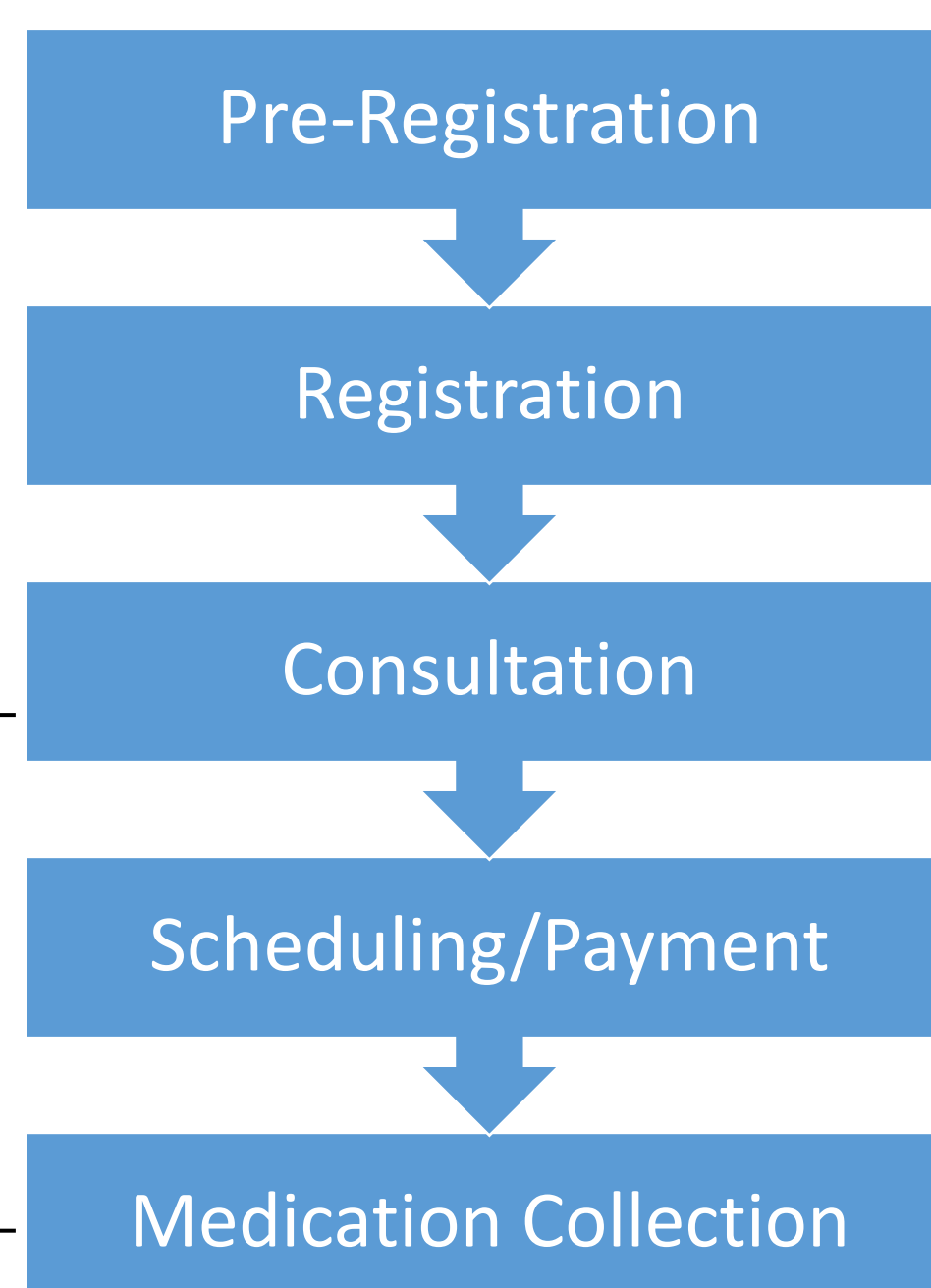
Do you prefer if you could place your medication orders at the clinic, while waiting for payment? Medication orders can be processed while you are on your way to the pharmacy

Any other suggestions

## Connecting ESTHER's voice to their journey

- Understand that the waiting time can be long and something that cannot be worked on
- **Waiting time of less than an hour for consultation is "quite good already"**
- However, feel that keeping to appointment time is still important.
- Hopes that they can leave immediately after their consultation, the rest they can do outside of hospital

- A bit too long a wait (30-45mins)
- Likes the idea of medication delivery
- Does not know about medication delivery services SGH provides but worry it might take too long if the medication is urgent
- Agreeable that if someone can take their prescription orders while they wait to schedule their next appointment it can help to cut down their waiting time



- Hard to find the way to Clinic L for 1<sup>st</sup> time visitors, even with help from staff
- Suggest that for IT savvy visitors, registration can be done online/app eg Health Buddy
- Time taken is not long unless visitors have communication issues (language barrier or poor hearing)

- Feels that at current time and age, these can be done:
- a) All at one go at the end of the visit, not at different clinics/dept
  - b) by hospital backend, patients can just leave after consultation & be informed later.
  - c) by themselves online

### Understanding the problem

- Feedback reflective that ESTHERs expectations on hospital visits to be similar to GP visits
- Could be due to the first medical facility (and most) they visit are GP
- Very used to GP style of journey when it comes to medical issues

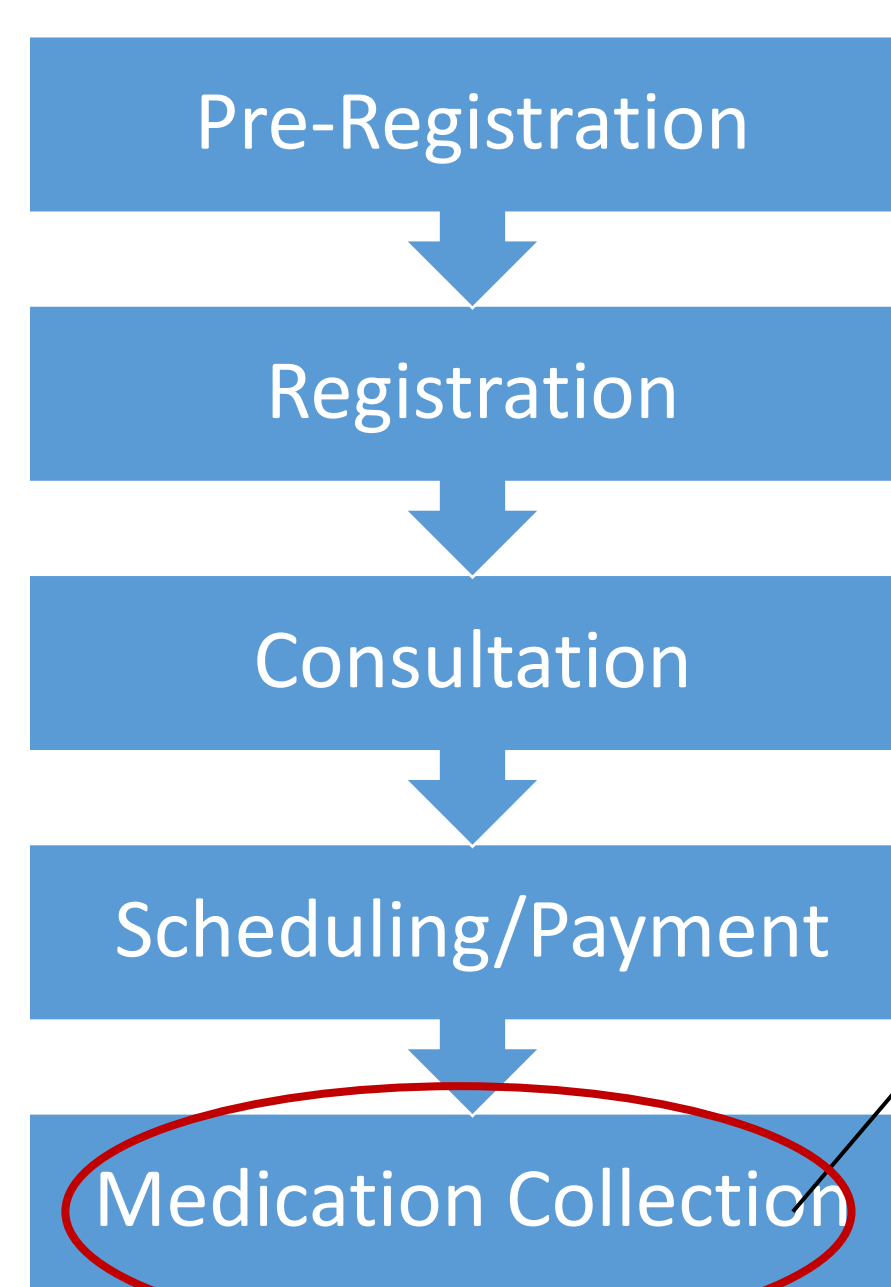
### Hence (ESTHERs)....

- Wants to leave hospital as fast as possible
- Feel that they can handle appointment scheduling and payment themselves (outside of hospital grounds)
- Hospital trips should be more about the **consultation and not about payment or scheduling or medication**



#### Pics:

Long queue and large crowd at pharmacy at the end of the day after most of the visitors have finished their SOC consultation



### Interventions:

- 1) Help promote Medication Delivery Service (MDS) by pharmacy
- 2) Place medication review, reconciliation & orders taking at the clinic, while waiting for payment.

### Methodology: (Nov 2018 – mid 2019)

#### November to December 2018:

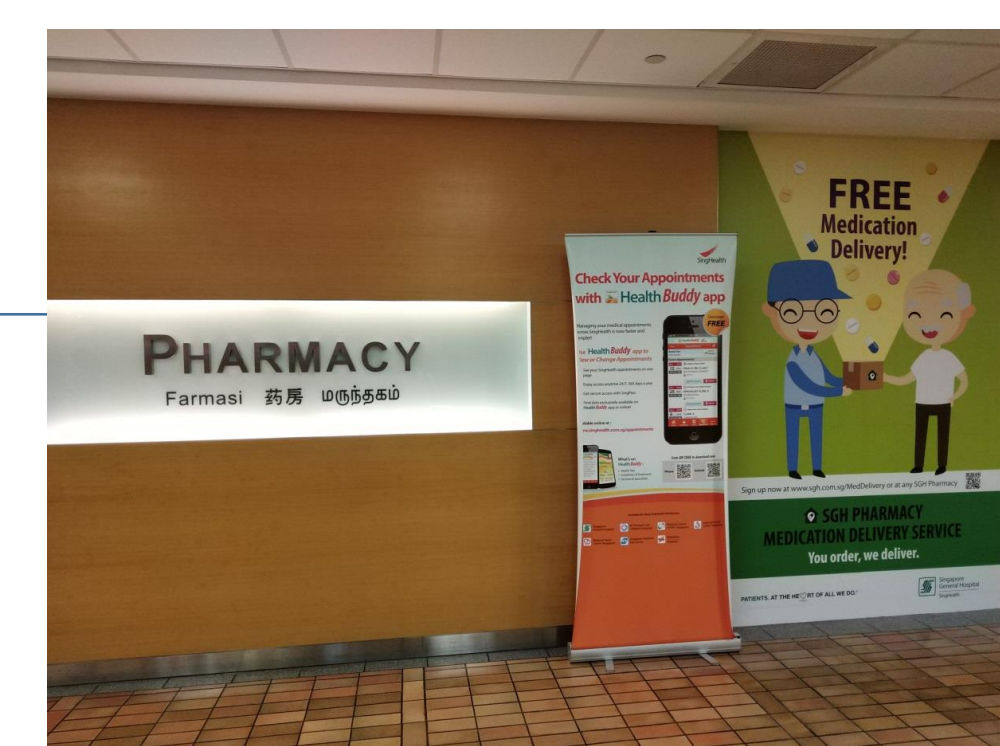
- 1) Road shows on MDS to SOC clinic L staff & neurologists
- 2) Promotional material at SOC & Clinic L
- 3) Working on a workflow between Clinic L & Pharmacy for MDS  
Placing a Pharmacy staff at Clinic L for patients/visitors convenience to apply for MDS

#### January 2019 onwards:

- 1) Data collection & analysis

#### Pics:

MDS poster outside the pharmacy to raise awareness of the service



## Post- intervention results (Dec-18 onwards)

Month	Number of MDS (new recruit)	Total Neuro Rx	%
Jun-18	42	1459	2.88
Jul-18	86	1773	4.85
Aug-18	82	1628	5.04
Sep-18	59	1485	3.97
Oct-18	78	1785	4.37
Nov-18	56	1649	3.4
Dec-18	44	1260	3.49
Jan-19	131	1820	7.20
Feb-19	103	1402	7.35

### Results:

- 1) Educating & updating staff from SOC helps in getting them to promote MDS to relevant patients
- 2) Promoting MDS to relevant patients increases recruitment of new MDS

### However, <current challenge(s)>:

- 1) Challenging to explain MDS in detail during peak hours
- 2) Decline of MDS due to:
  - Preference to collect on site since they are already there
  - Do not see the need for it as they are coming back to SGH due to multiple appointments in SGH