





Improving Patient Wayfinding in the **Geriatric and Special Care Dentistry Clinic** at National Dental Centre Singapore

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Background

The Geriatric and Special Care Dentistry Clinic (GSDC) in National Dental Centre Singapore (NDCS) was set up in 2016. Due to the new clinic layout, patients were often not able to find their assigned treatment rooms. Staff had to spend more time catering to lost patients. As the patients in GSDC are usually elderly and frail, the risk of falls was also increased within the clinic.



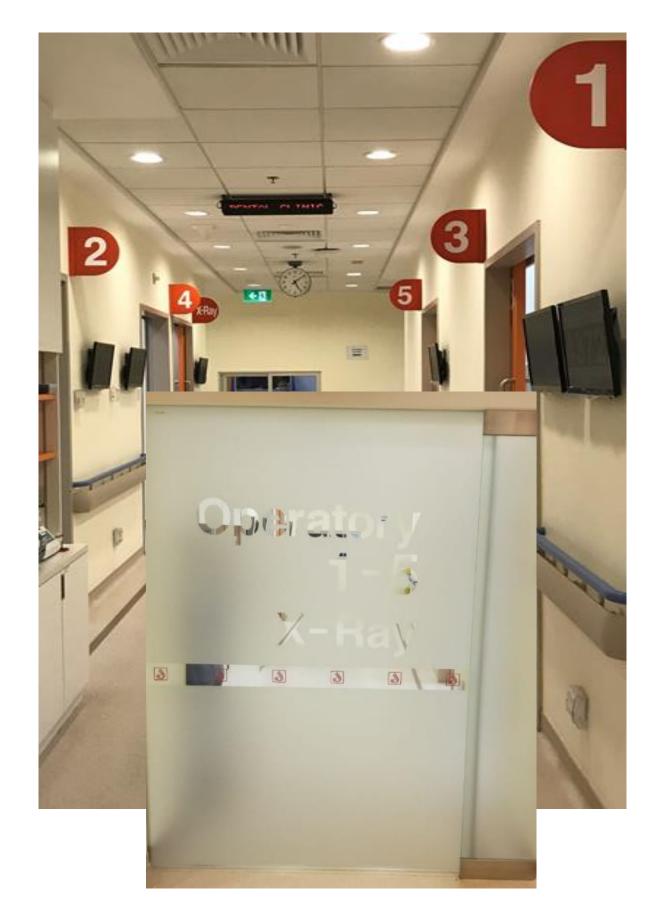
Aim

The aim of this project was to improve wayfinding in the clinics for such patients.

Methodology

A pre-intervention survey on 60 patients was done to obtain baseline data of the percentage of patients getting lost within the clinic. Using the Esther concept, 13 Esthers were interviewed to investigate reasons why patients found it difficult to locate their treatment rooms. Two causes were found:

Post-intervention Queue Display Panel



Room 1-5 X-Ray

Post-intervention Signage

- Inability to distinguish the queue number from the room number on the display panel.
- Poor signage leading to confusion as to which passageway to enter when going to their treatment room.

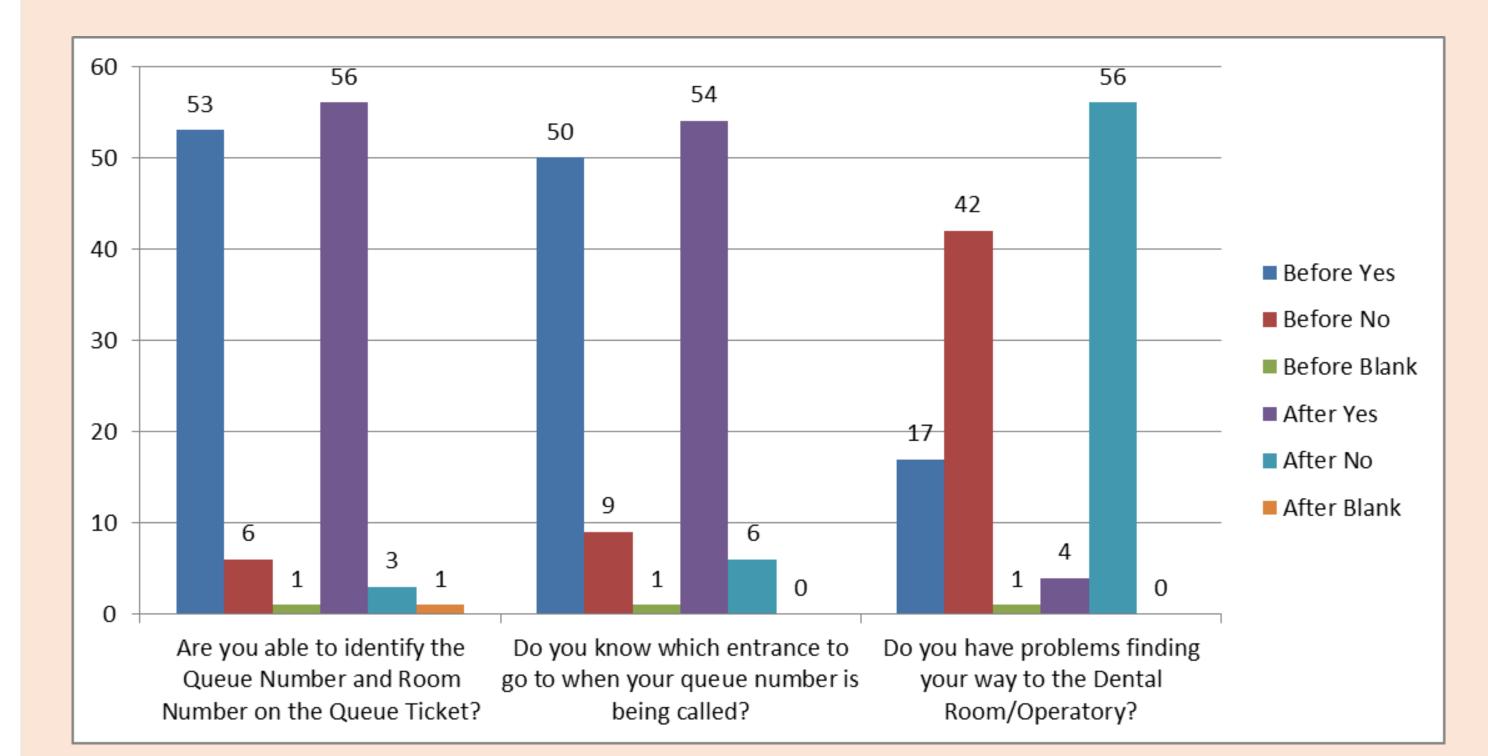


Pre-intervention Queue Display Panel

Pre-intervention Signage leading to treatment rooms

Results

The pre-intervention survey found that 29% (17/59) of patients agreed to the question "Do you have problems" finding your way to the Dental Room/Operatory?". This decreased to 7% (4/60) after interventions.



Interventions

Interventions done to address these causes were:

- Changes to the display panel to better distinguish queue number and room number
- New signage to improve the wayfinding to their treatment rooms.

A post-intervention survey was done after 6 months to determine the results of these interventions.

Conclusion

Understanding patients' needs is important IN determining the root causes and solutions to problems they face when seeking treatment. Wayfinding in the GSDC was improved after interventions based on patient surveys and interviews.