

Re-engineering Business Office Process For BVH COVID-19 Operations

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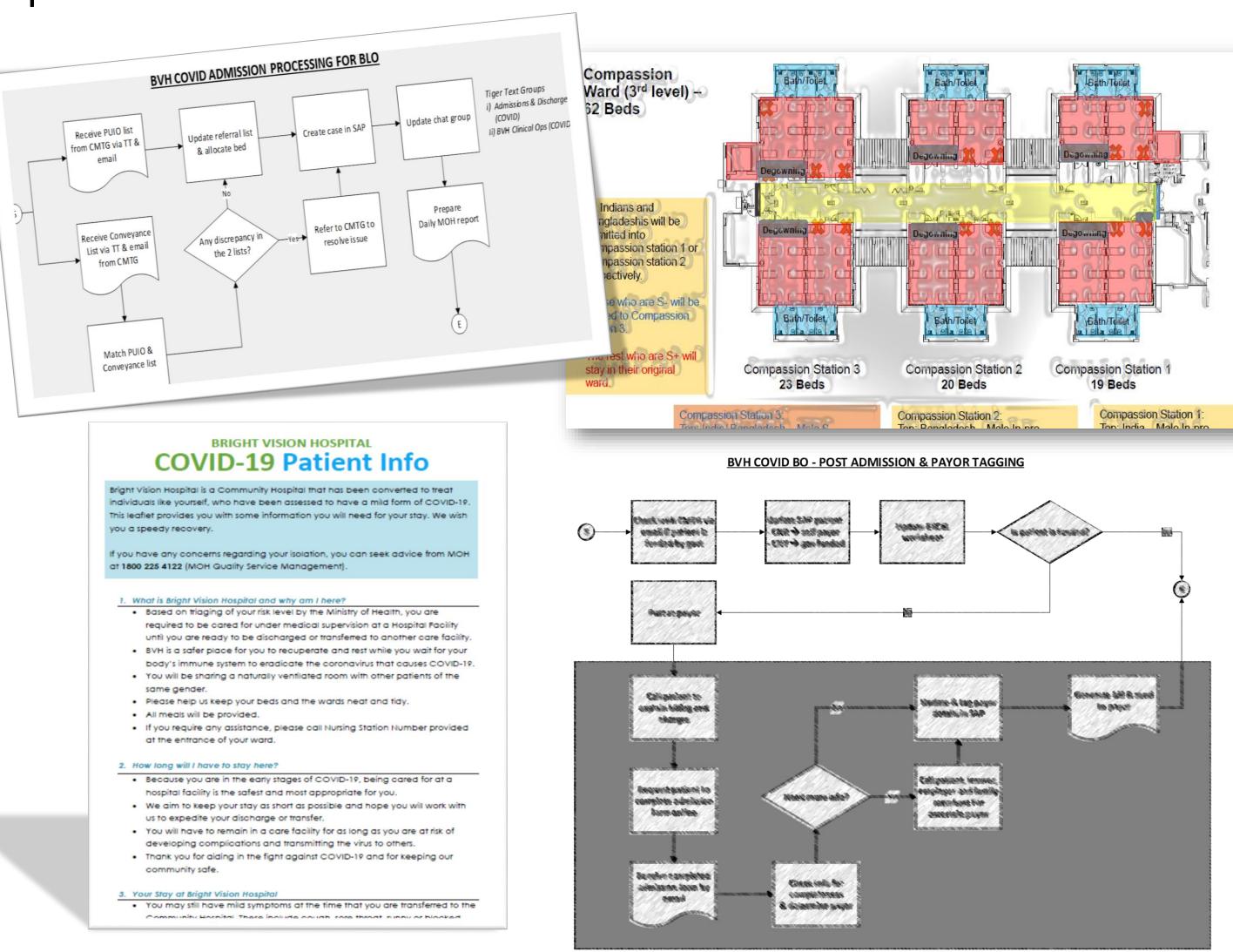
Introduction

In April 2020, Bright Vision Hospital (BVH) was tasked by MOH to take in COVID-19 Cat 2B patients (and later Cat 2A/2A+ for early illness patients). Managing admission and conveyancing for infectious disease is a major shift from BVH BAU. Within a short span of time, changes need to made to adapt BVH processes to meet this new need. Patient transfers and admissions are critical part of the COVID-19 operations. Our ability to react promptly and accurately to transfers and admissions will help MOH to manage unpredictable and fluctuating demands and spikes in COVID-19 cases.

Objectives

- To ensure that BVH is able to expedite the transfers and admissions of COVID-19 patients within 2-3 hours, including weekends and public holidays.
- To mitigate the risk of lapses in patient communication and engagement considering the communication challenges posed by the COVID-19 situation.
- To mitigate the financial risk arising from accepting a high number of non-resident patients in order to manage bad debt.

- To ensure adequate staff coverage after office hours, weekends and public holidays, staff working hours were staggered, schedules were planned for weekend and public holidays coverage.
- Over and above that, the plans have to be robust and sustainable over an extended time.
- The entire plan was put together quickly and commenced operations within 2-3 weeks.



Method Result

- We studied the needs and demands for this operation including the requirements established by MOH and the stakeholders.
- Engaged with counterparts from MOH, NCID (National Communicable Infectious Disease), referring AH and the SCH very own medical/nursing colleagues to define processes needed, build scenarios, workflows and contingencies.
- Charted patient profile and demography to carve out communication and engagement strategies since most of them
 are foreigners with diverse backgrounds due to opening of borders.
- Considering the need for infection control, we studied the communication challenges and had to think of ways to overcome the documentation needed to process patient's bills.
- Redesigned the transfer and admission process with a lot more reliance on technology for communications, exchange of information, handshake and legal declaration. For example,
 - ✓ Use of online forms to allow patient share information.
 - ✓ QR codes to the direct patients to instructions & information.
 - ✓ Detailed Q&A on the internet to enable patients, family, employers and insurance companies to get information.

- Transfers and admissions were executed within the targeted 2-3 hours turnaround time, including weekends and public holidays.
- SCH became the first CH in Singapore to operate on a 7-day week in support of MOH COVID-19 initiatives.
- Staff morale continued to remain high despite the changes.
- Use of internet platform and infocomm technology proved to be effective alternative administrative & communication tools.
- Potential for bad debts early are identified early. SCH is able to work with private insurance companies, employers and family members to pursue claims and collection efforts.

Conclusion

Today, BVH remains an integral facility for MOH COVID-19 operations and has treated close to 1,267 COVID-19 patients between April 2020 to March 2021.

The shift in mindset towards expediency rather than administrative goals has helped us to meet the KPIs set by MOH. We also managed to mitigate the potential drop in service level by using creative means & technology to ensure that all administrative tasks and patient communication engagements and communications are not compromised.