Improved Wards for **Enhanced Patient Care**

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1. INTRODUCTION

With the completion of Academia in July 2013, Singapore General Hospital (SGH) was able to relocate service laboratories and offices, from block 6 levels 5 to 7, to the new building. This thus freed up 2 ³/₄ floors to create decanting wards (Wards 65, 66 & 67,) so as to operationalise the Fire Protection Master Plan for existing inpatient wards.

Leveraging on the opportunity to build new wards, a core team comprising of staff from Division of Nursing, Operations and Performance Management, Facilities Development, and Division of of Medicine was tasked to remodel and conceptualise an ideal ward for the future. This would serve as a prototype for other new wards to be built in the coming years.

2. METHODOLOGY



3. RESULTS

h







FEMALE WARD RN 17 RN 18 NN 20 RN 17 RN 18 NN 20 RN 17 RN 18 NN 20 RN 17 RN 19 RN 10	MALE WARD NU 21 NU 22 DESSING CS	'B2' 5 BEDS 'B2' 5 BEDS (2 HD/ 3 B2) (2 HD/ 3 B2) (16 RU24 (16 RU25						
 a Common Toilets and Showers b Preparation Room c Day Room 	 d Disposal Room e Treatment Room f Linen Closet 	 g Parking Bay h Nursing Officer's Office i Store 	 Nurses' Counter Patients' Room Assisted Bathroom 	 Pantry Staff Tea Room Nurses' Station 	 p Tutorial Room q Residents' Room r Allied Health Store 	 s En-Suite Patients' Shower t En-Suite Patients' Toilet u Decentralised Nursing Station 	 V Linen Bay W Central Workstation X Staff Toilets and Showers 	 Staff Lockers Senior Nurse Manager's Office
	🔵 Fo	ound in both Remodeled and I	Non-Remodeled Wards	Not found in F	Remodeled Wards	New to Remodeled Wards		

b. Design Principles & Key Features

5 Overarching Principles on Remodeled Ward Design:



Design

Patients' Toilet and Shower Decentralised toilets and showers for every 5 beds to improve infection control

Patient Lifter System Enable safe transfers for patients and staff **Patient and** Staff Safety Shared Space Optimization 2-Mini Wards on 1 Floor through • 2 mini-wards operating Flexible



c. Non-Remodeled VS Remodeled Wards

			Non-Remodeled Ward	Remodeled Ward	
Dationt Caro	nt Care rea	No. of Beds in Subsidised Wards Toilets and Showers	5 to 9 per roomCommon toilets and showers for	5 per roomEnsuite toilets and showers for B2-class	
	Patier Ar	Patient Lifter System	subsidised classIn selected specialty wards only	roomsIn all patients' rooms	
Patient Care Support Area		Location of Medications and Non-Medications Disposal Room	 Stored apart from one another (67 – 83 sqm) Manual door 	 Co-located in one-stop Preparation Room (159 sqm) Automatic door for improved clean and dirty flows, with inclusion of clean closet 	
Staff Working	ff Working Area	Workstations Allied Health (AH) Store	 Either central or decentralised (15- 20/ Ward) AH staff bring therapy equipment to ward 	 Both central and decentralised (40– 45/ Ward) Equipment storage room on the ward 	
	Sta	Location of Staff Amenities Area	• Tea room, lockers and toilets located apart	Co-located in a staff exclusive area	

d. Staff Feedback

Pre-Occupation Survey

Q: How Satisfied are you with the layout of the following amenities?

Post-Occupation Survey

Q: As compared to Non-Remodeled Wards, do you agree that Remodeled Wards have led to the following improvements?



independently with shared



4. CONCLUSION

- Wards, starting with Wards 66 and 67, were comprehensively remodeled based on 5 key principles, striving to maximise patients' experience and staff efficiency
- Feedback obtained from Post-Occupation Survey was largely positive (100% indicating that Remodeled Wards are overall better than Non-Remodeled Wards)
- Approximately 100% agreement was achieved in 4 other areas of assessment, indicating that expectations of ward remodeling were met

stop room for consumables, sterile

supplies, medications, and