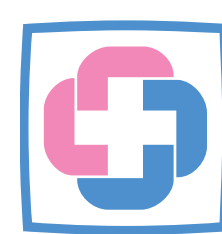




Singapore Healthcare
Management 2015

Integrated Resource Management as a Strategy for Optimising Use of Training and Meeting Rooms

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BACKGROUND

- 1) Very few rooms are open to all staff for use. Most rooms are either department-owned, or else open only to certain groups of staff.
- 2) Staff were hogging rooms either by booking but not using, or else excessively overbooking room duration.
- 3) With increasing pressure on space requirements for clinical purposes, the supply of rooms for non-patient-based activities will decrease.

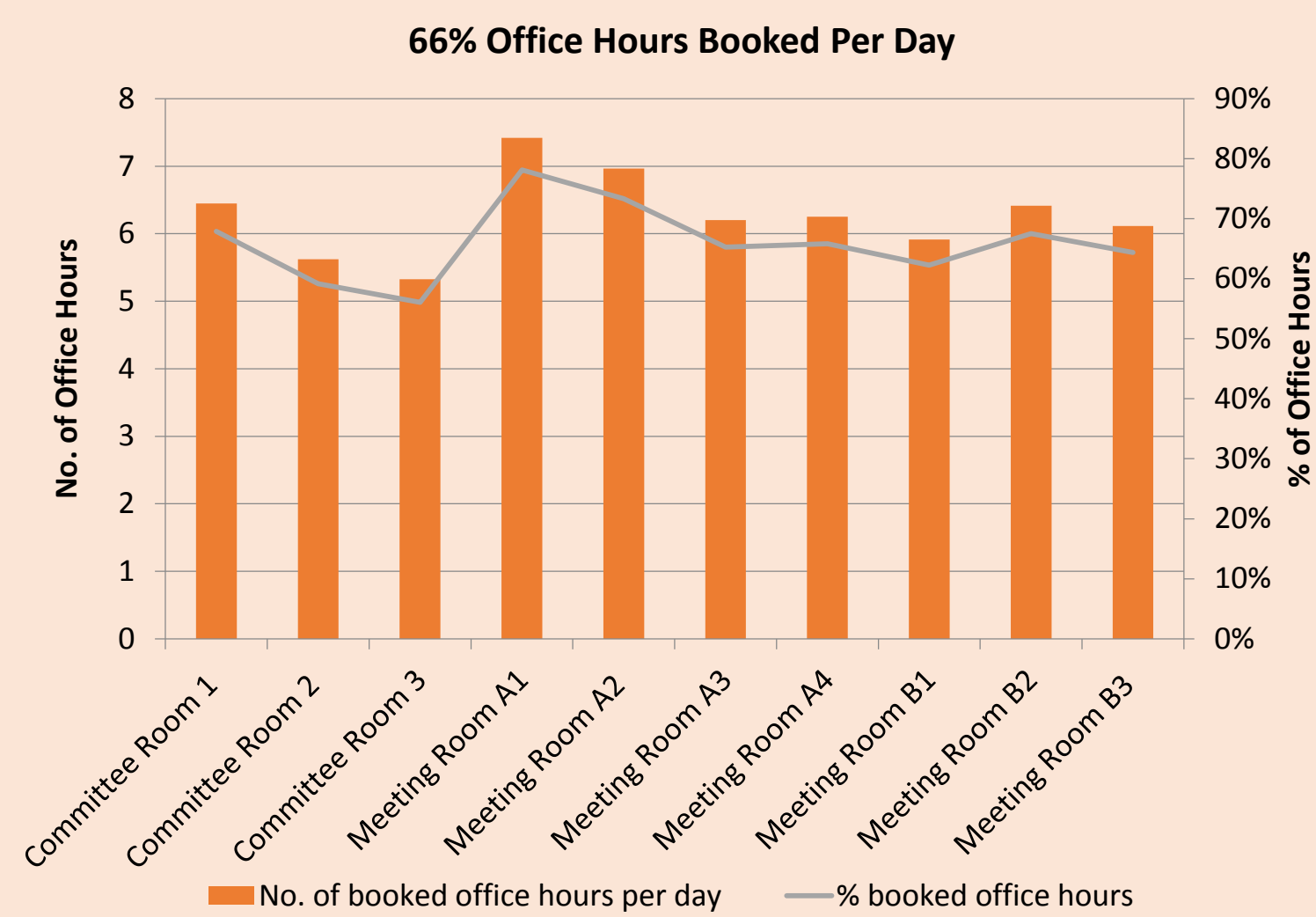
AIM

To consolidate and pool all training/meeting rooms in order to share resources and optimise utilization of facilities

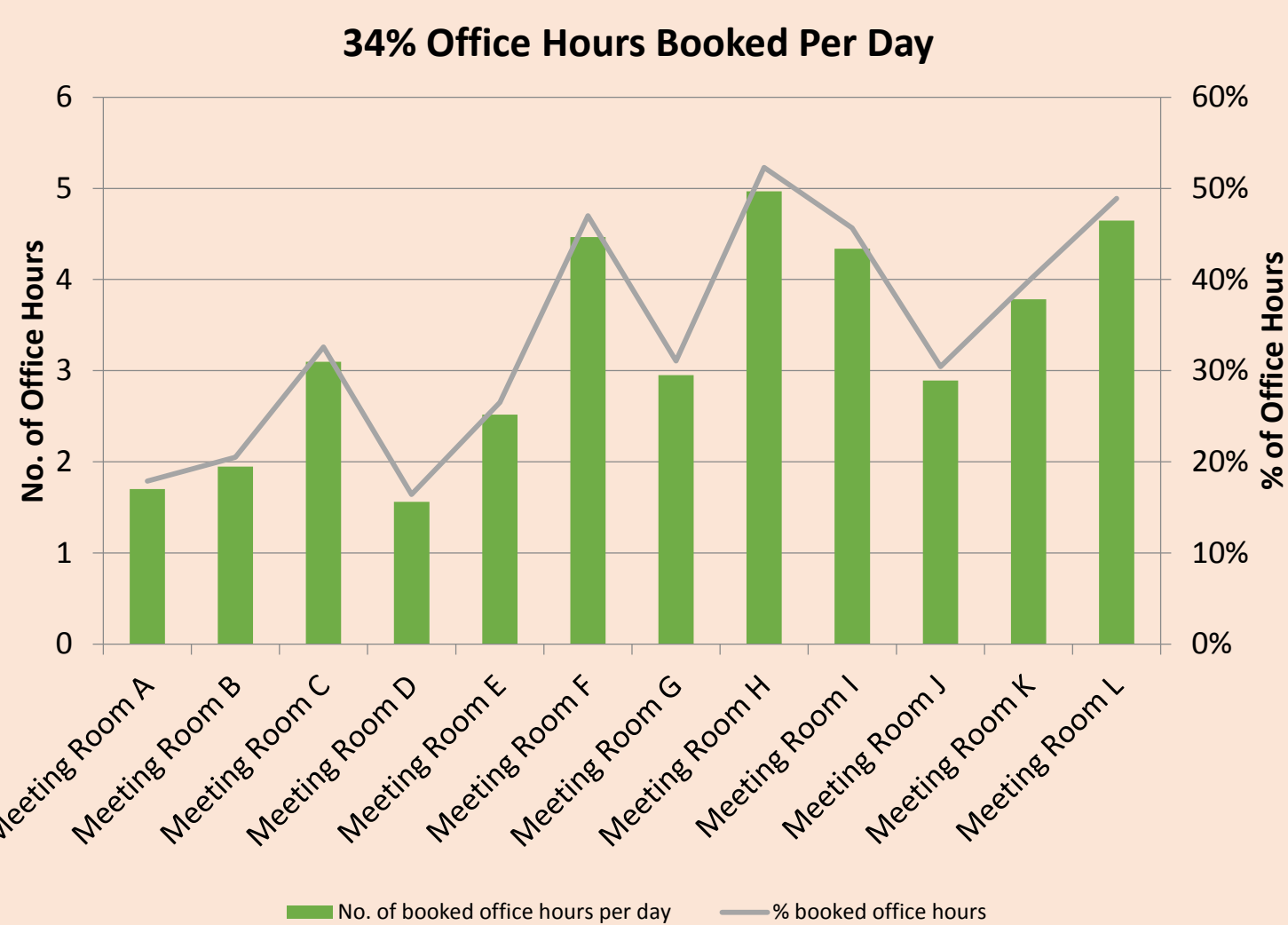
METHODOLOGY

- 1) Workgroup (with representatives from all divisions) formed to:
 - ensure adequate consideration of specific departmental concerns
 - propose guidelines for the consolidation of rooms
 - propose measures to optimise use of rooms
 - facilitate implementation of the recommendations
- 2) Data-driven approach to show booking and utilisation behaviour

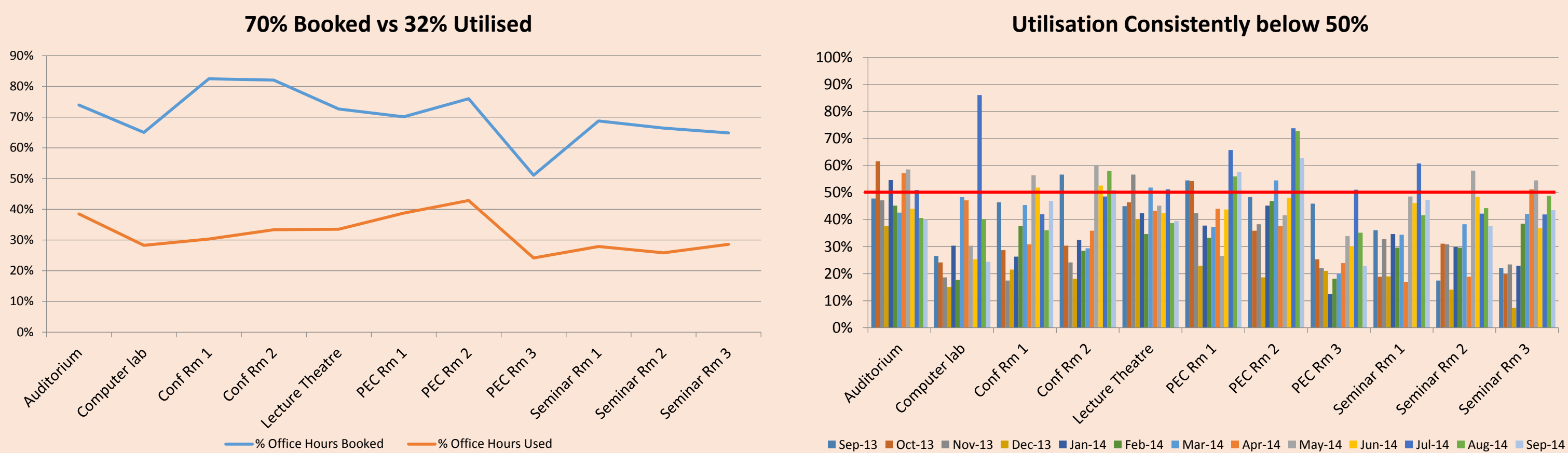
a) High booking rate for “hot” rooms making it difficult to find available slot, as required



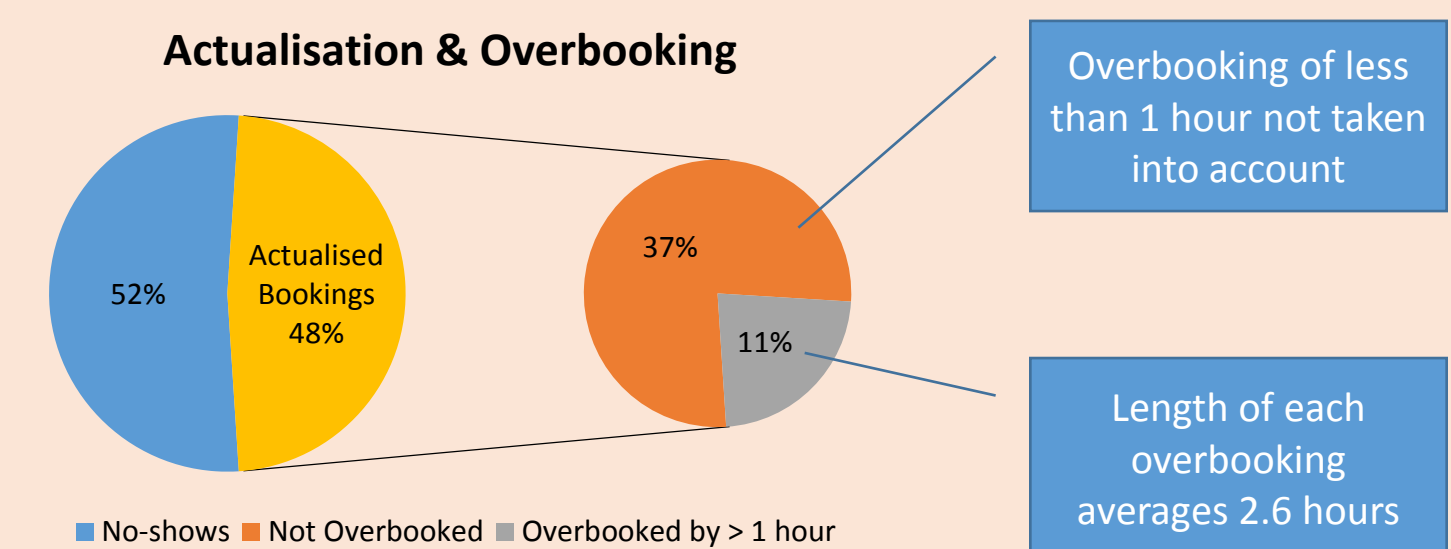
b) Low booking rate for department rooms, which are not open for common booking



c) Rooms where utilisation could be tracked shows high booking and low utilisation rate



d) Room hogging by no-shows and overbooking from just 11 trackable rooms average 38 hours per day or 839 hours per month

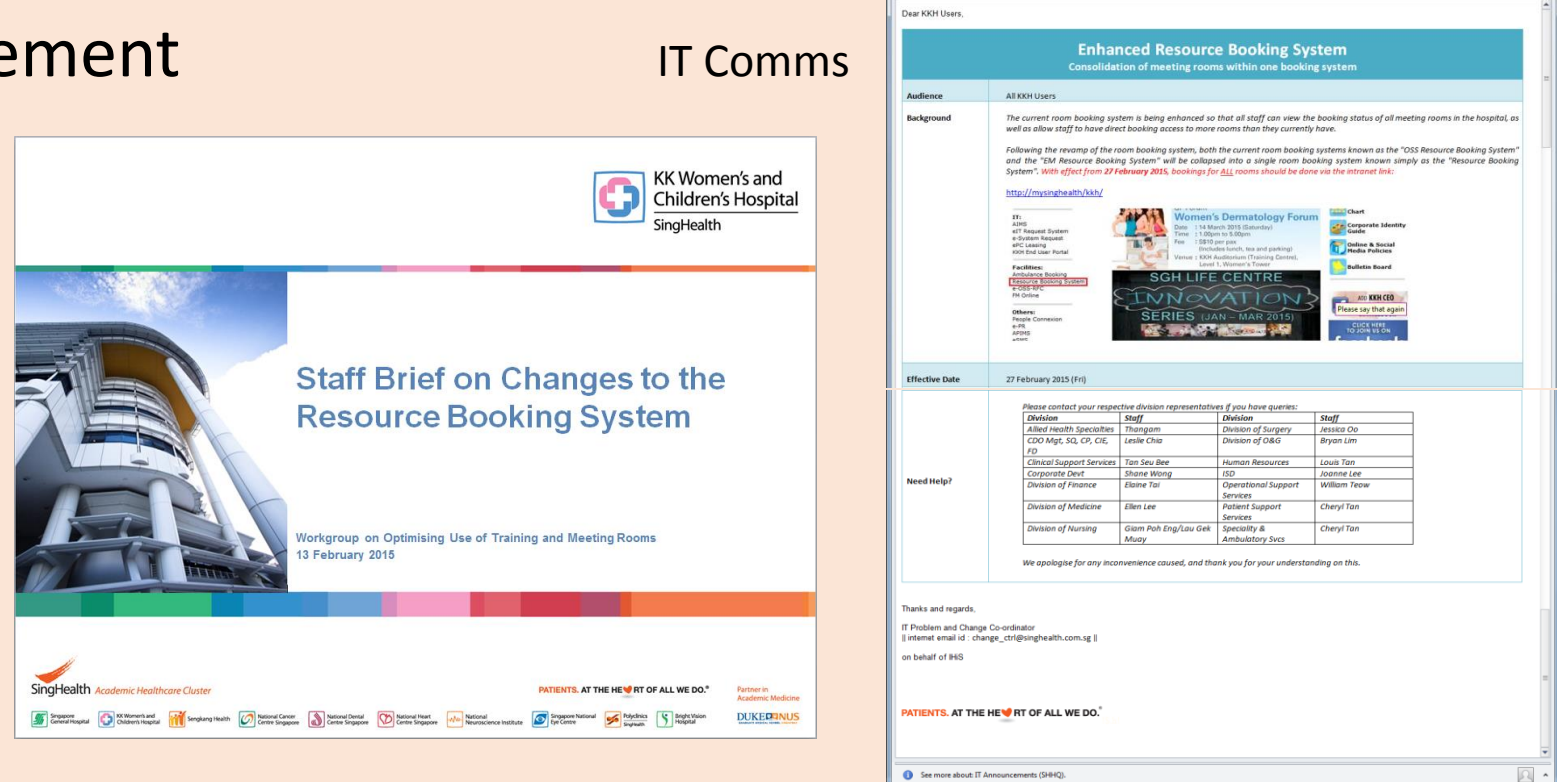


3) Stakeholder engagement for buy-in

a) Exco involvement



b) Division / Department engagement



c) Staff communications kit

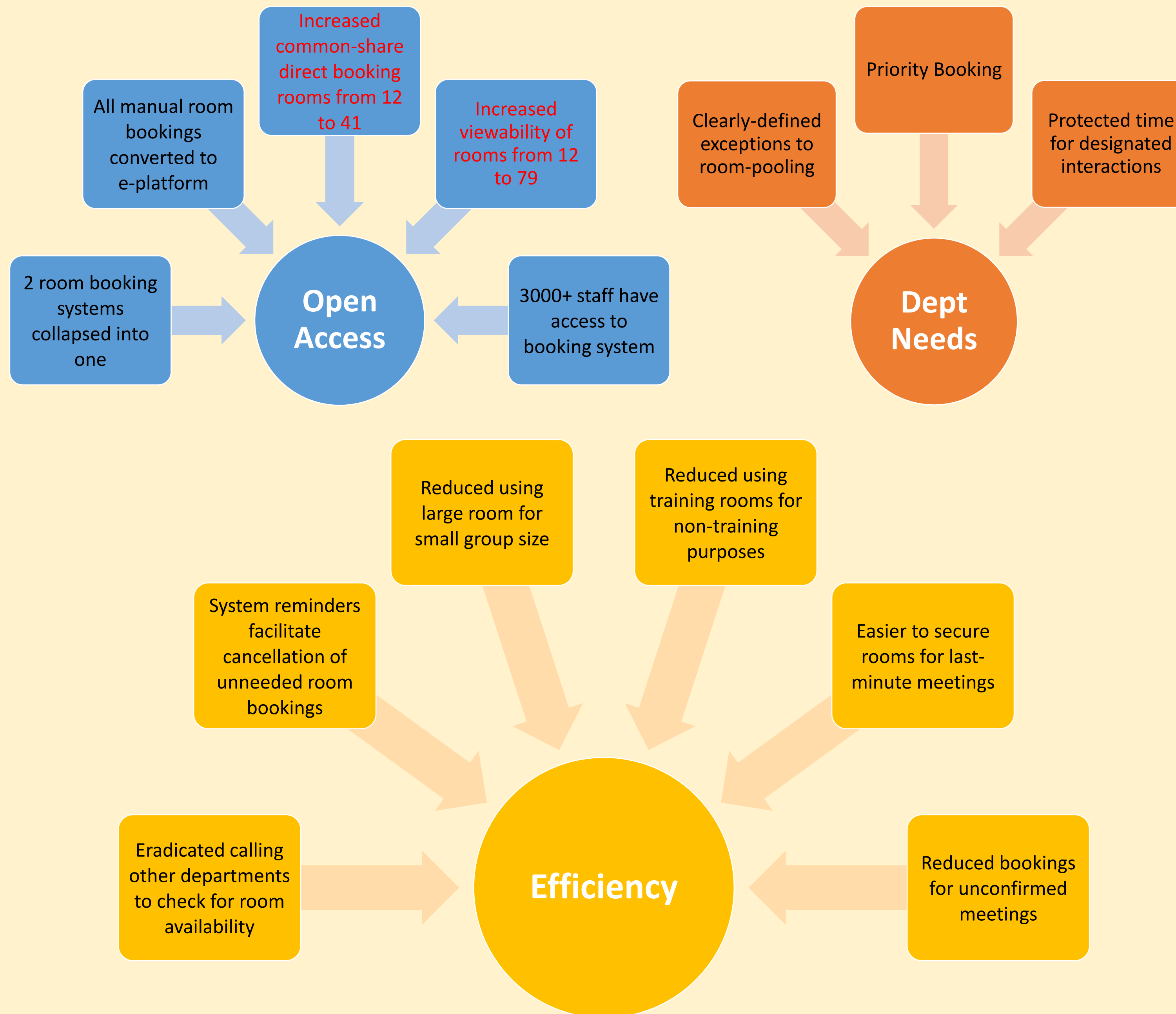
General Comms

- 4) Adopted principle of transparency, equity and fairness (some room details have been masked for this poster, but were not masked at the internal presentations)

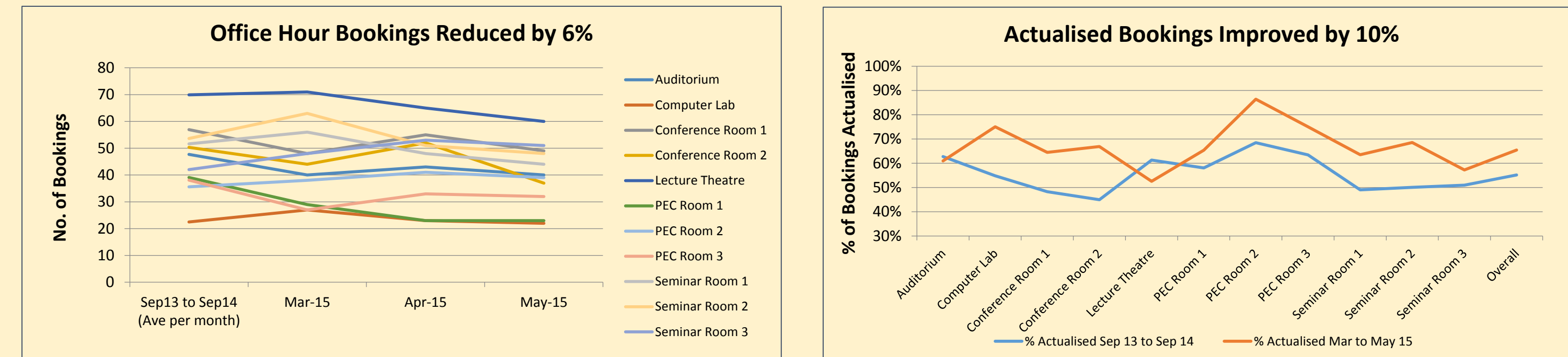
RESULT

Complete listing of meeting and training room details compiled

ROOM PARTICULARS					CURRENT STATUS										FUTURE PLANNING									
Location	Tower	Room No	Room Type	Room Name	Floor area (m2)	Capacity (Pax)	Computer/Laptop (Y/N)	Projector (Y/N)	Writing Tablets?	Dept	Division	Cost Centre	RBS? (Y/N)	Common share? (Y/N)	Door Locked?	Key with?	Local Dept	RA Dept	Resource Admin	Contact Department	Dept Rm Contact Staff	Contact No.	Remarks	
B1	CT	0W71	Meeting Room	Meeting Room	9,140	6	N	N	NA	Emergency Med	Medicine		N	N	N	NA	Emergency Med	Emergency Med	Staff Name	DPLM	Staff Name	1171 / 8400	Access via patient care area. Add Nursing_CE as authorised to book.	
B1	CT	0V03	Meeting Room	Meeting Room	27,000	10	Y	N	NA	DPLM	CSS	63110	N	N	N	NA	DPLM	DPLM	Staff Name	DPLM	Staff Name	3774	Biohazard area	
B1	CT	NA	Conference	Meeting Room		10	N	N	NA	Rehab	AHS		N	N	Y	NA	Rehab	Rehab	Staff Name	Rehab	Staff Name	1585	High quantity of valuable items which are difficult to secure. Room is dept library.	
B1	WT	0H49 B	Meeting Room	Training Room		20	N	N	NA	Food Services	PSS		N	N	N	NA	Food Services	Food Services	Staff Name	FMD	Staff Name	2626	Vulnerable safety area	
B1	WT	0J07C	Meeting Room	Meeting Room	14,130	10	N	N	NA	MMD	PSS		N	N	N	NA	MMD	MMD	Staff Name	FMD	Staff Name	2191	Stock area	
B1	WT	0G42	Conference	Meeting Room	17,550	14	N	N	NA	Facilities Mgt / Security & Safety	OSS		N	Y	N	NA	Facilities Mgt / Security & Safety	Facilities Mgt / Security & Safety	Staff Name	Facilities Mgt / Security & Safety	Staff Name	1415 / 1925	Common-share with restrictions. Used as interview room for security incidents.	



Improved Booking and Utilisation Rates (for the 11 rooms that can be tracked)



CONCLUSION

Integrated resource management is an effective strategy to bring about common pooling of resources. With concerted effort to ensure specific departmental concerns are addressed, fair and transparent policies (with clearly defined exceptions, where required) can be formulated to meet the needs of all stakeholders. Augmented by a transparent reporting approach, senior management support and a carefully designed communications kit, the hospital was able to increase and improve its room resource and utilisation significantly.

* ACKNOWLEDGEMENTS

The author acknowledges the support provided by the following persons from KKH in facilitating the project:

- Department of Operational Support Services – William Teow and Mohamad Taha Bin Rahmat
- IHIS – Lee Choon Keat, Lee Yu Ling Joanne and Li Jinli
- Division representatives to the workgroup