# OVE GOAL ONE STRUCT One CGH - Reflections on Journey Thus Far

ONE TEAM.



#### Context



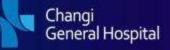


#### Changi General Hospital

- Operational in 1996
- 1000-bedded acute hospital
- Growing population
- Growing workforce

2

• Growing infrastructure



# **The Power of One**



#### One Team, One Goal, One Standard



Changi General Hospital

## Asking "Why" Was a Journey ....



.... a continuousjourney for nearly100 of our staff overseveral months in2012

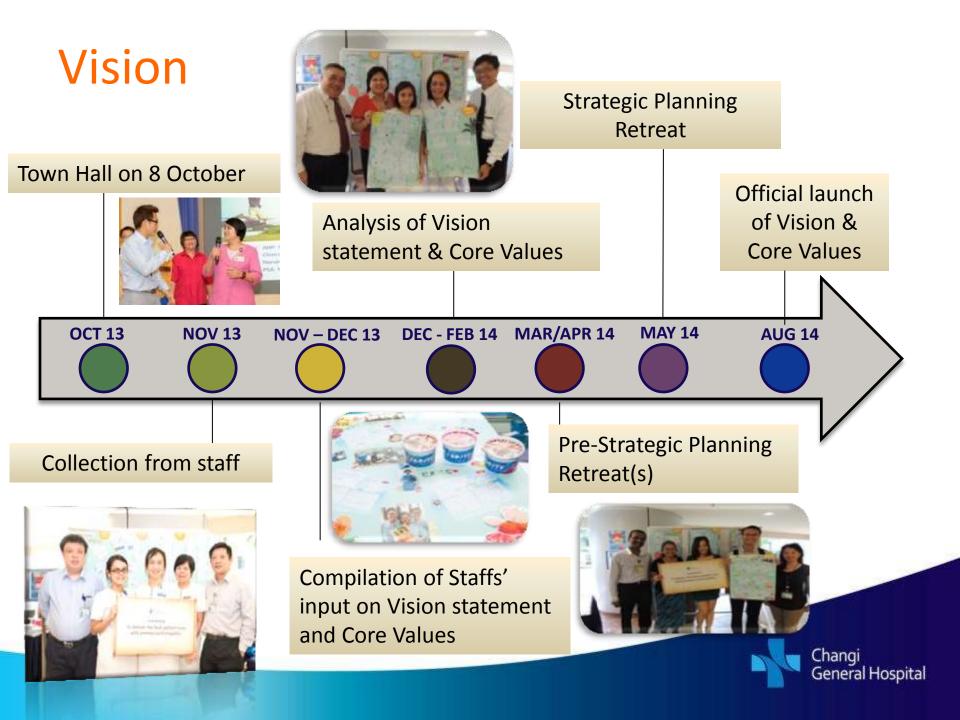


# **NEW MISSION LAUNCHED**

23 Jul 2013







### **Reframing CGH**

Vision

To be a Caring Hospital Trusted by Patients and Staff, Renowned for Clinical Excellence and Innovation

Mission

To Deliver the Best Patient Care with Passion and Empathy

Values Teamwork . Ownership . Professionalism











0 -100

#### Launch of the New CGH Vision and **Core Values** - 14 Jul 2014

received...



#### **Service Vision**

#### Patient Experience Workshop

24 November 2015

PosterMy Wall.com

Delivering Care that Matters.





### **CGH's Role in the Health Ecosystem**

- Save lives through timely acute interventions
- Restore functionality by doing the right things first
- Provide complex outpatient care requiring multispecialty/ disciplinary care
- Resource for Eastern Health Alliance in particular as service designer







#### MEDICAL EMERGENCY TEAM

ls your patient getting sicker very quickly?

Call MET whenever ANY of the criteria below are detected.

If threatened (i.e. noisy breathing, stridor, wheeze)

- Acute change in respiratory rate to <8 or > 30 breaths
- per minute.
   Acute change in pulse oximetry to <90%, despite oxygen administration
- Oxygen requirements of FiO2 50% or greater

CORPORED AND A DESCRIPTION

- Acute change in heart rate to <40 or >130 bpm.
- Acute change in systolic blood pressure to<90mmHg</li>

· Acute change in mental status (fall in GCS>2 points)

- Repeated or prolonged seizures (> 5 minutes)
- Any patient that a staff member (doctor, nurse, allied health) is seriously worried about that does not fit the above criteria.

#### **Medical Emergency Team**

Any medical, nursing or allied health staff can call

% unplanned/total MICU and HD admissions decreased from 36.9% (2008) to 15% (2013)



٩,

THERE IS NO WRONG ACTIVATION, AND YOU WILL NOT BE JUDGED OR PENALISED.

Saraharmana.

00 : 20

00 : 10

00 : 35

03:50

PERMIT:

10.0

Address Parties And

CONTRACTOR

TRANSFER

Activate the MEDICAL EMERGENCY TEAM (MET). Call Ext. 4488 for immediate attention. Operating Hrs: Mon - Fri 8am - Spm, excluding Eve and Public holidays

2 Simei Street 3 Singapore \$29889 Tel: 6788 8833 Fax: 6788 0933 www.cgh.com.sg



Changi General Hospital

ED. ONE FAMILY,

#### **Integrated Building: Operational end 2014**



#### 280-bed facility opens



Patients in the new wards, with bigger spaces, are encouraged to walk about. ST PHOTO: KEVIN LIM

A NEW 280-bed facility shared by Changi General Hospital (CGH) and St Andrew's Community Hospital is now open. Wards here are designed to help the smooth transition of patients moving back home after a hospital stay. PAGE B6



### **Empowering Patients to Return to Wellness**









### **New Models of Specialist Outpatient Care**

#### **Principle:**

The more complex the patients needs, the smaller number of persons the patient should interface with



#### **Integrated Practices**

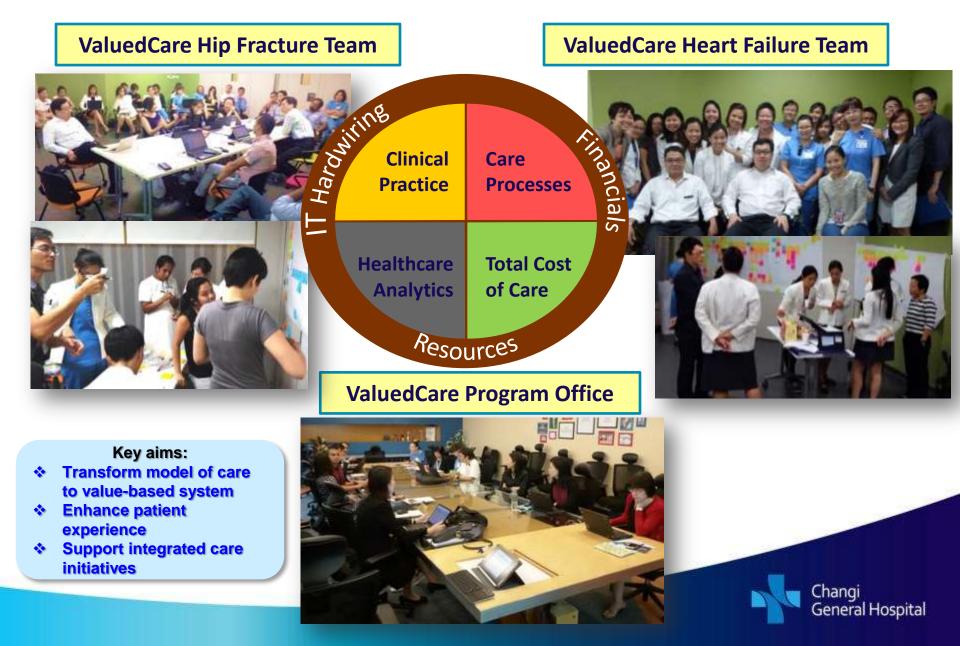


#### **Key Features**

- Conjoint clinic for complex cases
- Integrated Treatment Plan
- Common facilities (e.g. Clinic, OT, Equipment)
- Inpatient multi-disciplinary ward rounds



#### **CGH ValuedCare Programme**



### Hospital to Home Telehealth Programme

Patient @ Home

Daily monitoring of weight & blood pressure







Weighing Machine



#### Health Management Unit (HMU)

- Tracks and responds to physiological readings sent through patient's tablet
- Follow up with patients / escalate to clinical team where required

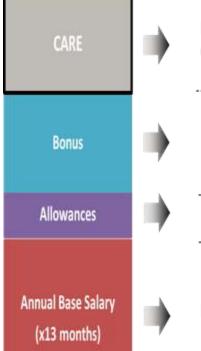
#### **Heart Failure Clinical Team**



Implement care interventions



### **Revising Clinician Remuneration**



Reward for Service and Quality performance in Clinical, Administration, Research and Education

Reward for individual and corporate performance and recognize critical talents

Recognise service related and relocation needs

Reflect base salary market worth of position



- Reward both service and quality performance in Education, Research and Administration workload
- Use Balance Scorecard approach
- Compute once every 6 months as proxy to determine the Monthly ERA Incentive Payout



Clinical

Incentive

(CI)

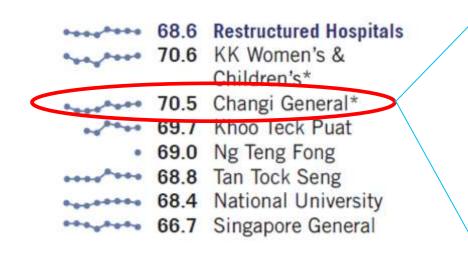
- Reward both service and quality performance in Clinical workload
- Adopt Target Incentive Model to focus on value rather than just volume with 5 performance bands to recognise contributions in CARE
- Compute once every 6 months as proxy to determine the Monthly Clinical Incentive Payout

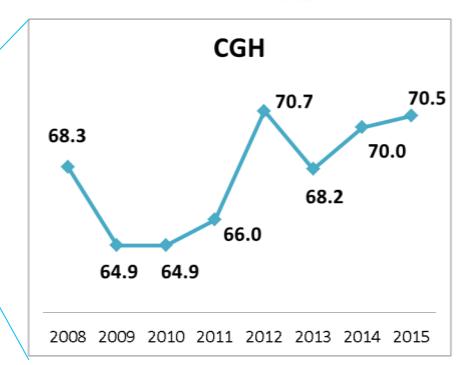


# Customer Satisfaction Index of Singapore (CSISG) 2015



2015 NATIONAL SCORE 70.2





\*significantly higher than its corresponding sub-sector, sector, or national score



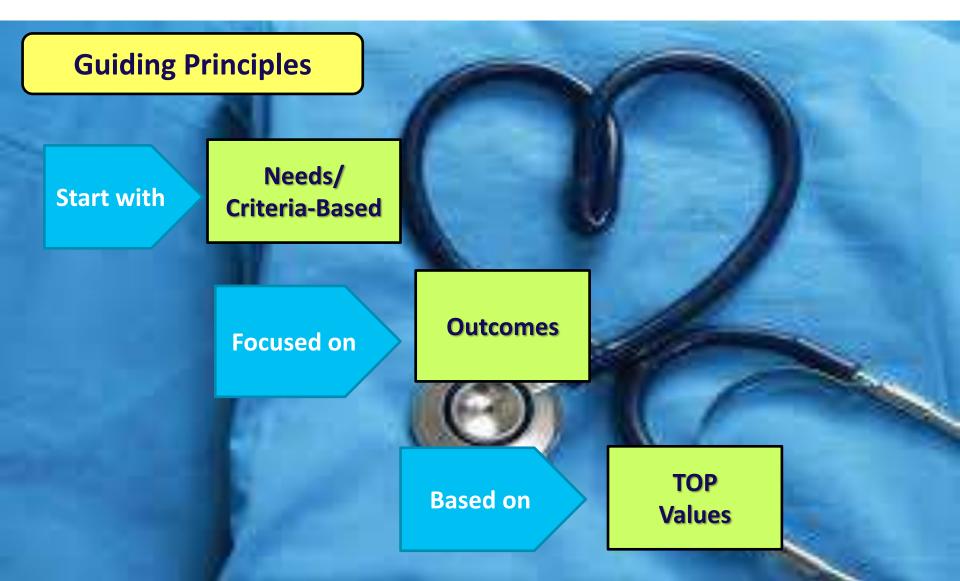


# Working Together as One CGH - Lesson from the Journey Thus Far



# **Planning: The CGH Way**

#### **CGH Marketplace**



# **Clarity of Roles**

<ul> <li>A</li> <li>Accountable The party that is answerable to the outcome</li> <li>Support Parties playing the enabling role</li> <li>Informed Parties who should be kept in the loop on</li> </ul>	R	<ul> <li>Responsible Those who do the work to achieve the task</li> </ul>
<ul> <li>Parties playing the enabling role</li> <li>Informed Parties who should be kept in the loop on</li> </ul>	Α	
Parties who should be kept in the loop on	S	•••
developments		Parties who should be kept in the loop on



## The Ready Competency Development Series





# **Forming of Teams**

Goal is deep sustained improvement Things may get worse before it gets better

TASKS

- Establishing Expectations
- Agreeing on common goals

#### Forming

- Making contact and team bonding
- Developing trust

- Identifying power and control issues
- Identifying resources

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#### Storming

- Expressing differences in ideas, feelings and opinions
- Reacting to leadership

- Members agreeing on roles and processes
  - Norming
  - Decisions are made through negotiation and consensus building

Achieve effective and satisfying results

#### Performing

Members work collaboratively and care for one another

# **BEHAVIOURS**



# Learning Together

# CGH's giant lab to test features for new wards

Hospital staff, vendors, guests will check out options and give feedback

#### By SALMA KHALIK SENCE NEW TH CORRESPONDENT

THE nondescript blue-and-white to have the tollet and shower tobuilding which has sprouted gether - as they are in most across the road from Changi Gen-homes - in the new words. eral Hospital (CGH) may not look A dining area will also be prolike much, but it is where the hos- vided so that patients would not pital has built a giant laboratory have to eat by their bed. to test fresh ideas for a new block of wards which will open next walking a short distance before sit-

built between CGH and St An- ing room will be able to seat (SACH), will have 280 heds.

It will be shared by the two hosand SACH the rest when it opens hespital is also looking at how to

Eastern Health Alliance, which in- Seah. ment as much as possible.

nest year.

ly, they are on their own." This is why the hospital plans

in bed till they leave, and sudden-

ting at a table for meals, as they The new block, which is being are likely to do at home. The dir-

drew's Community Hospital around 20 people, so patients can est with visitors. As future wards are expected pitals, with CGH taking 180 beds to cater largely to the elderly, the

make life easier for older patients, Mr T.K. Udairam, head of the said CGH assistant CEO Selina cludes both CGH and SACH, infrared-activated floor lights

tients prepare for their discharge touch the floor as he leaves the by mimicking the home environ- bed are one example. Even floor-

The plan is to get them used to



wants the new wards to help pa- that turn on when a patient's legs



The blue-and-white building, complete with air-conditioning, is a giant laboratory to text fresh ideas for a new block of wards being built between CGH and SACH.



ing is being tested as CGH looks. The new wards, which are being tested in the temporary centre, aim to being patients prepare for their discharge by He said: "Today, patients are for a material that is easy to make miniciple the home environment as much as possible. ST 940702 0234000 FOD

tain, soft and sound-absorbent. But changes to wards have to be tested first, including by the doctors and nurses who work

Which is why CGH leased a small triangelar plot - bound by Simei Avenue and slip roads to the Pan Island Expressway - from the Land Transport Authority to build a temporary test centre. complete with air-conditioning. From this month; hospita staff, vendors and invited poests will be trooping through a mock-up ward there to give their opinion on several options the hospital is considering.

Abrahy, several improvements for next year's new words have been decided upon. One is to have sliding doors for the tollets instead of ones that open out after the Handicaps Welfare Association suggested that this was easier for wheelchair users. sainalisah.con.sg

D www.facebook.com/57 Salma

#### **MULTI-DISCIPLINARY APPROACH**

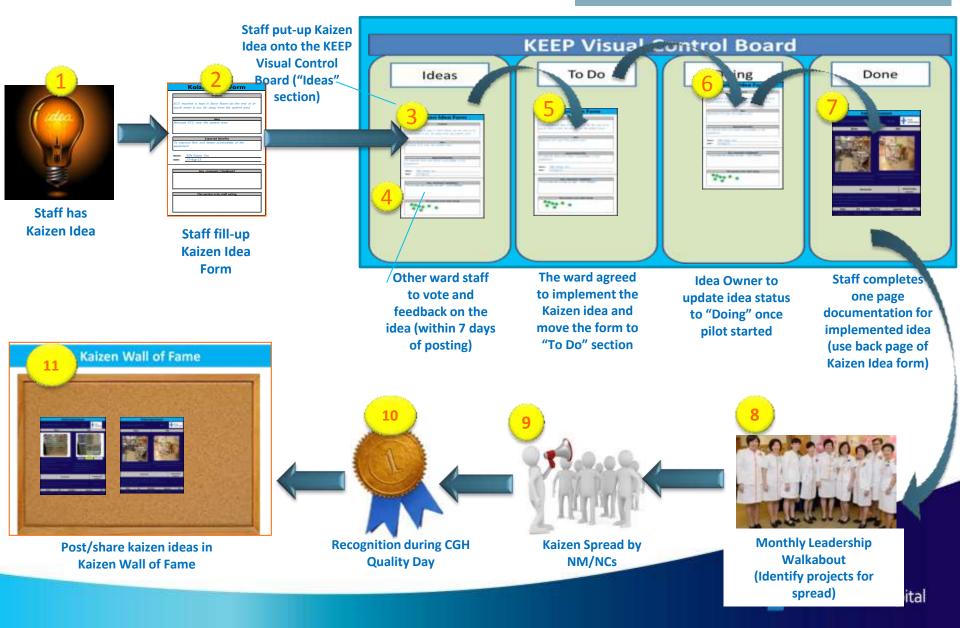






#### K.E.E.P.: Kaizen Everyday Engagement Programme

# Platform for daily improvement initiatives



# The Power of One





"I am only one; but still I am one. I cannot do everything; but still I can do something; and because I cannot do everything, I will not refuse to do the something that I can do."

- Edward Everett Hale



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#### Thank you!

