

Project Title

Conducting Financial Counselling (FC) for All Inflight Patients at NTFGH & JCH Wards

Project Lead and Members

Project lead: Nurul Natasha

Project Members: Siti Zahara, Nur Farina, Nur Hafizah, Rachel Ng

Organisation(s) Involved

Ng Teng Fong General Hospital, Jurong Community Hospital

Healthcare Family Group(s) Involved in this Project

Healthcare Administration

Applicable Specialty or Discipline

Patient Service Centre

Project Period

Start date: Dec 2020

Completed date: May 2021

Aims

- Reduce the no. of patients who did not undergo FC within 48hrs of patient stay, from 15% to 1% by end of May 2021.
- Achieve 99% attempted FC for all inflight patients within 48hrs of admission, of which at least 80% to be done within 24hrs inflight.

Background

See poster appended / below

Methods

See poster appended / below

Results

See poster appended / below

Lessons Learnt

This increases work efficiency & patient satisfaction as we are able to hit 99% in our attempts to perform FC within 48hrs of patient's admission. Most patients are now aware of estimated charges during their stay and are able to seek financial advice and assistance if required. They can thus focus more on their recovery while in flight.

Conclusion

See poster appended / below

Project Category

Care & Process Redesign, Quality Improvement, Job Effectiveness, Valued Based Care

Keywords

Financial Counselling, Internal Audit, Patient Feedback, Hospital Charges

Name and Email of Project Contact Person(s)

Name: Siti Zahara

Email: Siti_zahara_hassan@nuhs.edu.sg

CONDUCTING FINANCIAL COUNSELLING (FC) FOR ALL INFLIGHT PATIENTS AT NTFGH & JCH WARDS

MEMBERS : NURUL NATASHA, SITI ZAHARA
NUR FARINA, NUR HAFIZAH
FACILITATOR: RACHEL NG

Define Problem, Set Aim

Problem/Opportunity for Improvement

Ward PSAs are required to conduct FC with patients within 48hrs of patient stay. However, this practice is inconsistent resulting in some patients not being financial counselled within the required time.

- **Internal Audit Findings** : Between September to December 2020, there was about 10% - 15% that patients who did not undergo Financial Counselling (FC) within their 48hrs of their admission.
- **Feedback from Patients:** Patients feedback on bill shock that they were not informed of the hospital estimated charges before during their stay.
- **Requirement by MOH & Department:** MOH requires Hospitals to inform patients of estimated charges. FC is part of the department's key performance indicator that all patients need to be FC-ed within 48hrs stay at the ward.

Aim

By end May 2021, the team targets to:

- ❖ Reduce the no. of patients who did not undergo FC within 48hrs of patient stay, from 15% to 1% by end of May 2021.
- ❖ Achieve 99% attempted FC for all inflight patients within 48hrs of admission, of which at least 80% to be done within 24hrs inflight.

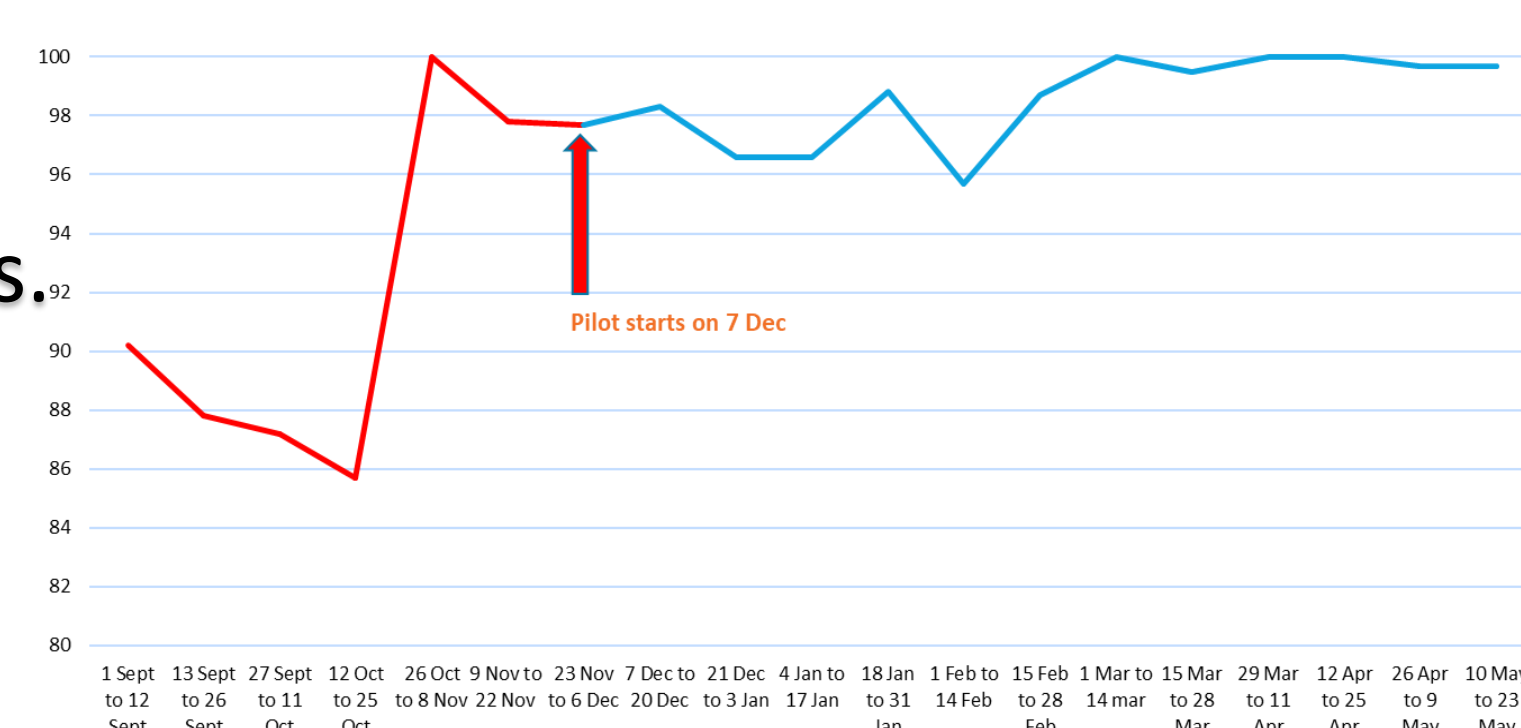
Establish Measures

Outcome Measures

Percentage of patients who undergo FC within 48hrs of patient's stay at the ward.

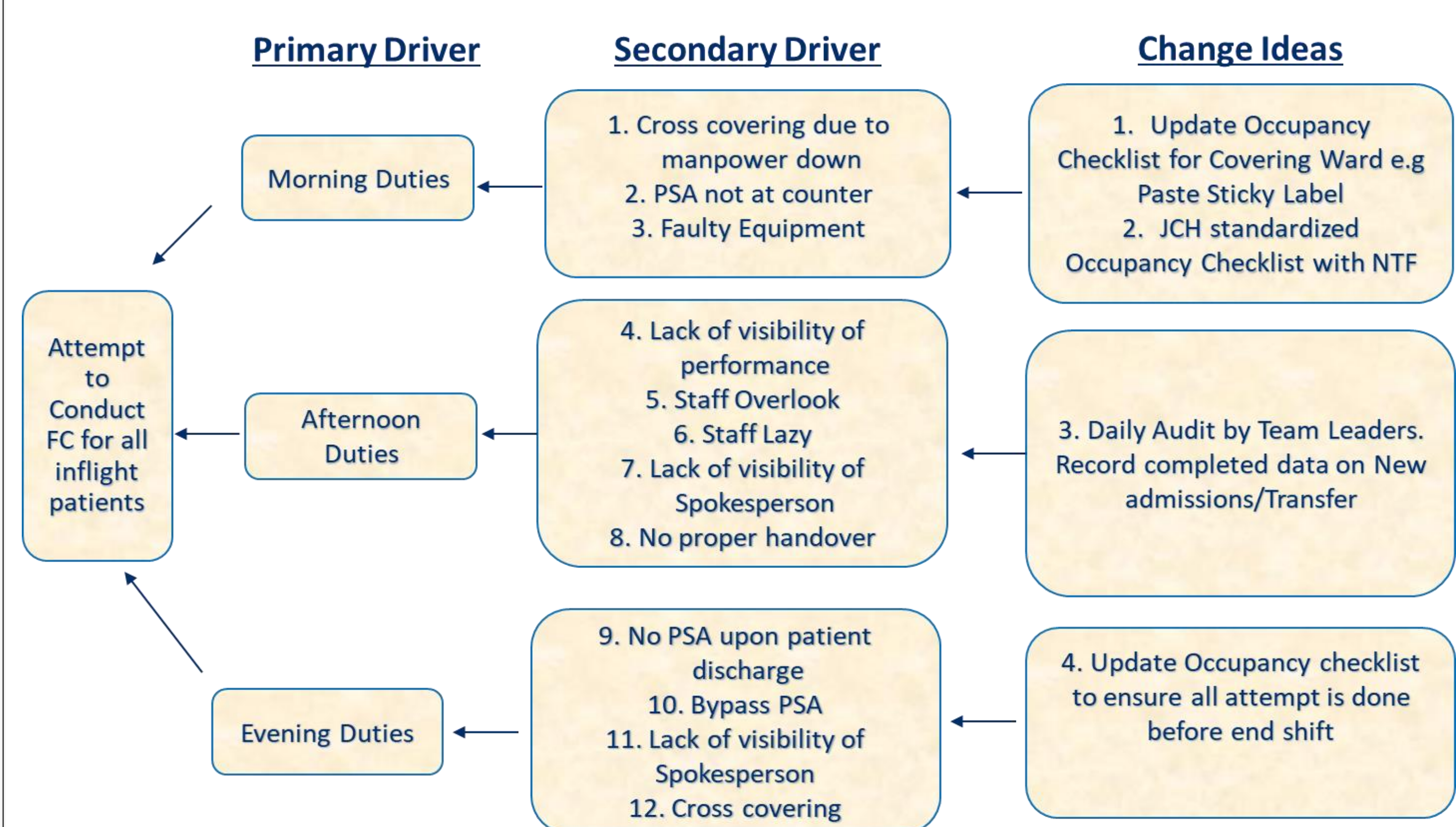
Process Measures

- ❖ No. of patients required to undergo FC at the ward within 48hrs
- ❖ Perform checks on 5 cases daily for the selected wards.
- ❖ 48hrs is determined from the time patient arrive at the ward.
- ❖ Collate 6 months data for NTFGH and JCH wards .



Analyse Problem

Restricted, Non-Sensitive



- ❑ SAFETY
- ❑ QUALITY
- ✓ PATIENT EXPERIENCE
- ✓ PRODUCTIVITY
- ❑ COST

Select Changes

Standardised Occupancy Checklist

Before - JCH

After - NTF and JCH

FC CHECKLIST

Bed 9

Bed 10

Patient Sticky Label

Legend:

- CCF (A)
- CCF (B)
- CCF (C)
- CCF (D)
- CCF (E)
- CCF (F)
- CCF (G)
- CCF (H)
- CCF (I)
- CCF (J)
- CCF (K)
- CCF (L)
- CCF (M)
- CCF (N)
- CCF (O)
- CCF (P)
- CCF (Q)
- CCF (R)
- CCF (S)
- CCF (T)
- CCF (U)
- CCF (V)
- CCF (W)
- CCF (X)
- CCF (Y)
- CCF (Z)

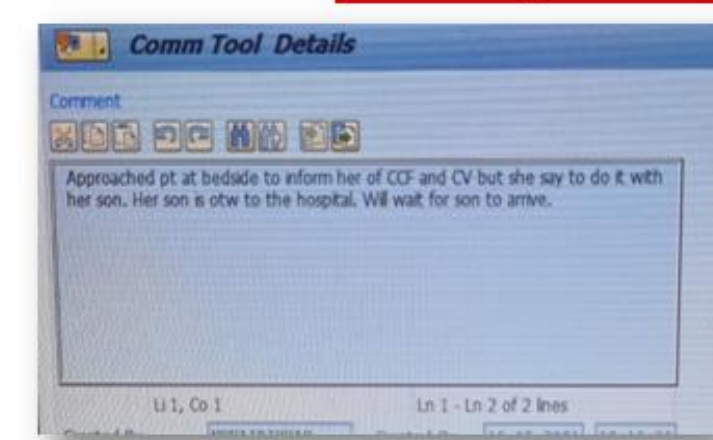
JCH checklist is different from NTF. Discussion was done to ensure both sides are aligned and standardised.

Weekly Ward Audit via Ward Rounds



- Team Leads conducted ward rounds weekly to screen through if CCF(A) is indicated in Occupancy Checklist. This is to ensure consistency.
- Ward PSAs are required to indicate CCF(A) once attempt has been done.
- PSAs are being reminded regularly if CCF(A) is still pending and requires follow up.
- PSA or Team Leads will be able to identify attempted cases at one glance.

Weekly Ward Audit via Comms Tool



- Besides checking of CCF(A) on the sticky label, we will also check the Comms Tool for updates
- PSAs will be reminded regularly if CCF(A) requires follow up.

Test & Implement Changes

Test changes using PDCA:

1 PLAN

- Representative Team Leads from NTFGH and JCH discussed and aligned the ward occupancy checklist and daily work processes.

2 DO

- Standardised Occupancy Checklist for both NTFGH and JCH Wards.
- PSAs started to attempt FC within 48hrs for all admissions.
- PM shift PSA to ensure cases are attempted for all admissions based on Occupancy checklist before end shift.

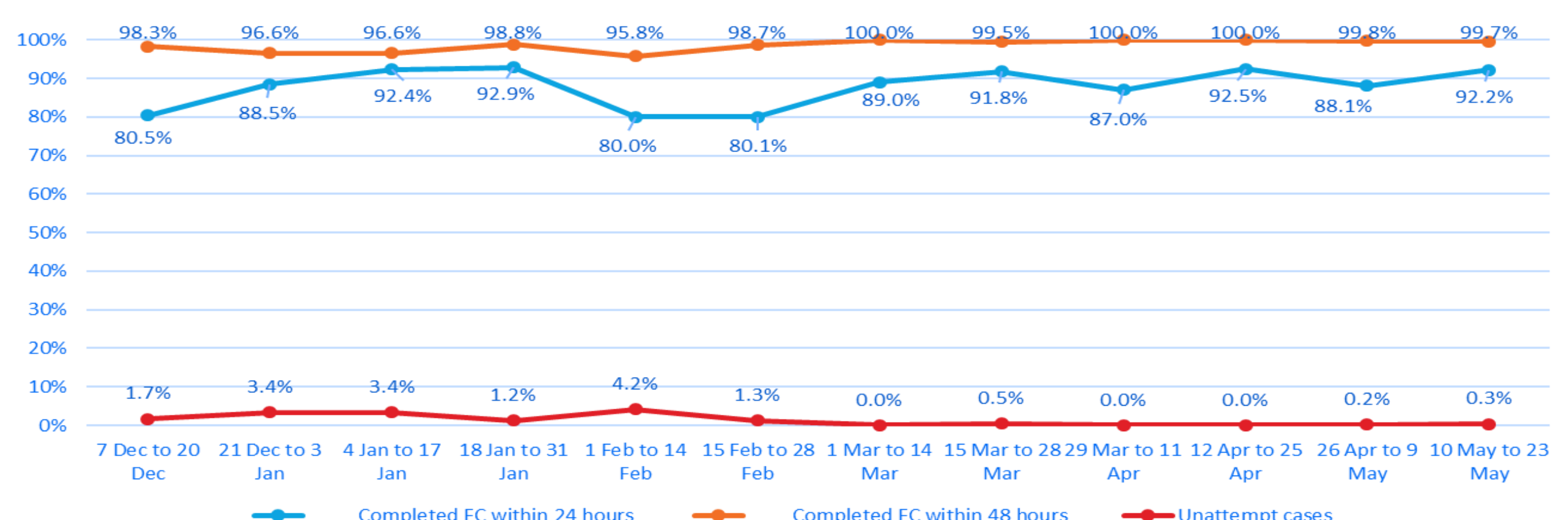
3 CHECK

- Team Leads monitored the number of compliance and records the reasons for non-compliance.
- Team piloted audit checks to ensure consistency in attempting FC. To promptly follow up on cases which were not able to attempt within 48hrs.
- Gathered feedback from the ground that this pilot is feasible and Occupancy Checklist are easy to use by indicating it on the patient's sticky label.

4 ACT

- After target was achieved, this initiative are standardised across all wards to perform as part of daily duties.

Results:



	7 Dec to 20 Dec	21 Dec to 3 Jan	4 Jan to 17 Jan	18 Jan to 31 Jan	1 Feb to 14 Feb	15 Feb to 28 Feb	1 Mar to 14 Mar	15 Mar to 28 Mar	29 Mar to 11 Apr	12 Apr to 25 Apr	26 Apr to 9 May	10 May to 23 May
Sum Of Total Case	354	358	378	340	349	372	391	391	370	400	360	374
Completed FC within 24 hours	285	317	349	316	279	298	348	359	322	370	317	345
Completed FC between 24hrs to 48 hours	63	29	16	20	55	69	43	30	48	30	42	28
Unattempted Cases	6	12	13	4	15	5	0	2	0	0	1	1

We have achieved:

- 1. An average of **98.7%** FC done within 48hrs during patient inflight;
- 2. An average of **87.9%** FC done within 24hrs during first day stay.

Spread Changes, Learning Points

Weekly audits and structured work processes aid our staff to perform better while improving our service delivery.

This increases work efficiency & patient satisfaction as we are able to hit 99% in our attempts to perform FC within 48hrs of patient's admission. Most patients are now aware of estimated charges during their stay and are able to seek financial advice and assistance if required. They can thus focus more on their recovery while inflight.