

# Building Systems People Trust

## A Human Approach to Scaling CaseCentral

Bringing every agency, partner, and frontline into real, confident adoption

### Executive Summary

1. **Ecosystem-first:** Practical plan to drive adoption across all agencies and partners.
2. **Equity and inclusion:** Actionable solutions for vulnerable groups and smaller SSAs.
3. **Clear actions, real impact:** Focused steps to build trust and deliver results for MSF.

Sena Lim | [Email](#) | [LinkedIn](#)



# Context: Why Now, Why CaseCentral?

MSF's SIR Directorate is leading a pivotal transformation.

CaseCentral isn't just another system. It's our shot at making sure families, frontline officers, and all our partners, from big agencies like MOH and AIC to the smallest SSA, can actually help people, faster and better, together.

Across Singapore, more than 450 SSAs and at least 6 major agencies need to work in sync for families to get timely support.

# Adoption Challenge: Where Change Falls Flat

You can spot when change isn't sticking:

- Some teams are still using old spreadsheets.
- Volunteers don't know where to go for help.
- Agencies miss handoffs, and frontline staff get frustrated.

It doesn't take long for **workarounds and gaps** to show up, right where families notice it most.

# Root Causes: What Really Gets in the Way



## Trust Gap

People don't trust what they **didn't help** shape.



## Training Mismatch

One-size-fits-all training **misses the real** struggles.



## Slow Feedback

Real problems bubble up **too slow, usually as** complaints.



## Tool Fit

Folks **use old tools** if the new ones don't fit.



## Powerless Champions

Champions **need real power**, not just a title.

# The Real Cost of Quiet Resistance

When we don't close those gaps:

- Support tickets can rise by up to 30 percent (*stats from World Bank Digital Adoption, 2022*)
- Cases take longer to resolve
- Shadow systems stick around
- Trust drops

It often takes months before anyone catches what's really going wrong.

The real cost isn't just workload. **It's families waiting and frontline teams losing faith in the system.**

# How I'd Actually Make Change Stick: The Real Flywheel

## Shared Vision & Leadership

Everyone's voice, one vision.

## Recognition & Habit Reinforcement

Spotlight most improved, not just fastest

## Transparent Progress & Storytelling

Open dashboards, story rounds, everyone sees the wins



## Deep Co-Creation & Change Champions

Champions who can make decisions, not just cheer

## Equity-Driven Enablement

Help that fits every team, big or small  
(Tiered starter packs, buddy onboarding, practical support)

## Multi-Directional Feedback & Data

Monthly clinics, emoji check-ins, safe space to speak up

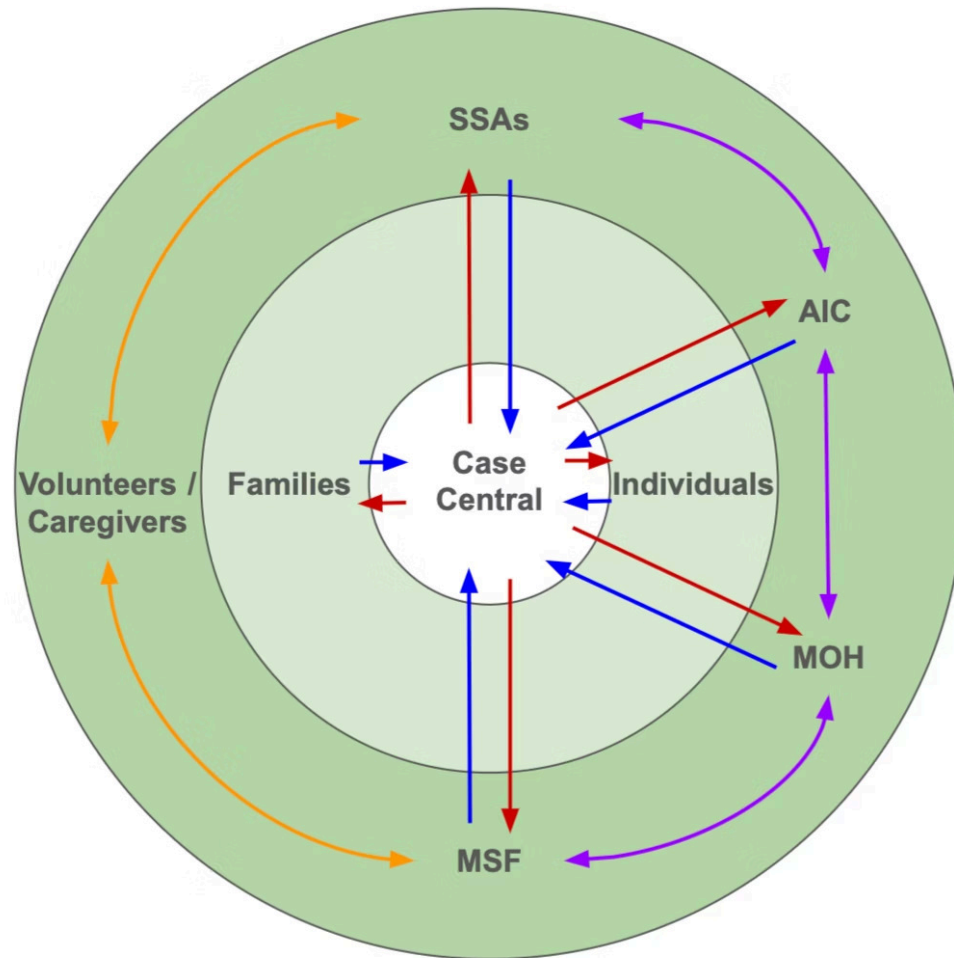
## Adaptive Governance

Council reviews what's not working and pivots fast (Monthly reviews, quick pivots, escalation paths)

A sustainable system is not a checklist.

When ecosystem vision, co-creation, differentiated enablement, rapid feedback, adaptive governance, and habit-forming recognition work together, **adoption becomes a norm across all partners.**

# Ecosystem Stakeholder Flows & Feedback



- User feedback, case data, real-world blockers, support needs
- System updates, insights, support, alerts, best practices
- Monthly clinics, peer learning, story rounds, fast fixes
- Ground signals, community insights, last-mile feedback

This is how feedback, support, and real-world insight travel, **not just from the ground up, but sideways and back again.**  
This is how you **catch blockers early** and make sure **nobody's voice gets lost.**

# How I'd "Give Champions Teeth", Not Just a Title

Champions need more than a badge. They need **time, authority**, and a clear way to **escalate** real blockers.

I'd set up direct **access** for champions to the adoption council, let them **lead** monthly clinics, and **empower** them to request fast fixes without red tape.

Champions get **public recognition, backup from leadership**, and a say in what's prioritized.

That's how you turn champions into agents of change, not just cheerleaders.

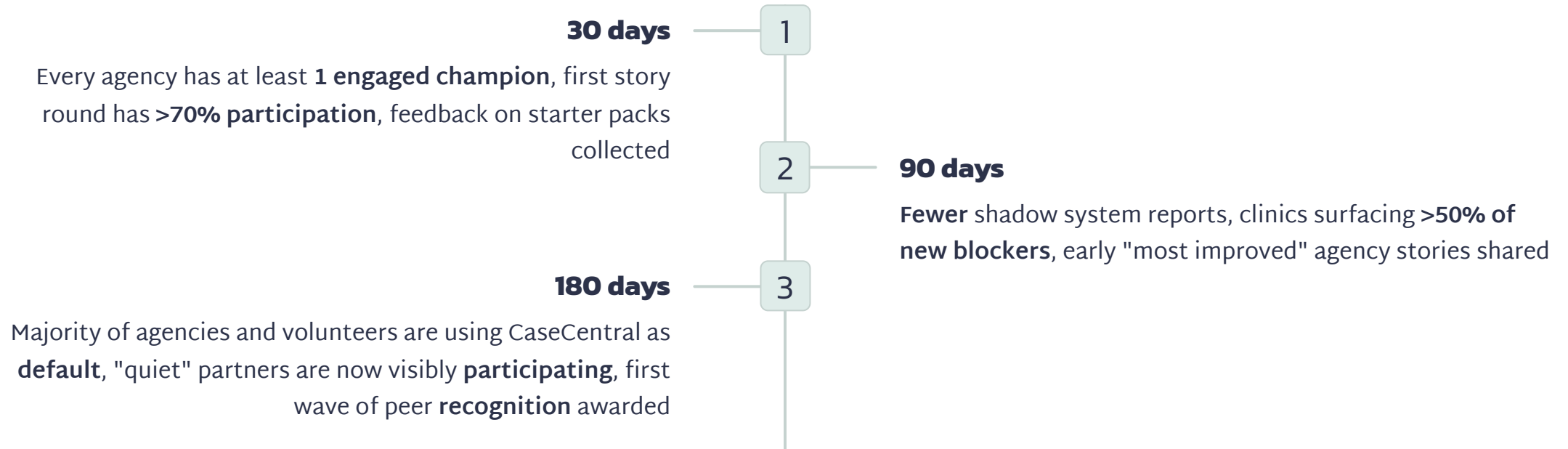


# Risks: I Don't Pretend It's All Smooth

Potential Risk	Early Signal	First Move
Silent resistance	Low "story round" or clinic attendance; repeated shadow systems	Reach out via peer channels, do a "listening clinic"
Champion burnout	Champions dropping out, unacknowledged effort	Add more peer support, rotate duties, public recognition
Uneven enablement	Same agencies always behind in feedback/pulse data	Focus "starter packs" and in-person clinics here
Data breakdowns	Spike in double entry, "back to spreadsheet"	Hotfix interop issues, peer "fix teams," close the loop fast

I've learned that no flywheel is risk-free. The fastest sign of trouble is when engagement drops quietly, or when the same agencies always lag. My approach: **surface it early, act in days not months, and never punish the messenger.**

# What Success Looks Like (Early Wins)



In my experience, the best metric is not just raw usage, but whether the quietest agencies are now speaking up, whether story and peer clinics are surfacing real blockers, and whether most improved are being celebrated, not just early adopters.



## Why This Matters for MSF: The Ecosystem Advantage

CaseCentral's potential lies in creating a **new backbone for social care**, where partnership, feedback, and equity are built into daily routines.

Every agency, volunteer, and user can move forward with confidence, because they see themselves in the system and have a voice in its ongoing improvement.

# Why This Work Matters To Me

What gets me up in the morning is knowing that systems like CaseCentral can quietly change lives for people who don't have a safety net. I've always been **drawn to work that supports those who are vulnerable or often left behind**, whether that's families navigating social services, persons with disabilities, or seniors needing care.

This isn't just a job to me. I've spent time building case studies like designing peer support models for SG Enable and AWWA, inclusion ecosystems for seniors, or trust-first tools for CDC Voucher pilots, because **I want to show what's possible for people who usually aren't at the center of digital transformation.**

These projects are more than concepts. They're how I work: practical, people-first, and always asking, "Will this actually make someone's life easier?"

**I'm here to help MSF build a system that's stable, trustworthy, and feels like it's designed for the people who need it most.**

If you want someone who'll **bring a fresh lens, care deeply about the details, and work side-by-side with teams on the ground**, I'm ready.

*You may refer to the mentioned case studies here:*

<https://senalim-portfolio-wta6x3k.gamma.site/#card-rfq5zxyqcyevgf>

# How This Reflects My Product Practice

## What this case shows:

- 1 Designing for equity as well as adoption — ensuring the smallest agencies and the quietest voices are included from the start.
- 2 Turning champions into decision-makers — giving them authority, support, and direct access to unblock change.
- 3 Embedding rhythm-based feedback and governance — so blockers surface early and fixes happen in days, not months.
- 4 Measuring success in confidence and collaboration — not just log-ins or case counts.

## This is how I build complex systems:

By treating adoption as a shared, living habit — built on trust, inclusion, and visible progress — so every partner can move forward with confidence, and no family waits because the system failed them.

[Explore more case studies](#) | [Email](#) | [LinkedIn](#)