

## Transforming Patient Check-in Experiences Through IT Innovation

Sharon Chen

Sharon\_my\_chen@nhgp.com.sg



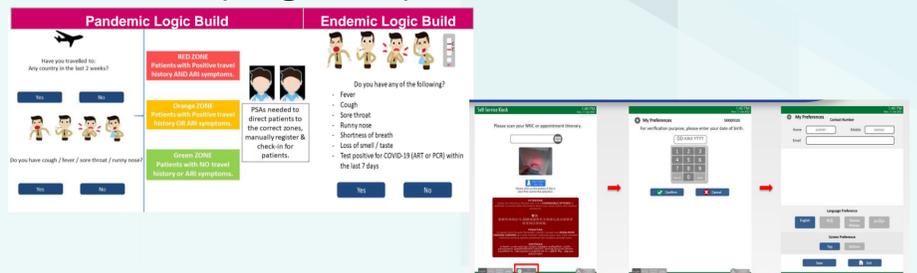
### Problem Statement

NHGP sees about 2.3 million patients a year and about 47% are chronic disease patients. The high load with regular repeated visits necessitates an efficient system to manage the essential check-in and check-out services.

### Potential Solutions

Transforming Patient Experience:

- Implemented a pandemic logic to register and direct ACUTE and URTI patients appropriately. (Mar 2022)
- Allowed self-help payment of outstanding bills and deposits. (Mar 2022)
- Implemented an endemic logic to route patients and actualised appointments at the appropriate zone. (May 2022)
- Enabled self-update of particulars at kiosks. (Aug 2022)



### Project Aim

To improve and redesign service delivery for better efficiency and patient safety by leveraging on innovation and technology

### Outcomes & Impacts

These innovations **avoided the hiring of about 14 PSA FTEs** [i.e. \$569,184 per year]

- 1. Pandemic and Endemic Patient Routing Logic Build**
  - **Pandemic logic** was deployed at the onset of covid-19 and subsequently, an **endemic logic**, to better suit the evolving pandemic situation.
  - **7 FTEs saved** from the need to manually direct and register patients.
- 2. Enhancements to Improve Registration Processes**
  - **Empowering** patients to **update their particulars** upon check-in.
  - **Auto-prompting** patients to verify their contact details every 12-monthly to ensure information is up to date
- 3. Allowing payment of Outstanding Bills & Deposits**
  - Outstanding payment and deposits **collection at kiosks improved by 130%** compared to counter collection.
  - **Saved 7 FTEs** from manual outstanding bill collection, **eliminated 6,000 patient wait hours.**

### Lessons Learnt

1. Staff buy-in and training is key. We depend heavily on staff to guide and facilitate patients at the self-help kiosks especially for new features.
2. Some “pain” may be needed to push change ahead. Many patients would still habitually approach counter staff to register/make payment unless e.g. there is a queue (“pain”). Hence, redeploying of staff from counter to kiosk to help patients is important.