

## **Project Title**

Building Future Ready Workforce – Upskilling Patient Service Associates (PSAs) to Care Coordinators (CCs)

## **Project Lead and Members**

Project lead: Samuel Ng

Project members: Serene Foo Ai Buay, Tan Kar Leng, Jody Teo, Sharon Koo, Reis Koh, Mark Lee

## **Organisation(s) Involved**

National University Polyclinics

## **Healthcare Family Group Involved in this Project**

Ancillary Care

## **Applicable Specialty or Discipline**

Patient Service Associates, Care Coordinator

## **Aims**

To upskill PSAs in their usual scope of work to take on the role of a CC. It yields several benefits namely (1) providing opportunities for suitable PSAs to venture into patient care coordination work, (2) building up a future-ready workforce, (3) optimization of limited healthcare resources to take on higher value job, and (4) strengthening the CC number to support national strategy to drive health and not healthcare.

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Lessons Learnt**

See poster appended/ below

## **Conclusion**

See poster appended/ below

## **Project Category**

Workforce Transformation

Job Redesign, Upskilling

## **Keywords**

Career Progression, Change Management

## **Name and Email of Project Contact Person(s)**

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## INTRODUCTION

National University Polyclinics (NUP) regularly examines care & service delivery models to ensure our polyclinics remain agile to respond to changing needs of our patients and evolving healthcare landscape. To prepare for HealthierSG (HSG), a review was done to transform the way overall care & coordination are being delivered in the clinics. There was a need to strengthen the CC roles and numbers while ensuring optimal use of manpower resources.

The project involved upskilling of PSAs in their usual scope of work to take on the role of a CC. It yields several benefits namely (1) providing opportunities for suitable PSAs to venture into patient care coordination work, (2) building up a future-ready workforce, (3) optimization of limited healthcare resources to take on higher value job, and (4) strengthening the CC number to support national strategy to drive health and not healthcare.

## CORE TEAM

	Name	Designation	Department
Team Leader	Samuel Ng	Chief Operating Officer	Operations
Members	Serene Foo	Senior Assistant Director	Operations
	Tan Kar Leng	Assistant Director	Operations
	Jody Teo	Operations Manager	Bukit Batok Polyclinic
	Sharon Koo	Deputy Director	Human Resource
	Reis Koh	Senior Manager	Human Resource
	Mark Lee	Senior Assistant Manager	Human Resource

## CAUSE FOR THE UPSKILLING OF PSAs

- Perceived lower value of work and limited career progression for PSA, as compared to CC
- Limited healthcare resources to take on enhanced/enlarged scope of work due anticipated HSG workload

## AREAS OF CHANGE AND IMPROVEMENT

- With HSG, CCs' scope of work would be enhanced (e.g. sharing with patients about self-help tools/apps, prescribing preventive health in the form of social/physical activities and following up with patients on care-gaps) and the type of patients (i.e. HSG enrolled chronic and potentially non-chronic patients) being taken care by CCs would also be expanded
- Number of CCs need to be increased to meet the demands of HSG
- With more patients being able to self-help through digital channels, there would be less reliance on PSAs for counter services like appointment/payment; this requires a Change Management program to assimilate PSAs into their new role as CCs with enlarged job size.

## PLANS TO OVERCOME ISSUE

- Structured upskilling phases of identification (attributes required of CC), evaluation (competencies), planning (training needs/programs), development (necessary knowledge and skill sets) and assessment (readiness)
- Change Management program from staff engagements, tailored training (classroom and on-job-training), to hands-on practice in order for the CCs to assume higher value role with expanded scope of work
- When PSAs are assessed to be ready, they are converted to CCs with HR records updated

## IMPLEMENTATION

Each batch of identified PSAs would need to go through the following:

- Briefings and Engagements with Senior Management team (Ops and HR)
- Classroom theory & system trainings
- On-Job-Training & attachments to CCs
- Hands-on sessions to independently see patients for a period of time
- Competency assessment

## RESULTS

Upskilling PSAs allows for greater effectiveness in the use of limited manpower. As of Mar 2023, a total of 25 PSAs were successfully trained and converted to CCs (i.e. able to function independently and effective in their new roles).

To ensure that staff are aware and understand the new job role, engagement sessions were held before and after implementation. This included staff engagement sessions and senior management sessions with individual clinics from Mar to Apr 2023.

Supervisors have been closely monitoring their staff progress since the start of the project and providing support to them whenever required.

Staff have been receptive about their new role and scope of work.

## SCALABILITY

The project was successfully deployed to all NUP polyclinics. PSA Upskilling has been on-going since Feb 2022. The upskilling model is easily transferrable and can be applied to departments that have similar interest to have their staff trained and upskilled to take on new role or enhanced/enlarged scope of work.

