

Project Title

IPSG Number 1 – Mission Impossible Makes Possible

Project Lead and Members

- Cham Mooi Tai
- Celine Chow Yoke Leng
- Joanne Lee KH
- Cheng Woon Heah
- Jennifer Chew Yen Ling
- Niki Liu Shuhui
- Bong Elaine Cynthia
- Siti Hauzah Binte Abdul Rahaman
- Eileen Lee Yuan Lin

Organisation(s) Involved

KK Women's and Children's Hospital

Healthcare Family Group Involved in this Project

Medical, Nursing, Healthcare Administration

Specialty or Discipline

Division of Specialty and Ambulatory Services

Project Period

Start date: Sep-2018

Completed date: May-2020

Aims

To achieve 100% compliance for IPSG 1 in the clinics/centres under the Division of Specialty and Ambulatory Services (SAS)

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

Additional Information

Singapore Healthcare Management (SHM) Conference 2021 – Shortlisted Project (Risk Management Category)

Project Category

Care & Process Redesign, Quality Improvement, Workflow Redesign, Value Based Care, Safe Care, International Patient Safety Goals, Risk Management, Preventive Approach, Technology, Digital Health, Data Analytics

Keywords

Clinical Dashboard, Focus Group, Risk Management Workgroup, Cross-Monitoring

Name and Email of Project Contact Person(s)

Name: Cham Mooi Tai

Email: singaporehealthcaremanagement@singhealth.com.sg



Singapore Healthcare Management 2021

IPSG Number 1

Mission Impossible makes Possible

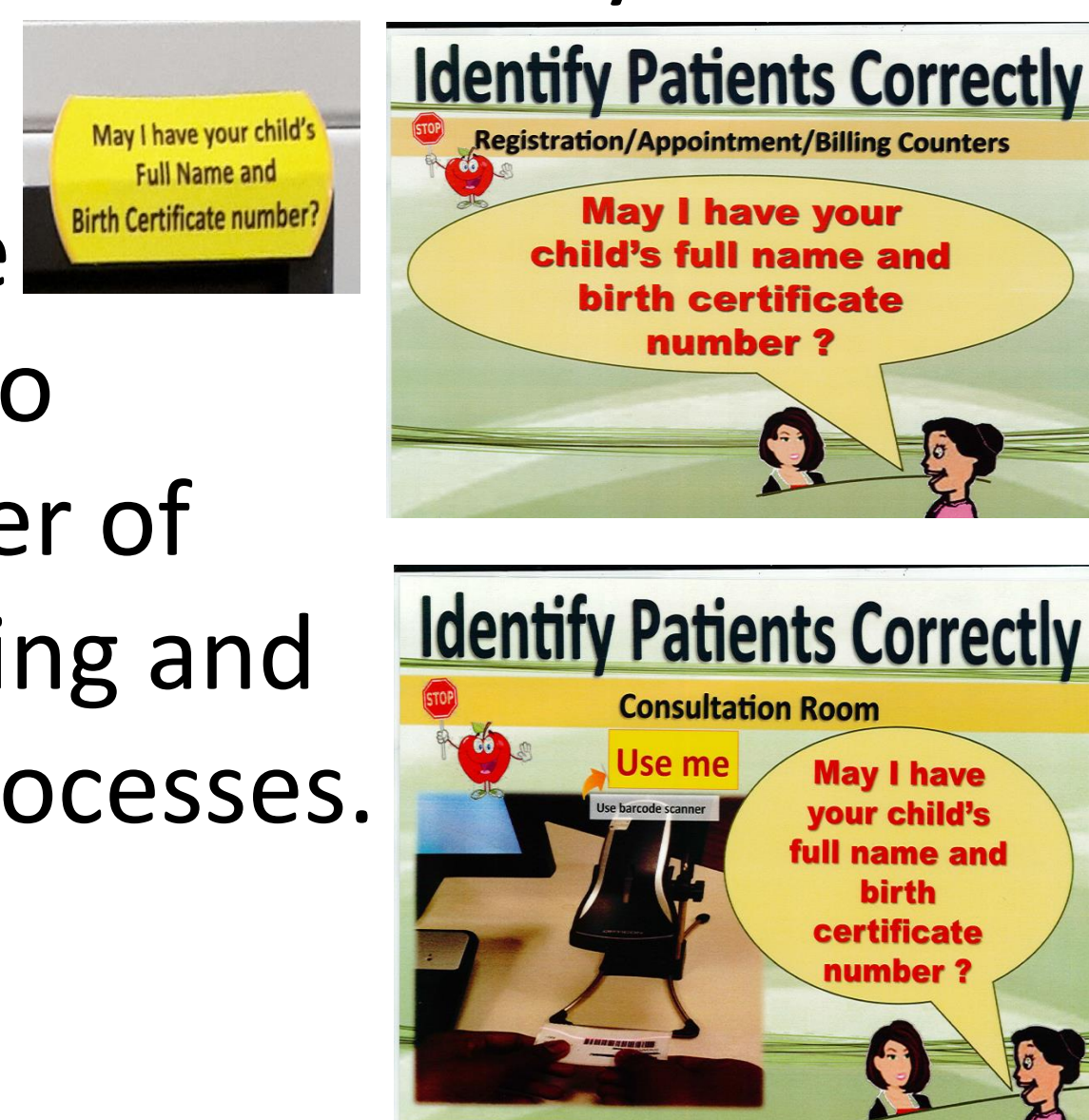


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INTRODUCTION

The first International Patient Safety Goal (IPSG 1) is to identify patient correctly with two constant fundamentals, that is full name and identity number. It is also one of the most important safety goal in the outpatient setting that should be adhered and applied at every contact point of our patients, before and after every service and treatment.

Back in 2015, IPSG1 posters and wobblers were introduced and visible at every contact points to identify patients correctly. Ironically, the number of incidents continued to increase. This was alarming and triggered the need to relook and rethink our processes.



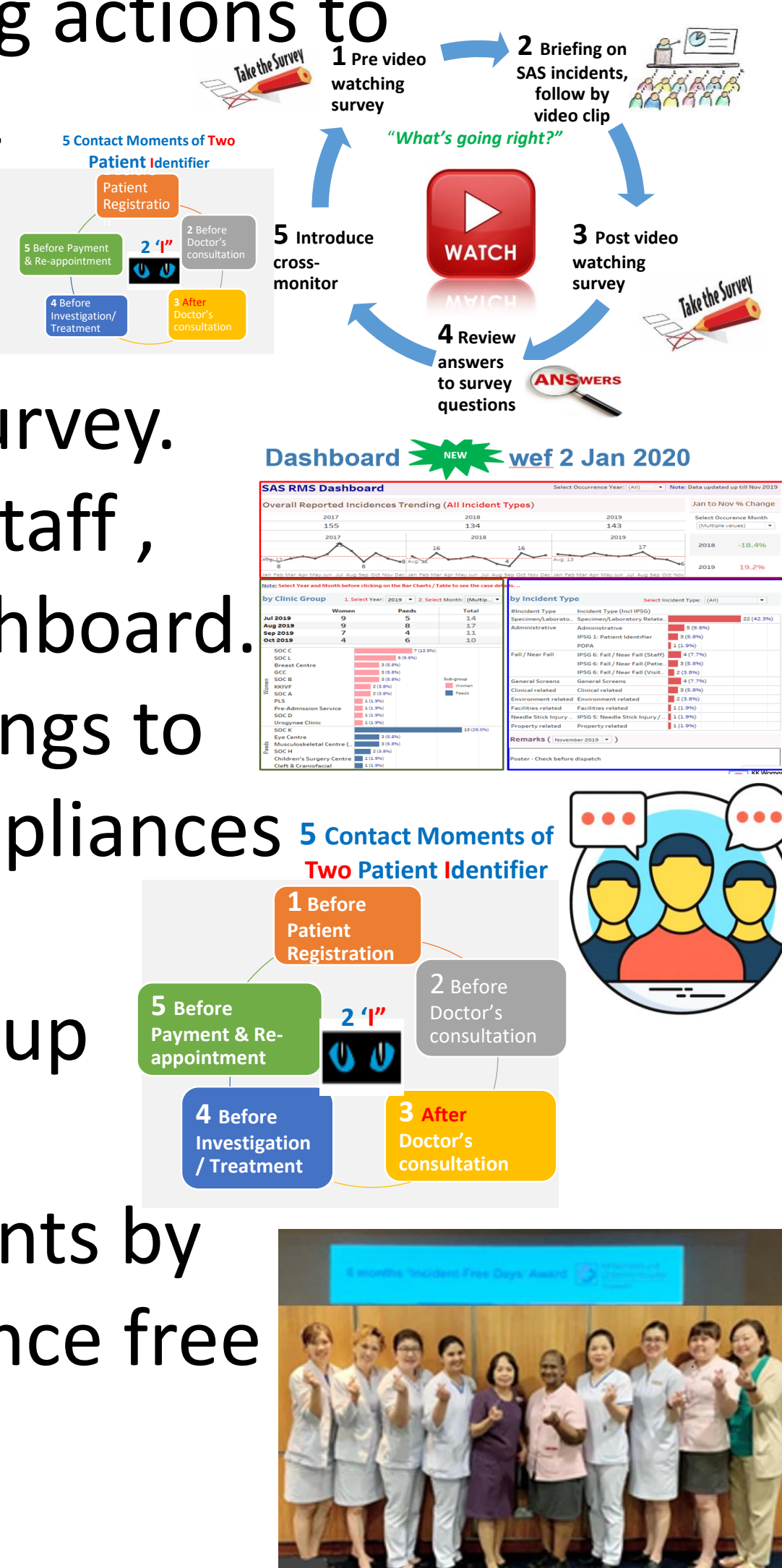
OBJECTIVE

To achieve 100% compliance for IPSG 1 in the clinics/centres under the Division of Speciality and Ambulatory Services (SAS).

METHOD

To analyse obstacles to non-compliance and instill improvement, we adopted a 5Cs Model. The model suggests taking actions to

- Connect** – An in-house creation of the IPSG 1 video entitled “What’s going right?” which was based on actual events and screened at staff meeting and roll calls with post video survey.
- Communicate** – Shared the incidences with staff, especially with the newly launch Clinical Dashboard.
- Collaborate** – Conducted Focus Group meetings to hear the reasons for best practices, non-compliances and work on improvement opportunity.
- Co-create** – SAS’s Risk Management Workgroup introduced cross-monitoring.
- Celebrate** – Short and long-term achievements by awarding clinic/centres with 100 days incidence free awards and one-year incidence free too.



RESULTS

- Monthly incidences rates were on down trend
- The mean incidence rate per 12 months reduced by at least half when compared to the previous 12 months.
- 100% compliance to IPSG1 on the stated months in figure 2
- Zero IPSG 1 Incident
 - 1st achievement - Sep 2018 (Breaking ground)
 - 2nd achievement – Nov 2019
 - 3rd achievement – Jan 2020
 - Sustainable - Apr and May 2020 for 2 consecutive months

Months	Average number/yr	Achieve Zero Incident
Jun-17 to May-18	6	Nil
Jun-18 to May-19	3	*Sep-18
Jun-19 to May-20	1.3	*Nov-19 *Jan-20 *Apr-20 *May-20

Figure 2: Table showed mean number of incidences over 12 month interval periods. It also records the months that achieved zero incidences

CONCLUSION

Our strategy has been implemented at the Clinics/Centres since then. Many of these interventions eventually became best-practices at Clinics/ Centres of the Division of SAS. The spread of these interventions could be embraced by the other institutions.

Together, the journey towards zero harm for IPSG 1 can be achieved with continuous monitoring.



For ease of viewing, more solutions and improvements have been written in either green or black in figure 1. The blue arrows are used to indicate the months these solutions were implemented.

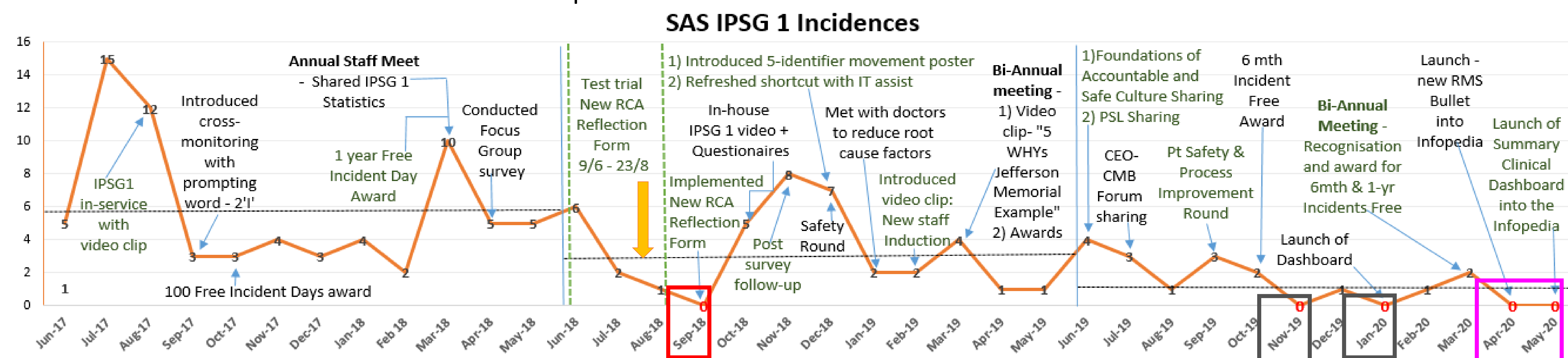


Figure 1: Number of incidences against time from 2017 to 2020. It showed a downtrend of incidences with an increasing amount of incidence free months.