

Project Title

Electronic Survey Methodology for Patient Experience

Project Lead and Members

Law Yen Hoon, Eric Wie, Edwin Huang, Low Tat Foong, Dr Angel Lee, Alison Sim

Organisation(s) Involved

St Andrew's Community Hospital

Healthcare Family Group(s) Involved in this Project

Medical, Nursing, Healthcare Administration

Applicable Specialty or Discipline

Healthcare Performance & Innovation Office, Group Information Technology

Project Period

Start date: Mar 2022

Completed date: April 2023

Aims

To achieve the following objectives by the end of Apr 2023:

- To reduce reliance on nursing manpower to solicit surveys on discharge day by 0.5 FTE
- To improve service recovery time from more than 14 working days to less than 3 working days
- To achieve a survey response rate of 20% for patients who are discharged home or to Intermediate Long Term Care (ILTC) with valid mobile numbers

Background

See poster attached

Methods

See poster attached

Results

See poster attached

Lessons Learnt

See poster attached (Reflections)

Conclusion

See poster attached

Additional Information

Accorded the Productivity Improvement Award – Team Award (Gold) at AIC's
Community Care Excellence Award (CCEA) 2023

Project Category

Technology

Digitalisation

Care & Process Redesign

Productivity, Job Effectiveness

Keywords

Rehabilitation Hospital, Patient Satisfaction Survey, Manual Process, Automatic Email
Alerts

Name and Email of Project Contact Person(s)

Name: Agency for Integrated Care, Quality Division

Email: quality@aic.sg

Electronic Survey Methodology for Patient Experience

St. Andrew's Community Hospital

Law Yen Hoon¹, Eric Wie¹, Edwin Huong², Low Tat Foong²,
Dr. Angel Lee³, Alison Sim⁴

1: Healthcare Performance & Innovation Office; 2: Group Information Technology; 3: Medical Services; 4: Nursing

Introduction/Background

- St. Andrew's Community Hospital (SACH) is a service under the St. Andrew's Mission Hospital group. In addition to inpatient rehabilitation, subacute and palliative care, SACH also operates home care and home palliative care; centre-based day and rehabilitative care; and outpatient and migrant worker clinics.
- As a rehabilitation hospital with 298 beds, SACH was the first community hospital set up to provide affordable intermediate medical care for rehabilitation and sub-acute care to children, adults and the elderly; including those with dementia or needing palliative care.
- While striving to provide the highest quality care and improve patient experience at the inpatient wards, SACH had relied on the in-house paper-based Patient Satisfaction Survey (PSS).
- However, the PSS instrument was **manpower intensive** and had become **dated** and improvement results had plateaued in recent years. The **lead time for service recovery** took longer than expected due to the delayed in paperwork.

Goal/Objective

To achieve the following objectives **by the end of Apr 2023**:

- To reduce reliance on nursing manpower to solicit surveys on discharge day by **0.5 FTE**.
- To improve service recovery time from **more than 14 working days** to **less than 3 working days**.
- To achieve a **survey response rate of 20%** for patients who are discharged home or to Intermediate Long Term Care (ILTC) with valid mobile numbers.

Problem Analysis

- The process map (see Figure 1) showed the paper-based PSS survey process from the point of solicitation to responding to negative feedback. The end-to-end process was very manual and manpower intensive. The lead time for Patient Relation Officer (PRO) to respond to a negative feedback could take **between a minimum of 8 working days and maximum of 24 working days**.
- Key challenges or wastes identified as follows:
 - Unnecessary time spent for nursing colleagues to solicit surveys and assist the patients to fill out the forms on day of discharge.
 - Biasness in recruiting patients/ family members for the paper surveys.
 - Long delay for Patient Relation Officer to respond to negative feedback due to batching of forms at the ward levels.
 - Many data entry of survey forms data into Google Sheet.
 - Survey results are not shared with all staff.

PSS Solicitation	Nurses solicit survey	Nurse Manager to consolidate all survey forms	DNON receives consolidated survey forms from all the wards and processes them	DNON passes all the forms to Admin staff	Admin staff enters the survey data into Google Sheet	Admin staff emails the survey data to all Senior Leaders	Patient Relation Officer to respond to negative feedback
Challenges/Wastes <ul style="list-style-type: none"> Possible biasness in patient recruitment Manpower intensive 	<ul style="list-style-type: none"> Batching Loss of completed survey forms 	<ul style="list-style-type: none"> Batching Loss of completed survey forms 	<ul style="list-style-type: none"> Manual process 	<ul style="list-style-type: none"> Missed or delayed in informing Patient Relation Officer regarding negative feedback 	<ul style="list-style-type: none"> HODs are not in the loop 	<ul style="list-style-type: none"> Delayed in responding to feedback providers 	
Process Time/Delay Time	<ul style="list-style-type: none"> 15-20 mins per patient 	<ul style="list-style-type: none"> 2-7 days 	<ul style="list-style-type: none"> 2-7 days 	<ul style="list-style-type: none"> 1 day 	<ul style="list-style-type: none"> 1-3 days 	<ul style="list-style-type: none"> 1-3 days 	<ul style="list-style-type: none"> 1-3 days

Figure 1. Process Map for Paper Patient Satisfaction Survey

Implementation Plan

- A new electronic Patient Experience Survey system (e-PES) using the validated **HCAHPS Community Hospital survey instrument** and workflows were **implemented progressively to all rehabilitation wards** by Jan of 2023, which was fully developed in-house with minimum cost (see Figure 2).
- Patients would receive an **SMS** one day after they are discharged from the wards with a **unique survey link**. They are not required to identify themselves while filling out the survey form.
- Location Managers on the ground and PRO receive **automatic email alerts** on a real time basis whenever there are new survey responses. Overall Patient Experience Score ≤ 4 (Out of perfect score of 10) will be followed up by PRO within 3 working days.
- A **dashboard** was created for all staff to review the survey results. ePES reports together with actual patients' verbatim are sent out automatically from the system to all the Senior leaders and location managers on a quarterly basis.

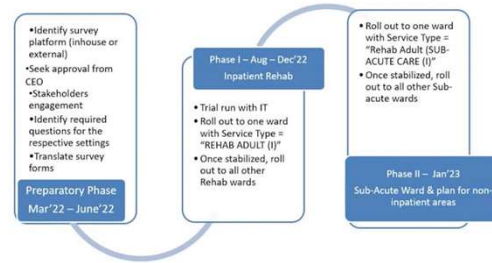


Figure 2. Implementation Plan for ePES

Benefits/Results

- With the introduction of ePES, we eliminated the need for **0.6 Nursing FTE** across all the rehabilitation wards to solicit paper PSS.
- Improved workflow (see Figure 3): The lead time for PRO to respond to a negative feedback dropped from **8-24 working days** to **less than 3 working days**.

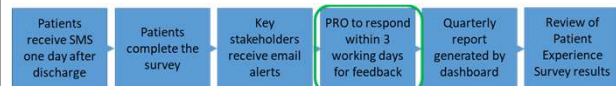


Figure 3. Improved workflow for survey solicitation

- Achieved a **survey response rate of 19%** for the rehabilitation wards:

Wards	Discharged patients	Patients who fulfilled criteria	Total Responses	% Survey Responses
Ward 4 (wef 1 Dec 2022)	77	54	11	20%
Ward 5 (wef 26 Sep 2022)	202	169	31	18%
Ward 6 (wef 25 Oct 2022)	210	148	26	18%
Ward 7 (wef 25 Oct 2022)	193	150	26	17%
Ward 8 (wef 25 Oct 2022)	212	144	23	16%
Ward 9 (wef 26 Sep 2022)	247	187	40	21%
Ward 10 (wef 26 Aug 2022)	102	64	13	20%
Total	1243	916	170	19%

Sustainability & Reflections

- This is a stakeholder-led, IT-supported project that worked extremely well for a hospital-wide project that involved admin and clinical colleagues from all departments.
- Engagement sessions prior to launching ePES are essential to get buy-in and alignment on the new workflows.
- Explorations of a reward system to increase the survey response rate.
- Regular updates of ePES results at the leadership meetings are essential to driving patient experience improvements continuously.
- ePES will subsequently be spread to the Sub-acute & Palliative Wards, Day Rehabilitation Centre, Home Care, and Pharmacy by the end of 2024.