Managing the wait at polyclinics

PUBLISHED ON 6 MAY 2015
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File photo: Patients at Geylang Polyclinic (Photo: Try Sutrisno Foo)

TODAY reports: The Customer Satisfaction Index of Singapore reveals that waiting time at polyclinics has improved, but patients’ satisfaction with the medication collection and payment processes has declined.

SINGAPORE: Three years ago, Mdm Helen Chua, 69, would set aside half a day for her thrice-monthly thyroid check-up at Clementi Polyclinic. But for the past year, the full-time housewife only had to spend less than two hours for each visit, even though the procedure — blood test, then consultation with the doctor — remains the same.

Mdm Chua’s experience is indicative of the results from the Customer Satisfaction Index of Singapore (CSISG) released for the fourth quarter of 2014 by the Institute of Service Excellence at the Singapore Management University (ISES).

Within the healthcare sector, the polyclinics sub-sector made the most substantial leap with a 4.6-per cent year-on-year improvement and scored 68.9 points out of 100.

Specialised healthcare was another sub-sector that performed well. It demonstrated an improvement of 2.8 per cent from the year before with a score of 72.2 points.

The restructured hospitals sub-sector had a less significant improvement of 0.5 per cent with a score of 69.3 points.
On the whole, the healthcare sector scored 71 points, a 1.6-per-cent year-on-year increase. Together with the finance and insurance sector, the two sectors contributed to the overall national satisfaction index of 71.1 points, a rise of 0.6 per cent from 2013.

This also marked the fourth consecutive year the national satisfaction index has risen.

**HOW POLYCLINICS PERFORMED IN 2014 TOUCHPOINTS COMPARED TO 2013**

- **Waiting time**
  - 2014: 6.4
  - 2013: 5.6
- **Efficiency of registration**
  - 2014: 7.4
  - 2013: 6.8
- **Ease of moving around**
  - 2014: 7.4
  - 2013: 6.8
- **Clarity of assistance provided**
  - 2014: 7.3
  - 2013: 7.1
- **Availability of seats**
  - 2014: 7.4
  - 2013: 6.8
- **Courtesies and helpfulness of staff**
  - 2014: 7.4
  - 2013: 7.2
- **Cleanliness**
  - 2014: 7.4
  - 2013: 7.3
- **Interaction with doctor**
  - 2014: 7.4
  - 2013: 7.1
- **Payment process**
  - 2014: 5.9
  - 2013: 6.9
- **Medication collection**
  - 2014: 5.7
  - 2013: 6.9

**IMPROVED WAITING TIME**

In the survey, the most notable improvement in the polyclinics sub-sector was the waiting time. Scoring 6.4 out of 10 on the satisfaction scale, it did better than 2013’s score of 5.6.
Other touchpoints that showed significant improvements include registration efficiency, seat availability and ease of moving around. Registration efficiency, for instance, was awarded 7.4, an improvement from 2013’s score of 6.8.

The ease of moving around touchpoint received 7.4, a climb from the previous year’s 6.8.

“When I accompanied my mother to Jurong Polyclinic for her first high blood pressure check-up in 2012, it was chaotic. We didn’t know where to start. I remember waiting three to four hours before we saw the doctor,” said Ms Suzana Md Salleh, a receptionist in her late 30s. “Then, we waited more than 30 minutes to collect my mother’s medication and another half hour or so to pay.”

Things were vastly different on her 62-year-old mother’s last visit at the same polyclinic in the middle of 2014. “I couldn’t go with her, so when she rang me, I thought she had lost her way. It turned out she had already finished her appointment, all within two hours,” said Ms Suzana.

MOVING, RATHER THAN REMOVING BOTTLENECK

But CSISG survey revealed that patients’ satisfaction with the medication collection and payment processes has declined. The satisfaction score for the waiting time for these two processes was 5.7 for medication collection and 5.9 for payment process.

Assistant Professor of Marketing (Practice) and academic director of ISES Marcus Lee said that the phenomenon suggested “the bottleneck was moved, rather than removed”.

“In redesigning an optimal service experience, it is often useful to introduce improvements at the tail end of your customer’s journey, and then work towards the start,” said Dr Lee.

“Doing so would allow the later parts of your process flow to better handle any increases in throughput due to improvements in the earlier parts of the customer journey.”

Mr James How Pow Aik, assistant director of clinic operations at SingHealth Polyclinics, attributed the bottleneck to the growing ageing population and an increase in chronic diseases.

According to him, 30 per cent of the patients at SingHealth Polyclinics are 65 years old and above. With the “increase in the prevalence of chronic diseases, the medication dispensing volume has also increased”, he said.

Initiatives such as the Pioneer Generation subsidies also contributed to the backlog. “The staff has to manage an increase in patient queries on the applicable subsidies and how they impact their bill size,” said Mr How.

“While there are designated counters to assist patients with billing queries, our staff continues to attend to simple queries before processing payment.”

To reduce the need to queue at the counters at SingHealth polyclinics, self-service kiosks are available for registering, and making payment and appointments, said Mr How.

While waiting to consult the doctors, patients can also make use of the time to have their height, weight and blood pressure taken by trained staff at health monitoring stations.
Over at the two SingHealth-managed hospitals, Singapore General Hospital (SGH) and KK Women’s and Children’s Hospital (KKH), the waiting time to collect medicine was less than 30 minutes in 2014, said Ms Isabel Yong, SingHealth’s director of group service quality.

One of the main contributing factors to the waiting time is that the pharmacists need time to ensure the patients understand the medication and dosage, especially for the elderly and those on multiple medication, said Ms Yong.

To address the waiting issue at the end of the customer journey, SGH and KKH have implemented several services, such as the Express Repeat Service. It issues a separate queue number for regular, repeat patients who don’t require the pharmacist’s counselling. “Patients are also given a phone number to call if they have any queries on their medication,” said Ms Yong.

Another time-saving initiative from SingHealth is the delivery of regular, repeat medication to the patient’s home for a nominal fee. At SGH, eligible patients can also pay a small fee to have medication sent to their nearest Unity or Watsons outlet for a more convenient collection.

To shorten the queue for making payment, the National Healthcare Group Polyclinics (NHGP), which runs nine polyclinics, has implemented self-payment kiosks that accept NETS, NETS Flashpay, NETS Cash Card and EZ-Link.

“We plan to introduce more user-friendly interfaces that also allow payment via cash and credit cards,” said Mr Ang Chee Chiang, director of clinic operations at NHGP.

“We also encourage both chronic and acute patients to make an appointment before they come to the clinic to minimise unnecessary waiting time.”

**SUSTAINING CUSTOMER SATISFACTION**

To achieve customer satisfaction in a sustainable manner, Dr Lee said that the key is to enable “customers to effectively make informed choices to self-select when, where, and how they choose to interact with companies”.

According to Dr Lee, waiting time in itself is generally not the real issue. “The real issue is an unexpectedly long waiting time,” he said.

For instance, if patients knew beforehand that a visit to the polyclinic or hospital would take two hours, they would only show up if they were able to spare the two hours.

He said: “As long as the wait is not unpleasant, they would generally walk away happy that they were able to get whatever they needed done in the two hours they allocated for the task. Customers who aren’t able to spare the two hours would decide not to show up.”

This report is a collaborative project between TODAY and the Institute of Service Excellence at Singapore Management University.