


04. RESULTS


- ✓ **Average Abandoned Rate**
Appointment Line: Improved from 29.0% in FY21 to **2.8%** in FY23
General Enquiry Line: Improved from 23.2% in FY21 to **4.8%** in FY23
- ✓ **Average Turnaround Time**
Emails: Improved from 6.0 working days in FY21 to **1.4 working days** in FY23
Referrals: Improved from 4.0 working days in FY21 to **1.1 working days** in FY23
- ✓ **Patients' Experience**
Post Call Survey: **4.74** out of 5.00 in FY23 (New KPI)
- ✓ **Staff Satisfaction**
Attrition Rate: Improved from 48.8% in FY21 to **27.3%** in FY23



05. LEARNING POINTS

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 - Comprehensive training and change management is essential.
 - Phased implementation facilitates smoother transition.
 - Continuous communication with the team is vital.
 - Celebrate success and learn from failures.
 - AI tools are necessary to "future-proof" against a shrinking workforce and amidst fierce competition for manpower (from within and outside the healthcare sector). It is anticipated that recruitment and retention of staff will continue to be a challenge.

03. SOLUTION

- i.  Implemented digital solution comprising of Telephony, Interactive Voice Response (IVR), Customer Relationship Management (CRM), Knowledge Management (KM), Performance Management (PM) and Live Chat.
- ii. Implementation was spread over three waves:
 - Wave 1 (May 2022): Ng Teng Fong General Hospital (NTFGH), National University Polyclinics (NUP)
 - Wave 2 (July 2022): Alexandra Hospital (AH), National University Hospital (NUH)
 - Wave 3 (Dec 2022): NUHS Live chat
- iii. Integration of four contact centres into one and offering a single point of contact for the public to access NUHS services instead of having to call 6 numbers before.
- iv. Introduction of three new roles to set up core training, analytics and tech teams in order to maximize the benefit of the digital solution.
- v. "Work From Home" (WFH) enabled allowing flexible work arrangement and BCP in a pandemic.
- vi. A simulation study (based on queue theory) was initiated with NUS Institute of Operations Research Analytics (IORA), part of NUS Business School. The aim was to establish a data-driven model to validate manning levels against incoming call patterns for optimal staff deployment to the voice channel. As calls remained a critical touch point (heavily dependent on human agents), there was a need to validate that GCC is operating optimally with the digital solution and existing FTEs.

02. PROBLEM/ BACKGROUND



a) Contact centre was an underinvested critical touchpoint. Systems were basic, sub-scale and antiquated compared with peers. Individual contact centres were functioning on its own resulting in inconsistent performance and patient experience was disparate and not synergized.

b) Contact Centre's Vision of Incredible Care was expressed as the following 4 imperatives:

- **Digital First Omni-Channel**
We will provide patients and caregivers an integrated, personal, consistent experience across digital and human channels
- **Self Serve**
We will drive self-serve and automation as first port of service and address remaining needs via human agent
- **Empowerment**
We will build a culture of empowerment and engagement by providing development and tools to serve
- **Operational Excellence**
We will leverage best-in-class performance management practices, data and technology to achieve aspirational targets



01. SUMMARY



NUHS is the first in Singapore's public healthcare sector to unify all NUHS institution contact centres into one using a common digital platform. Live chat is also provided as an alternative communication channel. Enabling "Work From Home" has allowed flexible work arrangement for the staff.