Operationalising Staff Protection in SingHealth

Ms Cass CHAY Jwee Cheong

Chief Operating Officer National Neuroscience Institute, Singapore

Co-chairman Anti-abuse Committee SingHealth



A ROUND TABLE TO TALK ABOUT

CONNECTING THE DOTS

ABUSE & HARASSMENT IN THE HEALTHCARE ECOSYSTEM



- Cass has served as Chief Operating Officer of National Neuroscience since 2021. In addition to this role, Cass also oversees the SingHealth Operations Shared Service -Workplace Safety and Health.
- Starting her 20-year healthcare career first as a data analyst at the Singapore General Hospital, Cass moved on to corporate roles such as Strategic and Performance Planning and assumed headship roles in Clinical Operations Management in Singapore General Hospital and Sengkang General Hospital.







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Ms Cass Chay

Chief Operating Officer, National Neuroscience Institute
Chief Operating Officer (Workplace Safety and Health), SingHealth
Operations Lead, SingHealth Staff Protection Office
Co-chairman, SingHealth Staff Protection Council



























Growing problem of abuse

'We're also humans': Healthcare workers face physical, verbal abuse in their workplace



A patient at Khoo Teck Pust Hospital threatened to strip healthcare assistant Marisol Zabellero Villabrille three months ago. Incression recognition

Mah Xiao Yu

UPDATED DEC 15, 2023, Trigg AM

SINGAPORE – Three months ago, a patient threatened to strip Ms Marisol Zabellero Villabrille, a healthcare assistant at Khoo Teck Puat Hospital.

She had to accompany him into the toilet as intensive care unit patients are not allowed to use the washroom by themselves. But he was uncomfortable with her presence and grew increasingly agitated.

After the patient's threat was issued, a colleague nearby intervened on her behalf and "scolded" the patient, and the hospital's security team arrived quickly to deescalate the situation by taking the patient back to his bed.

Definition of Abuse and Harassment:

Words, communications, actions or behaviours that are inappropriate, threatening and insulting, and cause healthcare workers to feel intimidated, alarmed or distressed

OPINION

Forum: Crack down on verbal abuse of healthcare workers

PUBLISHED: Feb 28, 2022, 2:00am

I read the report on front-line healthcare workers being verbally abused by anxious patients with sadness (Healthcare workers struggle as Covid-19 patients flood emergency rooms, Feb 25).

This pandemic brings out the best and the worst of people.

Many healthcare workers, especially front-line staff, have been receiving verbal abuse from patients and their families more frequently during the pandemic. I hope the public understands that the sheer rise in patient load from Covid-19 infection will affect the medical care of both Covid-19 and non-Covid-19 patients.

Manpower is further stretched by doctors and nurses testing positive for Covid-19.

Studies have shown that healthcare workers receiving abuse from patients or their relatives have poorer morale, poorer mental health, higher absenteeism and resignation, and poorer clinical outcomes.

It is high time the Government took an active role in cracking down on abuse of this kind.

Consider punitive measures such as imposing a fine or blacklisting abusive patients and relatives.

Desmond Wai (Dr)



THE STRAITS TIMES

PUBLISHED DEC 13, 2023

Healthcare workers need better protection from abuse; new measures in place by June 2024: Ong Ye Kung SINGAPORE - By June 2024, all public healthcare institutions such as hospitals and polyclinics will implement a new standardised framework to curb abuse of healthcare workers.

The framework, launched on Dec 13, includes a common definition of abuse and harassment, standardised protocols for response and measures that can be taken against abusers.

This comes after the Tripartite Workgroup for the Prevention of Abuse and Harasment of Healthcare Workers released its findings in March 2023, following a survey of more than 3,000 healthcare workers and 1,500 members of the public in the second half of 2022.

It found that more than two in three workers had witnessed or experienced abuse or harassment in the year preceding the survey. Among the affected workers, 75 per cent did not report the incidents, enduring the abuse in silence.

The workgroup comprises representatives from the Ministry of Health (MOH), Healthcare Services Employees' Union, public healthcare clusters, community care partners and private healthcare providers. Healthcare institutions should consider giving affected staff time off to prepare for and attend police interviews.

They may also guide and support staff who wish to lodge a magistrate's complaint or file a claim with the Protection from Harassment Court.

Necessary support such as medical treatment, reassignment of duties and mental health help will be offered to abuse victims, and such assistance should be extended to outsourced or contract-for-service staff who are working in the institutions.

Regardless of police outcomes and proceedings, healthcare institutions can also take concurrent and appropriate actions against perpetrators.

Depending on the severity of abuse or harassment, institutions may issue verbal or written warnings to perpetrators, disengage and bar abusive next of kin or visitors from visiting patients for a period of time, and refuse unreasonable requests.

Healthcare institutions can also discharge abusive patients who do not need urgent medical care and document the behaviour of recalcitrant abusers in their medical records so healthcare workers may take appropriate precautions.



"Healthcare workers need better protection from abuse"; "Medical staff should not be expected to tolerate abuse"

Health Minister Ong Ye Kung

For example, to protect themselves during an incident, healthcare workers can take actions like firmly telling the perpetrator to stop, activating security personnel or administering restraints on the abuser as a last resort.

Each public healthcare institution will have a staff protection team to oversee proper and fair reviews of all abuse and harassment incidents.

Victims are also encouraged to call the police if they are threatened with harm or injured.

SingHealth group CEO Ivy Ng said: "We value our patients who entrust us with their care, and our staff who give of their best every day. We strive to provide a healing and safe environment and to do so, it is imperative that we treat each other with mutual respect and kindness."



MOH & SingHealth's Efforts

AAC Co-Chairpersons

Ms Cass Chay Jwee Cheong

COO Workplace Safety, SH

Ms Christina Lim Poh Ying

CN, Crisis Planning and

Nursing Operations, SH

DEC 2023 APR 2022 APR 2023 JUN 2024 APR 2024 Tripartite Workgroup SingHealth Anti-Abuse Tripartite Framework Standardization of **Tripartite Framework** (TWG) formed for the **Committee (AAC)** published protocols, within **Implementation Guide Prevention of Abuse and** established to spearhead SingHealth to align to published **Harassment of HCWs** and operationalize a MINISTRY OF HEALTH **TWG Framework** coordinated cluster effort nentation Guide accompanying the Tripartite Framework for the Prevention of Abuse and Harassment in Healthcare against staff abuse and MOH TRIPARTITE FRAMEWORK FOR THE harassment by external PREVENTION OF ABUSE AND HARASSMENT IN HEALTHCARE perpetrators (patients, Staff Escalation Protection Workflow NOKs, visitors) in alignment Office **HSEU** to TWG recommendations A/Prof Phua Ghee Chee A/Prof Tracy Carol Ayre

SingHealth

SHS TWG Members

MOH & SingHealth's Efforts

APR 2022

APR 2023

DEC 2023

APR 2024

JUN 2024

Tripartite Workgroup (TWG) formed for the Prevention of Abuse and Harassment of HCWs

МОН

Public & Private Healthcare providers



SHS TWG Members

SingHealth Anti-Abuse
Committee (AAC)
established to spearhead
and operationalize a
coordinated cluster effort
against staff abuse and
harassment by external
perpetrators (patients,
NOKs, visitors) in alignment
to TWG recommendations



Ms Cass Chay Jwee Cheong COO Workplace Safety, SH

Ms Christina Lim Poh Yin CN, Crisis Planning and Nursing Operations, SH CN, SKH

Setting the stage for the Staff Protection Program

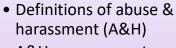
- · Senior management sponsor and champion
- · Group level Anti-Abuse Committee
 - Led by senior staff
 - Comprising mid to senior level staff from all institutions
 - TOR is to establish the basic elements of the Staff Protection Program based on the 3 pillars of Protect, Prevent and Promote
- Group and Institution level Staff Protection Office





PROTECT

Protect healthcare workers who face abuse and harassment



- A&H management strategy
- Framework for reporting and escalation
- Supporting structures and internal actions



Prevent situations that lead to abuse and harassment

PREVEN

- Measures to mitigate risk of A&H
- System of investigations, reviews and sharing of best practices
- Develop effective training plan
- Education to manage and avoid abusive situations



Promote positive relationships between healthcare workers and patients / caregivers.

• Define management's PROMOTE commitment of zero tolerance

- Develop effective communications plan to raise public awareness
- Educate staff and members of public on measures to avoid abusive situations



Harnessing representation from stakeholder staff groups across all Singhealth to kickstart institutions

PROTECT Leads

Clinician Nurse

PREVENT Leads

Clinician Nurse

PROMOTE Leads

Patient Experience WSH

- Define abuse and harassment in healthcare context
- Review, refine and develop the Staff Protection Program guiding policies and workflows
- Research and develop
 Training Program to
 manage abuse and
 harassment in
 healthcare context

- Communications strategy and plan for internal and external stakeholders
- Internal webpage repository of resources for SingHealth institutions.



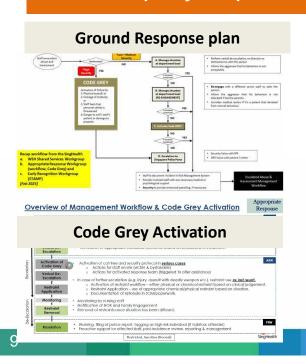
Harnessing representation from stakeholder staff groups across all Singhealth to kickstart institutions

PROTECT

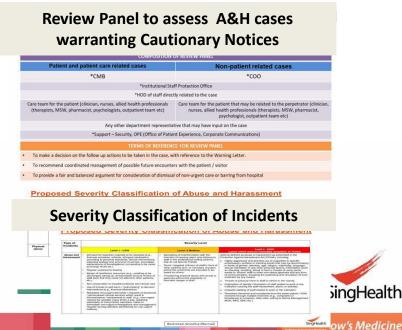
PREVENT

PROMOTE

Harmonised policy and practices to manage abuse & harassment (A&H) in SingHealth







Harnessing representation from stakeholder staff groups across all Singhealth to kickstart institutions

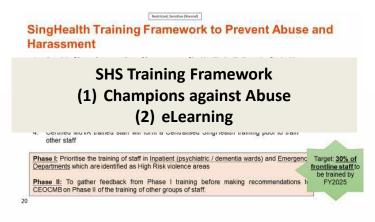
Protect

PREVENT

PROMOTE

Harmonised policy and practices to manage abuse & harassment (A&H) in SingHealth







10

Harnessing representation from stakeholder staff groups across all Singhealth to kickstart institutions

PROTECT

PREVENT

PROMOTE

Harmonised policy and practices to manage abuse & harassment (A&H) in SingHealth

Defining SHS Management Commitment to build a healing and safe place for both patients and staff



A central repository of materials and resources



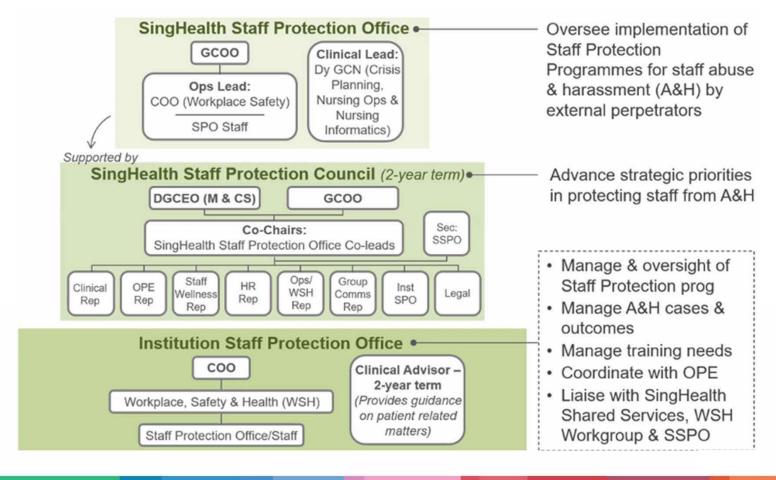
Communications Plan – EDMs published to guide our staff in managing difficult situations



Defining Tomorrow's Medicine

SingHealth

One Systemness: A holistic coordinated approach to propagate a cluster wide culture promoting staff protection





12

SingHealth Institutions' SPOs

Ops Lead
Cass Chay
COO (Workplace Safety)



Clinical Lead
Christina Lim
Deputy GCN (Crisis Planning,
Nursing Ops and Nursing Informatics)

Singapore General Hospital

Kam Wai Kuen Assistant Director



KK Women's and Children's Hospital

Moon Loh Assistant Director



National Cancer Centre
Singapore

Ken Tan Assistant Director



National Neuroscience Institute

Kelvin Chiew Assistant Director

Alternate: Tay Lee Lian



Changi General Hospital

Jacky Wan Manager



SingHealth Community Hospitals

Ricky Chan Senior Manager



National Dental Centre Singapore

Lim Kai Li Executive

Alternate: Chua Xiu Juan



Singapore National Eye Centre

Cheryl Ong Director

Alternate: Ng Siu Ning



Sengkang General Hospital

Jerry Quek Manager



SingHealth Polyclinics

Lucas Goh Deputy Director

Alternate: Dr Wong Wei Teen



National Heart Centre Singapore

Lim Chee Pheng Director



SingHealth HQ

Joseph Lim Deputy Director

Alternate: Cassandra Tan



Restricted, Sensitive (Normal)

SingHealth



Thank You

























