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 $Enjoying \ a \ delightful \ performance \ by \ our \ patient, \ Mr \ Mohamad \ Salleh, \ with \ our \ special \ guests \ at \ the \ opening \ ceremony.$



















Our patient, Mr Tan Hiong Leng, sharing a tender moment with his supportive wife as we recounted his recovery journey and thanked him for a being a good patient.





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VISION

TRANSFORMING CARE. BRINGING HEALTH TO EVERY HOME

MISSION

STAY WELL. HEAL. EMPOWER.

Providing integrated healthcare by working hand in hand with community partners, patients, caregivers and staff.

VALUES

INTEGRITY
PATIENT-CENTREDNESS
OPENNESS
EXCELLENCE





THIS IS THE STORY OF A COLLECTIVE VISION OF TRANSFORMING CARE AND BRINGING HEALTH TO EVERY HOME, A STORY HOW AN INCREDIBLE TEAM CAME TOGETHER TO BUILD A NEW HEALTHCARE CLUSTER WITH THE FIRST INTEGRATED GENERAL AND COMMUNITY HOSPITAL TO FULFIL ITS MISSION TO PROVIDE SEAMLESS CARE TO THE POPULATION IN THE WEST.



BUILDING A CULTURE OF CARE

LIM YONG WAH

Chairman of the Board



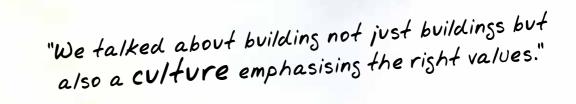
It was at a hawker centre in Jurong, six years ago when Wong Fook and I, the first two directors of the JurongHealth Board, met with Hee Jug, our CEO and Wei Keat, our Chairman, Medical Board. It was an opportunity for us all to get to know each other. We talked about what we would like JurongHealth to be as well as the kind of care we should bring to the community in the west. We later walked the vacant site and imagined what and how we should build the two new hospitals as an integrated project. We talked about the kind of integrated seamless care we should deliver – not just in our acute hospital but also in our community hospital and with other care providers so that our patients can receive the best and most appropriate care closer to home.

Little did we know how challenging and exciting the journey would be. As we strengthened the members on our Board and recruited a strong, dedicated and highly motivated team, what felt like a dream became reality. It was a wonderful experience working together, learning and discussing openly and making many decisions together. We shared the view that every person who comes to our hospitals must be treated with respect. We talked about building not just buildings but also a culture emphasising the right values. In healthcare, patients are likely to know much less than healthcare service providers and can be vulnerable due to their medical condition. We felt we must put in place systems and procedures that will not allow our people to take advantage of patients. Our patients must be the focus of our work.

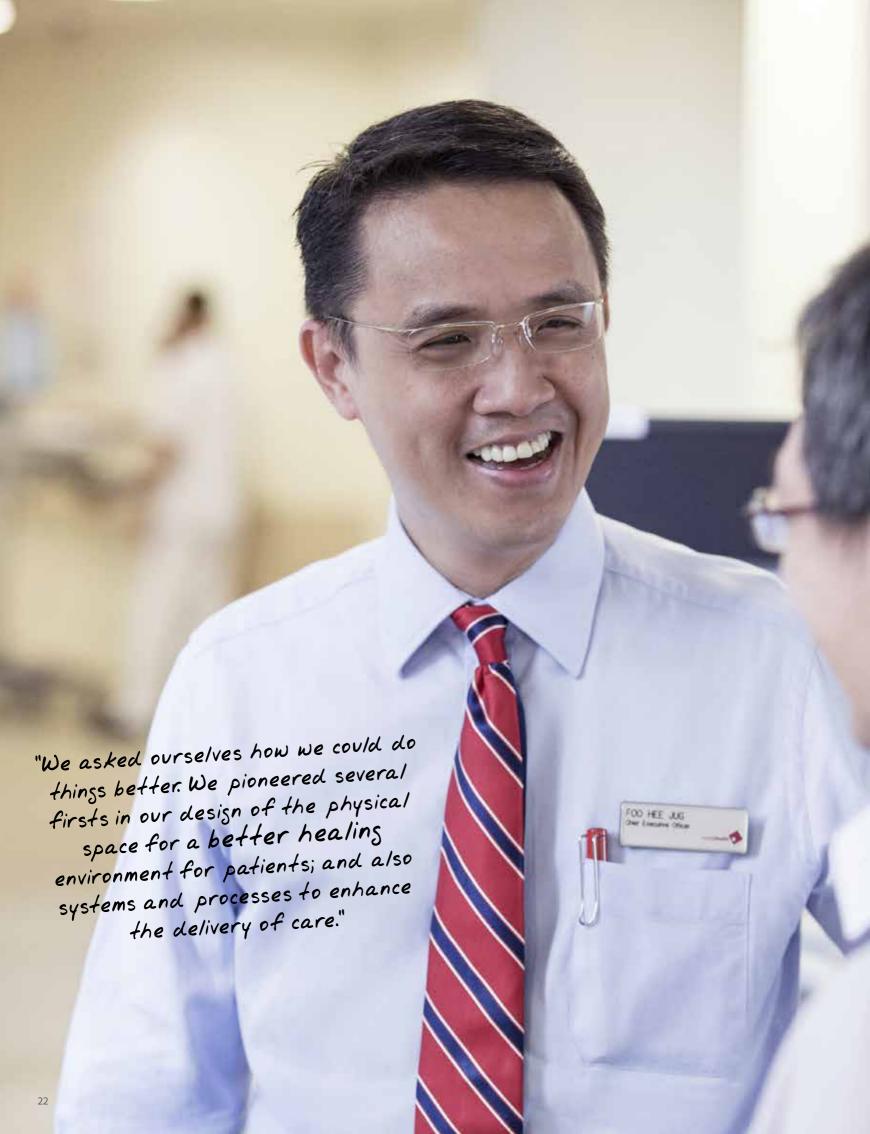
We must have a culture where our people would care for and do their best for our patients. I believe empathy does not come naturally to everyone. We must seek out people who want to empathise with others and to care for our patients. This is certainly easier said than done. We may be able to empathise with the suffering of a person once in a while, but what happens if this is a daily occurrence and when we have to care for many patients in a single day? If our staff do not have the right values and the commitment, they could end up looking at our patients not as persons but as diseases, medical conditions and statistics.

I remember walking closely behind one of our Allied Health therapists who was pushing an elderly man in a wheelchair. He appeared to have suffered a stroke and his speech was affected. He was saying something aloud but I could not understand him at all. She was listening intently and asked the man to repeat what he said. This was done with a smile that clearly showed she was trying hard to understand him and in a friendly way. She was kind and spoke softly. After the man's third attempt, she gave him a big smile and said, "Yes, we went there yesterday. We are not going there today." Our patient smiled, and the smile she gave him in return made him smile again. Watching them, I felt happy and thankful that we have such good people in our team.

Our values were crafted to guide and keep us on the right path. The values of integrity, patient-centredness, openness, excellence and mutual respect have become the very foundation of our people. We have been fortunate to attract people who believe and live these values – people with the heart, integrity, skills and an enthusiasm to improve the way we empathise with and care for our patients every day. We are happy to see how JurongHealth has shaped up and how Ng Teng Fong General Hospital and Jurong Community Hospital have become what they are today. I am proud of the JurongHealth team, of our people who are willing to see things from the perspective of our patients and their loved ones. We will continue to strive to do better.







AN EXTRAORDINARY JOURNEY

FOO HEE JUG

Chief Executive Officer



What can I say about our journey to Jurong?

For over six years, we dreamt, planned, designed, developed, piloted, tested, reworked, trained and worked really hard to build JurongHealth and our new hospitals from scratch. We made hard choices, battled steep learning curves, juggled multiple roles and pushed ourselves beyond our comfort zones. We did all these because we had a collective will and determination to build something great in Singapore's public healthcare system and to differentiate ourselves by the way we treat our patients. We set our vision to build an integrated healthcare ecosystem that is seamless, convenient, and with a focus on 'health care' and not 'illness care' - and one that truly treats our patients with dignity and compassion.

Indeed, this has been the most challenging and rewarding task of my career as a hospital administrator. Not many people have built from ground up, a single hospital, let alone plan, design and build two hospitals at the same time. Building not just the infrastructure, but a new team, new systems, new processes. To see this transformation from ideas on paper to actual patients being served by my colleagues in the new hospitals daily, and knowing that we are making a difference to our population is extremely rewarding.

It was also gratifying to see our people grow with us. Many left comfortable, established organisations to join what was essentially a start-up, an organisation with no history, a new team in Singapore's healthcare. Yes, it was a little messy at first, but we quickly got that fixed and thrived on the rare opportunity to create, and we did. We asked ourselves how we could do things better. We pioneered several firsts in our design of the physical space for a better healing environment for patients; and also systems and processes to enhance the delivery of care.

We started with an empty plot. We built our base at Alexandra Hospital. The journey has not been an easy one and the stretch to get to our new home in Jurong was particularly hard on everyone. But in those difficult moments, I saw the soul of our organisation. I saw a team-turned-family who reached out to help, encourage and go out of their way to support each other in the final lap to the finishing line. Success when achieved together was even sweeter. Of course, we have journeyed this far to reach a 'finishing line', only to be greeted by yet another new beginning in our goal as a regional health system for our population in the west.

Our story continues, and I am extremely proud to write and live each and every chapter of our journey with my JurongHealth family. The opening of the Ng Teng Fong General Hospital and Jurong Community Hospital during Singapore's golden jubilee is particularly special because we are part of the shine on our shiny red dot.

MY LEAP OF FAITH

A/PROF CHEAH WEI KEAT

Chairman, Medical Board



It was a leap of faith and the conviction to transform healthcare in Singapore that led me to join Jurong Health.

The idea at that time was unprecedented - to build an integrated healthcare hub from the ground up with a strong focus on patient-centred care. The idea to transform healthcare and empower patients to take better care of themselves was all very exciting for me; and it has certainly been life-changing.

We started to build the team, a diverse group of clinicians and professionals with different backgrounds and experience, drawn together with a common passion to work as one team to achieve the goal of building the most patient-centred facility and system.

Through it all, the most important stakeholder remained steadfast in our mind - our patients. We want our patients to have a good understanding of their conditions and to know the reasons why they are in a hospital. We want them to build a good bond with their doctors and other staff in the care team. We want them to know that we are here for them.

We were single-minded in designing our facilities to be patient-centred - in architecture, in the shared and centralised resources and systems as well as in the way our processes are structured. We set out to do just that so that we could be more responsive and provide an integrated spectrum of medical specialists who can readily deliver the right care and at the right place, with minimal movement and greater efficacy.

More importantly, this system is not just one that connects us internally but also one that is linked to the community it serves. We want to build bridges with the community, with General Practitioners and primary care providers. We want to start joining the dots in this spectrum of care so as to make healthcare more patient-centred, safer and of greater efficacy and quality.

Seeing the team come together to get this ambitious multi-faceted mission off the ground has been nothing short of remarkable. Watching our doctors, nurses, Allied Health Professionals, administrative and support staff move into these two new hospitals was most gratifying for me, especially after all the work we had put into commissioning the new facilities.

We may have finished building our hospitals, but the 'building' in other areas will continue as we strive to provide better services, better prevention programmes, better disease management models and better engagement with the community.



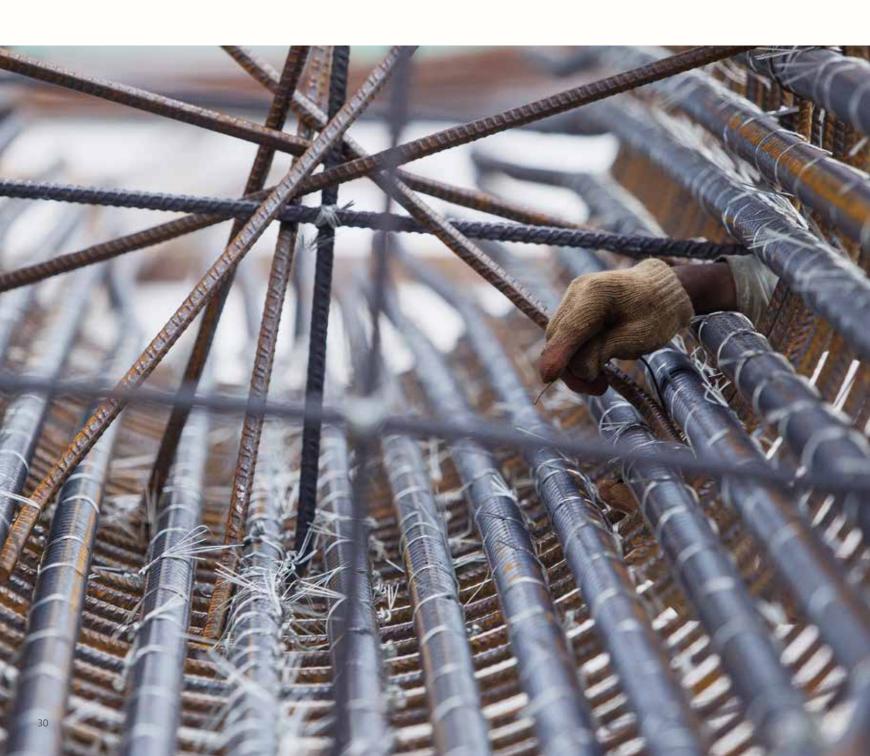
What does it mean to be patient-centred? We asked ourselves this question all the time, and concentrated our resources and efforts on building a care delivery ecosystem that provides holistic care around the needs of our patients and their loved ones. It took conviction, creativity and a concerted effort from every member of the JurongHealth family to put our patients first and always in our plans.

TRANSFORMING
CARE.
BRINGING
HEALTH
TO EVERY
HOME.

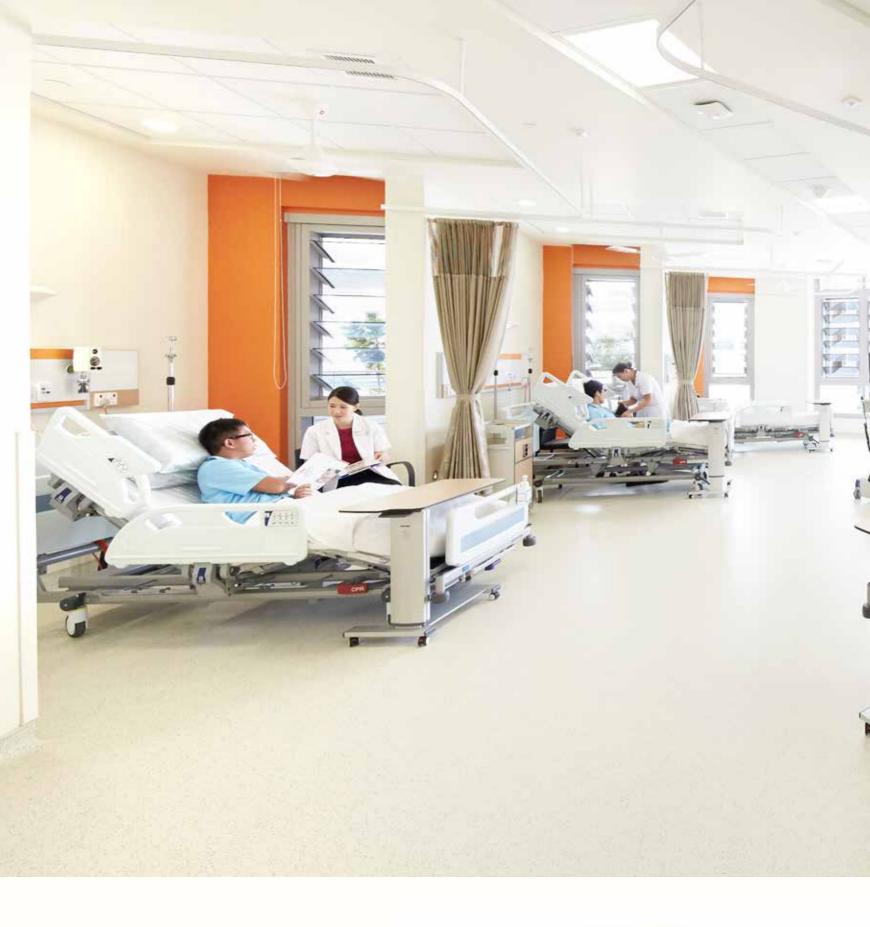


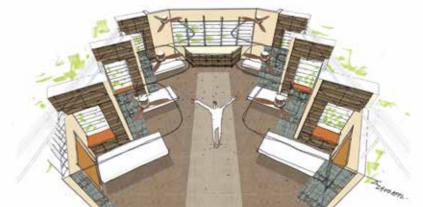
Jurong Health Services (JurongHealth) manages the new integrated healthcare development that comprises the 700-bed Ng Teng Fong General Hospital (NTFGH) and the 400-bed Jurong Community Hospital (JCH). Both hospitals were designed and built together to provide holistic and seamless patient care with greater efficiency and convenience.

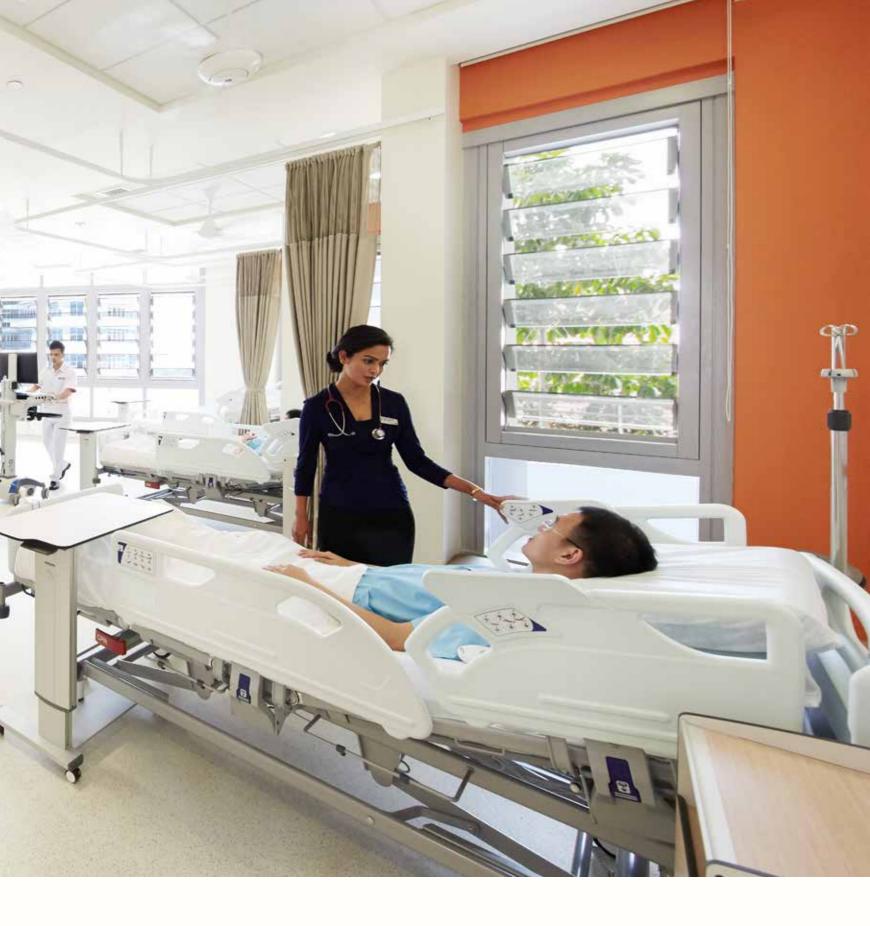
JurongHealth also manages Jurong Medical Centre and Lakeside Family Medicine Clinic in collaboration with a dedicated team of General Practitioners. With NTFGH and JCH as the anchor, community engagement and integrated health outreach efforts, educational programmes and screening initiatives collectively underscore our mission to work hand-in-hand with partners, patients and caregivers to help the community **Stay Well. Heal. Empower.**











A Window for Every Patient

The design of both NTFGH and JCH sets out and sums up our mission to serve the community with patients as the focus. This mission is embodied in our fan-shaped wards which provides a window for every patient at every ward, at every class. The design not only improves privacy, ventilation and natural lighting, it is also geared towards improving infection control for better patient comfort and recovery.

Integrating care through the spectrum

The co-location of JCH next to NTFGH allows for better coordinated and integrated care. Built together from ground up as one integrated healthcare hub, the twinned hospitals are designed to deliver seamless patient-centred, right-sited care that is co-managed by doctors from NTFGH and JCH. The proximity and dedicated links between the two also mean added convenience and safer transfer of patients from acute to post-acute care with shared facilities.

Within NTFGH, innovative and strategic spaceplanning co-locates the Emergency Department vertically with other critical care services such as the Intensive Care Unit (ICU), and Operating Theatres (OT) via dedicated trauma lifts. Related services such as Radiology, isolation wards, inpatient wards and more are also located close by to ensure swift and immediate care. NTFGH is also the first public hospital in Singapore to run a critical a care facility with a combined ICU and High Dependency Unit for one standard of care by a single multi-disciplinary team.

Empowering health and safety through IT

Leveraging IT to boost productivity and enhance safety for the benefit of patients, JurongHealth has adopted a fully integrated Electronic Medical Records (EMR) system that enables NTFGH and JCH to deliver seamless as well as near paper-less, filmless, chart-less, and script-less patient care. The EMR system streamlines and merges multiple aspects of clinical care documentation, delivery and reporting to facilitate information integration. Numerous other smart technologies also drive JurongHealth's patient-centred and operationally streamlined approach to eliminate manual charting, provide real-time information on patient and equipment movements, manage queues more efficiently and improve wayfinding. This effort was recognised when JurongHealth was awarded the HIMSS Analytics' EMRAM Stage 6 validation in September 2015.

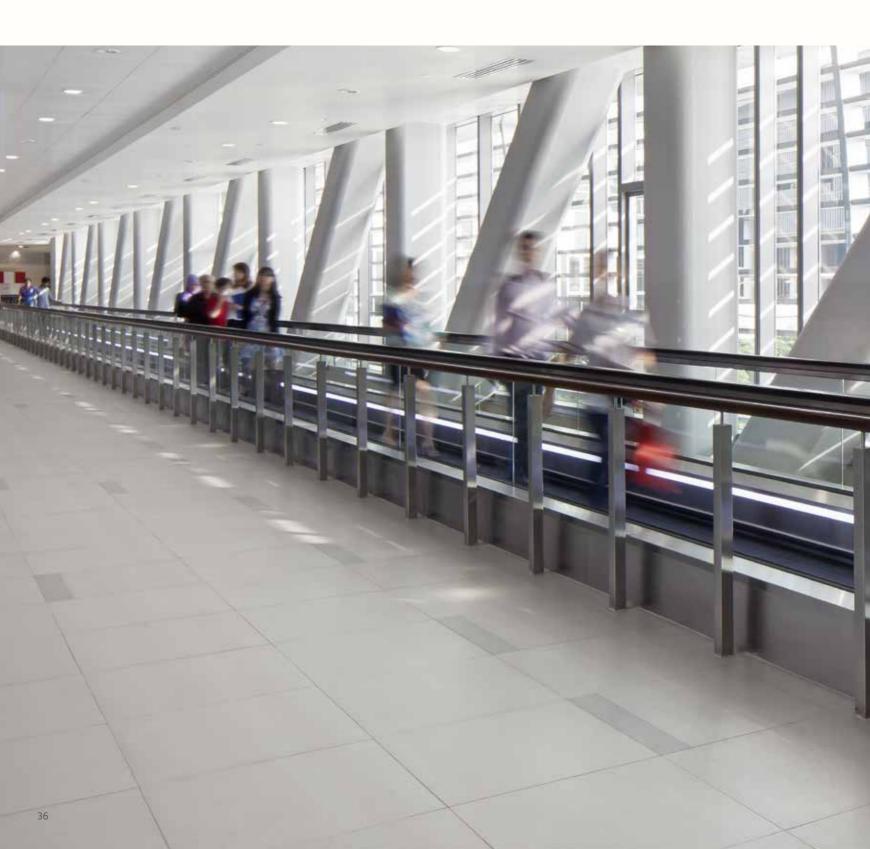




One Queue, One Bill, One Patient Experience

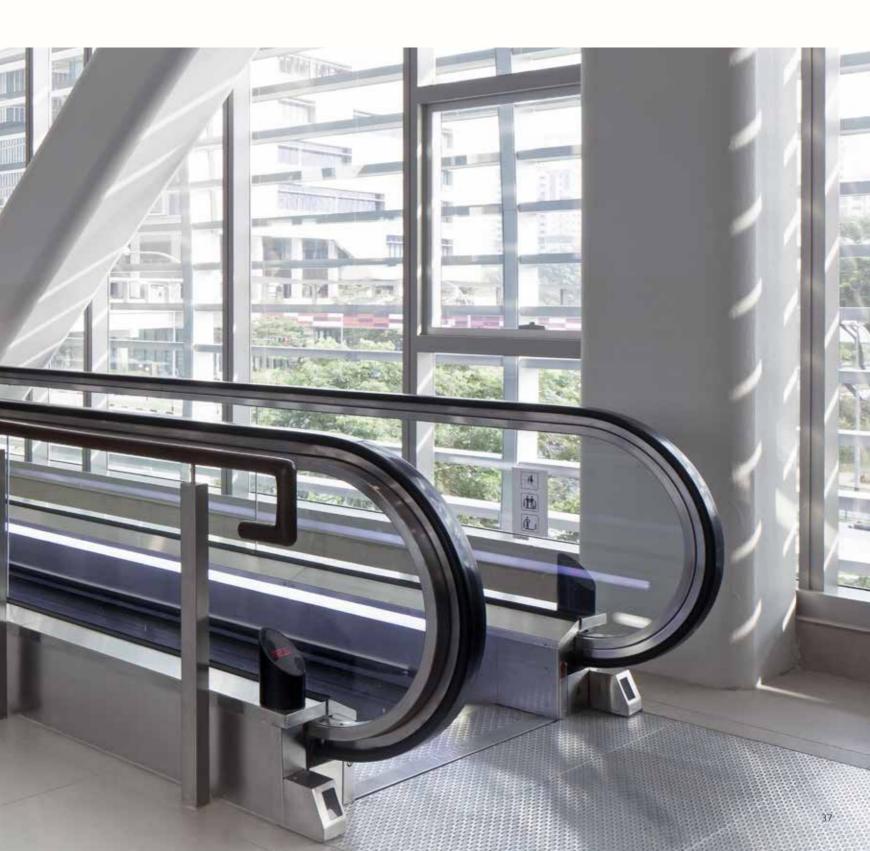
To improve convenience and shorten waiting times, outpatients at the Specialist Outpatient Clinics only need to register once at the start of their visit and use the same number at every clinic or service point during their visit. Payment for all services will be consolidated into a single bill.





Connected from within and to the community

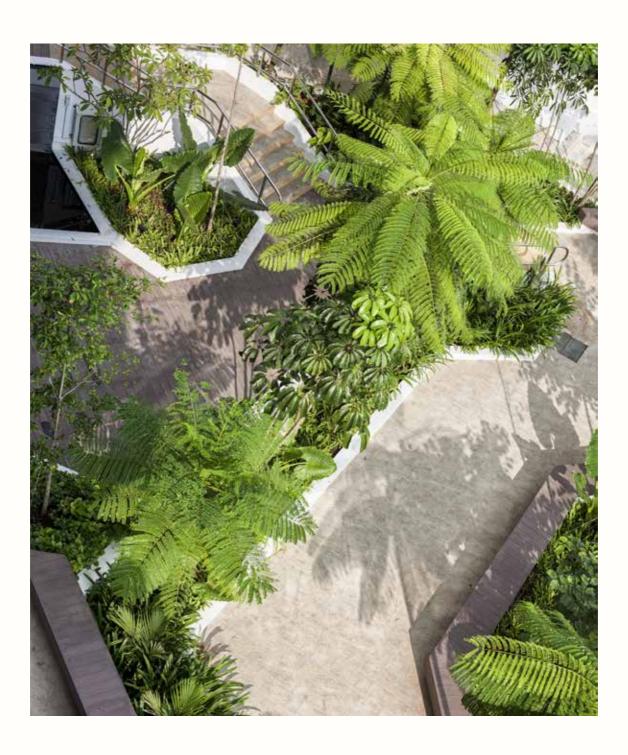
Both hospitals are easily accessible and connected to bustling Jurong East via sheltered link bridges to the MRT, bus interchange, business, retail, dining and entertainment facilities. The Specialist Outpatient Clinics are located nearest to the MRT and bus interchange for greater convenience for patients. In addition there is an internal network of link bridges that connects all three towers seamlessly.











Designed for sustainability

With 22,600 square metres of green areas as well as energy efficient and high performance facade with shading elements to reduce the heat and glare into the buildings, NTFGH and JCH have received the Building and Construction Authority's Green Mark Platinum Award for its sustainable and eco-friendly design. The hospitals also have 550 solar panels which provide the energy required for landscape lighting and make use of 30 per cent less energy and 22 per cent less potable water than other hospitals.

The challenge was building from ground zero. From an empty plot, we embarked on a vision to build two hospitals and three integrated towers, but one patient experience. Every detail, big or small, had to be thought through, worked on and carried out to make our dream, a reality.







A COMPLEX AND MASSIVE PROJECT



It has been quite an experience to see Ng Teng Fong General Hospital and Jurong Community Hospital take shape; transform from a two dimensional blueprint to a three dimensional superstructure, and finally to topping out and into reality.

Together with the architects and consultants, our team covered five areas - clinical spaces; design; mechanical and electrical systems; technology and master systems integration; and site coordination. As the key driver of the project, we were responsible for coordinating with all internal stakeholders, vendors, consultants, contractors as well as with colleagues from the different departments.

We served as an essential bridge to connect end-users and appointed consultants and contractors, to ensure that everyone is on the same page, from gathering requirements from doctors, nurses, allied health professionals and back-of-house operations, to translating these needs into the design of appropriate and functional work spaces. This deep and wide level of engagement took hundreds of meetings. It was a task with many challenges due to its size and complexity, even by industry standards.

Following the design stage, there was the detailed work of dealing with the day-to-day operations on-site, overseeing the construction, integration, installation and commissioning activities for both hospitals. The final stages were centred around ensuring the successful turn on of power, water and gas; making sure that the many mechanical and electrical systems work; monitoring defects and rectifying them; and coordinating the integration of IT-based systems before full dress rehearsals could commence.

We all rolled up our sleeves from day one. While it could be tough and frustrating at times, what saw us through was the support from each other and knowing that the end result would make a profound and positive impact on the community we serve in the west.

Hospital Planning Team









- 1 Envisioning the best way to care for the community in the west. Mr Lim Yong Wah (Chairman, JurongHealth Board) and Mr Low Wong Fook (JurongHealth Board member) had one of their early meetings with Mr Foo Hee Jug (Chief Executive Officer) and A/P Cheah Wei Keat (Chairman, Medical Board) at a hawker centre in Jurong, in 2009.
- 2 Watching our new home take shape from ground up.

PLANNING AROUND OUR PATIENTS AND OUR PEOPLE



Building a hospital from ground up is truly a unique experience. Imagine building two hospitals at the same time. The Ng Teng Fong General Hospital and Jurong Community Hospital project is a massive and complex project by any standards. With three buildings built over a land the size of six football fields, the scale itself poses several challenges. Adding to this the quest for cutting edge functionality throughout the hospitals that can withstand obsolescence, the task becomes phenomenal. It is only through an entire organisation's team effort, galvanised by management leadership, that a project of this scale can be accomplished, without compromising design goals.

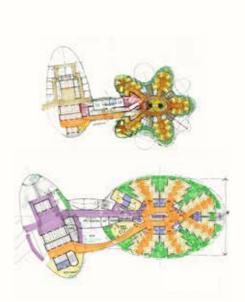
For instance, with evidence-based knowledge that ventilation is paramount to healing, the design of the ward tower is centred on providing a window for every patient, aided by a slender floor plate with north-south orientation to avoid direct sunlight and enhanced air movements. This benefit will be enjoyed by our patients in the subsidised wards which are not air-conditioned and which form 80 per cent of our beds. The design outcome that gave rise to the distinctive wave-like form of the towers is a testament to the courage and conviction of the organisation.

Our shared vision brought out the best in everyone and a strong sense of ownership. I found myself surrounded by colleagues who selflessly invested time and effort in setting up their respective departments, doing defects checks, commissioning work and participating in full dress rehearsals – going over and beyond their call of duty to ensure things worked smoothly when we opened. On the opening day (30 June 2015), strangely, I did not feel any big 'wow' moment. But as the days went by, I felt precious moments of satisfaction as I walked through the wards and overheard quiet murmurs of praise for the facility.

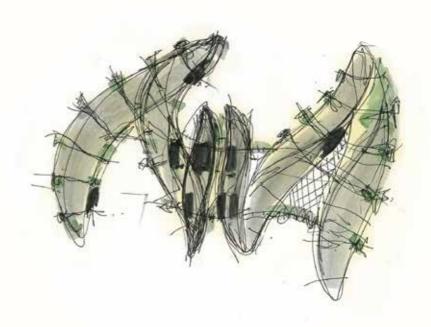
In all my years as a project manager, this project is by far the most noble, most ambitious, most humbling and most satisfying. Noble because, instead of the challenges of concrete, brick and mortar, what strikes me most is the fierce commitment of the organisation to put patients first, and have this ethos permeate all that we do. Ambitious for the high standards we dared to dream. Humbling in receiving the unwavering support of Senior Management, Board Members, all my other colleagues and, particularly, my Hospital Planning team, whose commitment was instrumental in the completion of the project. Finally, this project is most satisfying for me, not because of the obstacles we overcame, but how we did it together through trials and tribulations.

Tan Tai Soon





From sketch to reality - coming together to develop a sustainable, patient-centred design for Ng Teng Fong General Hospital and Jurong Community Hospital.



- 1 Architects from CPG Corporation and Quantity Surveyors from Langdon & Seah work on the design of the development.
- $2\,$ $\,$ $\,$ HOK (USA) innovating the concept design of the two hospitals.
- 3 Architects from Studio 505 (Australia) reviewing the masterplan design.
- 4 Main contractor, GS Engineering & Construction, together with members of the JurongHealth Board and Hospital Planning team.

















Members of the JurongHealth Board and Senior Management walk the site of Ng Teng Feng General Hospital and Jurong Community Hospital.





Turning on the water supply and air conditioning at Ng Teng Fong General Hospital, May 2014.











AN EPIC LEAP FORWARD



Data is the lifeblood of any medical organisation and a hospital's Electronic Medical Records (EMR) system is the neural network. Being a greenfield hospital, we were given an opportunity to assess the current EMR landscape. We decided to leverage on an integrated EMR which would enable us to deliver care seamlessly and safely. This required strong support from senior management and ground clinicians to drive the project from conception to 'go-live'.

As the first hospital in Singapore to use EPIC, in fact the first in Asia Pacific, we were entering a brave new world We had to create new interfaces so that our system could speak to existing IT applications at the national level. The aim is to create an integrated database and a unified patient record for our patients. We also had to work closely with our subject matter experts (the clinicians and users) to design the system so it would suit our purpose and fulfil best practice.

The system's inherent functionalities enable it to grow with our needs, which is important in our rapidly changing healthcare landscape. By building on a single integrated database, we can leverage on the information within to make decisions for a single patient or for population health.

The learning curve has been steep but the rewards have been worth the effort. This effort was recognised when JurongHealth was awarded the HIMSS Analytics' EMRAM Stage 6 validation just two months after 'go-live'. We hope to go for the final stage 7 certification in the near future by demonstrating how we have used our systems to effect better care for our organisation and patients.

Adj A/Prof Gamaliel Tan *Head, Orthopaedics* and Electronic Medical Records Team





BUILDING A FUTURE-READY IT SYSTEM



How far can you forecast the future to know where technology will take us and how it will be used?

When we were tasked to build the IT systems for the two hospitals, we had to 'dream' – to envision and to a certain extent, predict the way we would be able to leverage IT and ensure that we are building not a new 'old hospital', but a new 'new hospital' at the cutting edge of technology for the future.

This task took all of us out of our comfort zones and translated into thousands of hours of engagement with end-users such as doctors, nurses, Allied Health Professionals, logistics personnel, back-of-house operations, and many more to understand their needs, work flows, processes and preferred ways of using specific equipment. It was a mammoth task liaising with vendors, contractors, designing the architecture, formulating it into a Request for Proposal document, sourcing for the right solution, building the systems and then connecting the dots from within the system as well as across systems.



It also meant a lot of hands-on work, from defects checking and climbing ladders to access ceilings, to outfitting routers/readers and making sure equipment and cables were accessible and safely laid, and also adaptable for future expansion. All in, we built over 50 systems with at least 10 that were used for the first time in Asia, to integrate seamlessly into the overall IT infrastructure and create gateways to bridge and transfer the data to each other as well as the main Electronic Medical Records system.

Our work today is seen and flowed throughout the hospital frontline and back-of-house from the self-registration kiosks, visitor management terminals, warehouse management, pharmacy to the laboratory systems, etc. To say the work was extensive is an understatement. Throughout the six years of planning, developing, implementing and troubleshooting, we learnt and grew and most importantly, we collectively built a better and safer experience for patients.

IT Team

















Patients always come first. We strive to simplify and improve through an integrated care approach that bridges gaps and delivers a seamless and holistic patient journey.













DELIVERING HEALTH AND WELL-BEING

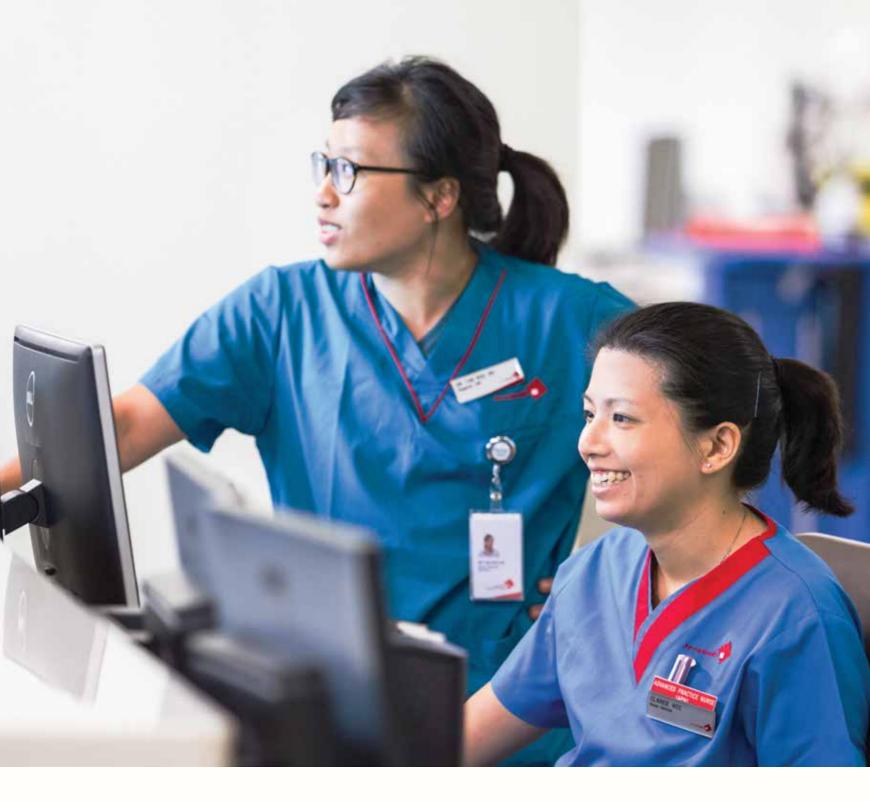


Oh, the stories I could tell about our journey as a team these past six years, from Alexandra Hospital to Ng Teng Fong General Hospital and Jurong Community Hospital.

Along the way, we gritted our teeth, fought, cried and even questioned why we chose to be a part of this ambitious task to build not one but two new hospitals. Despite the struggle, we, the Nursing family did not give up. We knew at the end of the day what we were working towards - a brand new day at our new hospitals and a brand new way of delivering health and well-being to every home.

We stayed the course, going over and beyond nursing, putting on hard hats and rubber boots to be planners, builders, contractors and vendors - all rolled into one! Days and even nights were spent defects checking, commissioning, floor scrubbing and transporting furniture. The hard work has been well worth it. To see our very first patients at our new home was indeed magical, gratifying, satisfying and humbling. We have certainly come a long way to reach the start of a new journey.

Madam Kuttiammal Sundarasan Chief Nurse



It has been eye-opening to witness what it takes to set up an ICU and one that shifts the paradigm of intensive care. Our integrated intensive and critical care service merges typically separate surgical, medical and cardiac ICUs and High Dependency units into a single service managed by a single multi-disciplinary team. This is a transformative step in ensuring full continuity of care in several new outreach efforts not typically done in conventional ICUs. For example, we continue to provide follow-up and interim care to patients who have been discharged to the general wards as well as those who have had tracheostomies (breathing tubes) inserted. These efforts mean we can flag issues, suggest care plans and be more thorough in closing the loop of care.

Clarice Wee

Advanced Practice Nurse, Intensive Care Unit

Emergency care is dynamic, ever-changing and requires us to be on our toes at all times. We underwent intense periods of brainstorming to come up with new processes and workflows to streamline care, improve multi-disciplinary collaboration and enhance response time - even putting ourselves in each other's shoes to come up with more creative solutions. We have trauma rooms that can be converted to accommodate large teams in the event of complex cases; as well as segregated sections to isolate patients in the case of pandemics, and an outdoor decontamination facility. We are also the first Emergency Department to be placed vertically adjacent to the Operating Theatres and Intensive Care Unit, connected via dedicated trauma lifts to transfer critical cases with greater speed.

Cheng Guat Hoon

Nurse Clinician, Emergency Department

Seeing the look on our patients' faces when they enter our wards for the first time – experiencing the wide corridors, natural light, window at every bedside, added privacy and breezy environment – brings to me a sense of pride. There is also pride in knowing that our mission of caring for and bringing comfort to patients can be better realised because we have very well-equipped wards. Our ward design aims to reduce their confusion and disorientation and thus improve their care experience with us. They can recuperate in a soothing environment with a window by their bedside and patients can receive better care with the strategically-located nursing stations, especially elderly and dementia patients. It is a reward in itself to care, serve and advocate for the elderly, the immobile and the sick, and definitely an added bonus to see patients grow stronger and healthier with each day.

Simon Savarimuthu Staff Nurse II, Ward B5







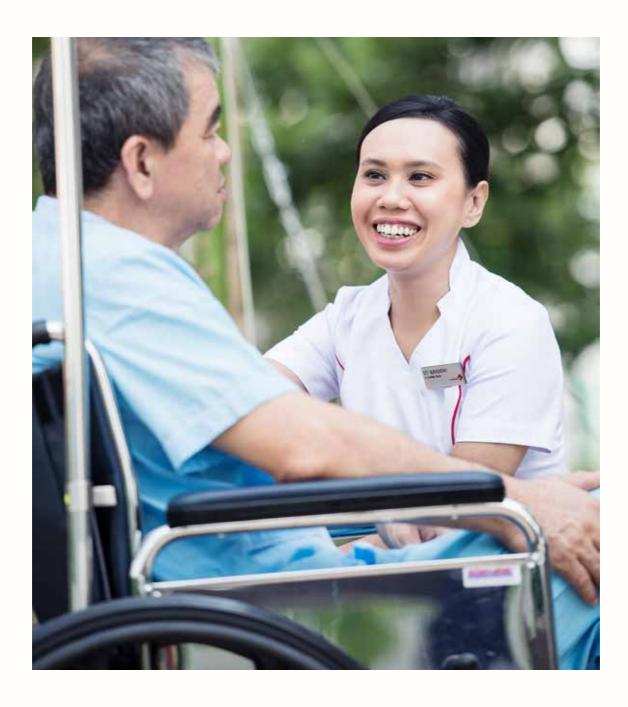


We want the best for our patients, to make their visits as pleasant as possible, to shorten waiting time while ensuring they receive comprehensive care. The Specialist Outpatient Clinics (SOCs) have been designed for efficiency and a streamlined patient experience. The one queue, one bill, one patient experience means they only register once at the start of their visit and get a single number for reference at each clinic or service point. Payment is consolidated into one bill at the end of the visit. For smoother patient flow, related services as well as satellite pharmacies are located on the same level to limit the need to travel to different levels for consultations, procedures and prescriptions.

Jasmine Goh
Principal Enrolled Nurse,
Cardiology Clinic

As a nurse who has worked in case management, I am gratified to be able to make an impact on improving the care for chronic disease patients, especially in the elderly. At Lakeside Family Medicine Clinic, we are the bridge between primary and specialist care. Patients with stable chronic disease come to us to manage their conditions, prevent complications and reduce their risk of re-admission to a hospital. As we are able to look after multiple problems, we can consolidate care for more convenient, holistic, and right-sited care. For example, we run Integrated Care Programmes as well as initiatives to tackle falls prevention and chronic disease management. I hope to continue to be an advocate for the elderly and chronically ill, and help them learn more about their conditions to stay empowered to lead healthier lives.

Lui Kok Wah Assistant Nurse Clinician, Lakeside Family Medicine Clinic



Care at a community hospital is very different from an acute hospital. The pace may be slower, but it is no less critical. Instead of dealing with acute illnesses, we focus on rehabilitation and preparing patients for discharge back to their homes and communities. This may mean educating them or their caregivers on self-care or sharing with them the importance of complying with their care plan and medication. Sometimes, all it takes is to provide a little companionship. To do this, we wheel patients to our healing garden or engage them in simple games to create an environment of comfort and care, while ensuring they are able to live safe, and independent lives at home. Seeing a patient come to us for care and later get back on their feet to return to their families in good health and spirits, is the most satisfying feeling in the world.

Siti Nurashidah

Senior Enrolled Nurse, Jurong Community Hospital







EMERGENCY CARE FOR OUR COMMUNITY



The design of the Emergency Department (ED) flows from several key considerations including serving the needs of our community in the west, to be future-ready for the changing dynamics of the population and bolstering timely response to mass casualty incidents, industrial accidents and trauma.

Every member of the department was empowered to share their ideas, design a space and shape the processes that would improve the way emergency care is delivered. We came together as a team. Our five years of shaping what we wanted for our ED was an exercise in problem solving involving empathy and creativity.

Many of the patient-centred features were the outcome of these deliberations - from the separate ambulance and walk-in entrances to prevent bottlenecks, to the seamless adjacent links to the Operating Theatres and Intensive Care Unit for swift access and response. The geriatric-friendly features to reduce disorientation and increase comfort were put in place with elderly patients in mind. To reduce waiting time and enable more efficient patient care, we also merged the typically separate steps of registration, nurse triage and consultation into a single step - right at the point when the patient steps into ED.

To see the clinical and service operations, clinicians and nurses, come together with a common purpose and working through an intense period of learning and training as one team, has been very gratifying. We were guided by a simple question, "Why are we here for?" and an even simpler answer - "For our patients". This has been the beacon guiding us to stay the course.



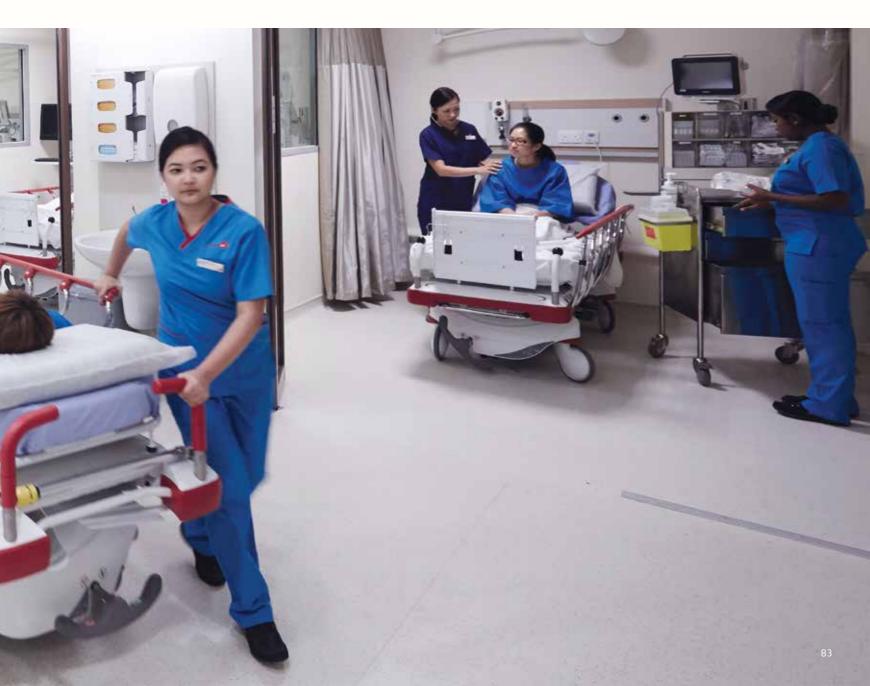


New Care Models

Bigger, more modular for greater flexibility and built for more efficient response, the ED has gone beyond offering quality emergency care by embarking on a holistic approach to provide post-emergency care to keep people from returning so that they can remain safe and healthy at home. This means more patient education and empowerment to lower the risk factors for ED visits with programmes like falls prevention for the elderly and greater engagement with General Practitioners as partners to care for the community. These are new but important concepts in emergency care to hopefully lower re-attendance and admission rates through personalised care planning for every patient. We are fully charged and geared up to care for our patients!

Dr Quek Lit Sin *Head, Emergency Medicine* and Emergency Department Team









A NEW FRONTIER FOR MEDICINE



This is our pioneer story. Many of us left our comfort zones and established workplaces to enter a new frontier with JurongHealth. We started from ground zero, and single-handedly built new services such as Dermatology and Rheumatology with very little resources and manpower.

We had to take over and run established wards when we assumed management of Alexandra Hospital (AH) with a far smaller team but greater workload as a start. Just as we settled into our roles and day-to-day operations, we had to take on a second, bigger, and more sustained challenge to plan for our two new hospitals.

It was daunting but exciting. This meant we could forge ahead to do the things we had always wanted to do but could not in established institutions. We literally had a blank slate to design the care that we wanted – in services, space and workflows – right from the start and not as an afterthought.

Seeing things from the patients' perspectives, we decided to co-locate related services and include other healthcare teams such as Allied Health within the division, to shape our integrated approach to disease management. We embarked on Integrated Care Pathways for a wide range of conditions, be it stroke, diabetes or chronic obstructive pulmonary disease.

We had the chance to truly shake things up, remove silos and integrate care. Looking back, we accomplished several coups. One was to 'let go' of our Medical Intensive Care Unit (ICU) and place it in the hands of our colleagues in the new integrated ICU. Another was to redesign many of our specialist clinic services such as Renal Medicine. Rheumatology and Cardiology.

Shifting our collective mindset to embrace more trust and grace, we are in the right direction to develop ourselves as a 'complete physician' who treats diseases holistically and comprehensively.

Building a hospital is more than putting together the physical building and infrastructure. It is about building capabilities and most importantly, about shaping a generation of clinicians to carry on our legacy and our vision of care.

When we started at AH, we agreed that one of our focus was to have greater interaction with medical students to impart not just skills but also values, insights and perspectives to shape them into more empathic, holistic and patient-orientated clinicians.

Clinical A/Prof Gerald Chua *Division Head, Medicine* and Medicine Team









ALIGNMENT OF INTENSIVE CARE PLANS



The scope of medicine today continues to diversify. Diseases are getting more complex, the population is ageing, and the need for comprehensive intensive care services has exploded in recent years. Hence our organisation has adopted a new model of care for our very sick patients.

We started Singapore's first single multi-disciplinary Intensive Care Unit (ICU) which groups all the multiple subspecialty ICUs under one roof - medical, surgical, cardiac and neurosurgical ICUs. This allows us to centralise key management functions such as admission, discharge and decision making, and better utilise resources through sharing of material, equipment and manpower. The other key feature of our model is that every room within the complex is designed to suit both intensive care and high dependency (HD) patients. For the patient, this eliminates physical transfers to different units when their condition changes, and the patient is able to continue to receive care by the same team till they are stable to be cared for in the general wards.

Our team of professionals - the intensivists, nurses, pharmacists, respiratory therapists, physiotherapists, dietitians, medical social workers- are specialised in intensive care and dedicate their clinical time primarily to the intensive care service. The design of the facility incorporates working spaces for everyone, and the work culture which encourages collegiality and open communication has integrated all of us into a big lovely family with a common goal of providing holistic care for every patient.

The road to this transformation has not been an easy one, but our common belief has steered us on this journey, and allowed us to break away from traditional practices. We did this with the conviction of a clear goa to provide a more holistic and collaborative model of care to benefit patients.

Dr Tan Chee Keat *Head, Intensive Care Medicine* and ICU Team





FROM HOSPITAL TO HOME: FULL SPECTRUM CARE



One of the most important aspects of this integrated development is the harmonisation of many processes and tight integration of care and services between the acute and rehabilitative care at both hospitals. The focus of medical care today is not only about tackling infectious diseases and acute illnesses but also about managing long-term care so that a patient does not merely survive an illness, but regains, as much as possible, functionality, independence and quality of life. This is where the the role of community hospitals become increasingly important – and in our case, the seamless integration of a community hospital with its acute-care counterpart.

Building both hospitals at the same time gave us the opportunity to ensure that the continuity of care is not only met, but achieved seamlessly for a patient to easily transit along the spectrum of care as their healthcare needs change. This has motivated us to design and build spatial links between the hospitals as well as shared systems and processes to optimise resources.

Teamwork in transition planning was key to our success. All operations and clinical teams were heavily involved in various committees and sub-committees, in weekly meetings, and at the final lead up to our move to Jurong. In preparing for the move, we were involved in commissioning activities such as taking over the building floor by floor, setting up the respective departments, inspection and rectification of defects, distributing the furniture and equipment, installing and testing specialised equipment and applications, full dress rehearsals and preparation for licensing and audit. New and existing staff were orientated to the new facilities and procedures, and training carried out in the use of new medical equipment as they are commissioned. It is really heartening to see our team overcome the many obstacles expected in such a massive undertaking and come this far! Across the whole organisation, we could see the same enthusiasm and commitment in our colleagues.

At Jurong Community Hospital, the focus is also on addressing functional, emotional, psycho-social and even financial needs. This means care is more holistic and multi-disciplinary. Beyond the patients, we will be engaging the caregivers to ensure that our patients are empowered with the confidence and know-how to return to their home as well as back into the community. Features that are built into the community hospital, including LIFE Hub Mobility Park and rehabilitation gyms embody the ethos of care which aims to prepare our patients for home and for the community.

We know this is only the beginning and that we will still have many challenging days ahead, but we like to view this positively as we know we are leaving a legacy and making an impact in patient care in the long term.

Dr Chua Chi Siong

Medical Director, Jurong Community Hospital

Ng Kian Swan

Assistant Chief Operating Officer (Service Operations), Ng Teng Fong General Hospital and Director, Operations, Jurong Community Hospital





- 1 Prime Minister Lee Hsien Loong and Health Minister Gan Kim Yong with the team at Jurong Community Hospital (JCH).
- 2 Unique to JCH, LIFE Hub is a mock-up of a three-room HDB unit that allows patients to practise caring for themselves independently under the supervision of trained therapists.



EXPANDING THE SCOPE OF PHARMACY SERVICES



The Pharmacy team started off as a very small team and only the core pharmacy services were provided when we assumed the management of Alexandra Hospital (AH). Although it was a small team with diverse backgrounds, we stayed close to our common vision, to transform care through the Regional Health System with the new integrated facilities as an anchor.

The past few years at AH have been challenging but exciting and fulfilling. It was challenging as we had two concurrent jobs – one was to provide a high standard of care and services to our patients; the other was to plan and prepare for the new hospitals. Despite the mammoth tasks ahead, the team grew from strength to strength, with advanced practices like the pharmacist-run ambulatory clinics being added.

Given the opportunity to plan from scratch, we were able to ensure that Pharmacy services are integrated across Ng Teng Fong General Hospital and Jurong Community Hospital. Outpatient pharmacy services are aligned across the facilities to ensure a seamless patient experience. Inpatient care processes are integrated for patients who need to move from one care setting to another. The retail pharmacies are carefully themed to ensure they meet patients' needs and are complementary to one another. There are also various improvements in the pharmacies and the way we provide care in the new hospitals, e.g. the use of pneumatic tube system for efficient drug transportation and barcoded drug unit-doses for precise dispensing.

We appreciate the responsibilities and empowerment that have been entrusted to us on this journey to make patient care better. We will continue to forge ahead and break new ground together as a team.

Kimmy Liew

Head Pharmacy

Quek Hui Chen

Head and Principal Pharmacist, Jurong Community Hospital

Muthukumaran Govindasamy

Principal Pharmacist

Saw Yik Chuen

Principal Clinical Pharmacis





STATE OF THE ART OPERATING THEATRES



As surgeons and members of surgical teams (nurses, operating theatre technicians, radiographers, etc) we enjoy and even embrace challenges. Being part of a team to build a new suite of operating theatres (OT) was certainly a mammoth task we tackled head on – and no doubt, our reputed 'thick skin' helped tremendously. With so many issues to overcome, numerous tasks to accomplish, and a multitude of details to look into, we simply dove in. There was neither time nor the luxury to stop and look back or regret any decision made.

Our first challenge was to 'sell' the vision of running the OT with a more efficient and safer workflow in a standardised layout and design. The second was to tackle the sheer complexity of integration and scheduling with numerous departments to achieve the goal of improved efficiency, quality and safety. In building from scratch, we capitalised on the opportunity of a blank canvas. Design-wise, we benefitted from the dedicated floor space and planned the layout of our OT so that everything was located on one floor and served by dedicated lifts. We were also able to build new IT systems into our workflows (and vice versa) so that our anaesthetists, surgeons and nurses have an array of computerised equipment – all highly integrated with our new Electronic Medical Records system – for better surgical management of our patients.

The number of monitor screens in our operating rooms range from a 'minimum' of seven to 15! All data and feeds gathered from the equipment can be routed to several screens at once, and even broadcast 'live' for teaching purposes. Apart from rooms with computer navigation equipment for precise minimally invasive surgery as 3D viewing capabilities, we also run a hybrid operating room that can do both surgery as well as angioplasty and stenting at the same time, which is especially useful to treat severely injured patients.

I am proud to have led a team who was fierce in their dedication to build a truly integrated 'state of the art'

OT complex.

Dr Fareed H Y Kadga
Deputy Head, Orthopaedics







NEW MODEL OF NEUROSURGERY SERVICE



Not everyone gets to be part of building two new hospitals and, certainly not a new Neurosurgery service, let alone one that is unlike any model in Singapore today. On my first day back at work after returning from my fellowship training in the United Kingdom, our Chairman, Medical Board, A/Prof Cheah Wei Keat, gave me a long list of people I had to meet to get things going. It was all quite overwhelming. My medical training scarcely prepared me for the daunting tasks ahead. I had to source and procure all the equipment, literally hundreds of items from the smallest cottonoid patty (specialised cotton dressings used in Neurosurgery) to the most ubiquitous such as dissectors, scalpels, sutures, drapes, operating microscope, image guidance system and even the operating tables. I confess that even as someone who loves the minutiae, I wanted to wave the white flag several times over!

But in all that mountain of administrative and preparation work, the opportunity was immensely gratifying. Seeing the Neurosurgery service develop to a full functional unit and also journeying with our patients as they get well from their illness or accident, makes it all worthwhile.

Putting patients first clarifies our priorities and everything will just fall in place. Looking back at the road travelled and the road ahead, there is a huge sense of pride. Our work is not yet done, and we will push on to grow our capacity and expertise.

Dr Low Shiong Wen





COOK-CHILL CHALLENGE



After 14 years as an Executive Chef in private healthcare, I left to join the public sector so that I could give back as well as to embrace new challenges. I recall the task that was given to me - to provide healthier quality meals at the same cost and with greater efficiency. That was certainly not an easy task but a challenge I gladly took on.

As the Executive Chef, I manage all aspects of kitchen operations for both Ng Teng Fong General Hospital and Jurong Community Hospital and I had to build a team from scratch, design a whole new kitchen and implement the cook-chill system - a first for a public hospital in Singapore. Using the system, we can prepare a large quantity of meals in advance and blast-chill them for safe storage.

When it is time to serve the meals, we can then efficiently focus on plating and sending the meals by automated guided vehicles to the wards in both hospitals to warm up and serve. Compared to the conventional cookand-serve method, this is a more cost and labour efficient approach that offers patients hot meals that are still nutritious and flavourful.

today, we still feel the same excitement when we walk in daily. It is a joy for our team to be given the privilege to exercise creativity in the planning and design of a central kitchen that allows us to create delicious and nutritious meals and play our part too, in nursing our patients back to health.

Richard Woo

Executive Chef, Food Service













A SEAMLESS PATIENT EXPERIENCE



Seeing the hospital open on the first day in June 2015 was very emotional for me. For almost 12 months, I swapped my pink uniform for the JurongHealth corporate tee-shirt with jeans, hard hat and rubber boots to work on site on commissioning work and defects checking. We must have covered at least four levels of the hospital's Specialist Outpatient Clinics and even part of the basement. It was hard work, I can tell you! I learnt more about puttying and sanding walls than I had when I moved into my first home. Although I fell ill through the arduous process, it's well worth all the effort. When I see patients come through our clinic door, learn how to use the self-registration system and share that their visits are pleasant and convenient, it makes me very happy. It's exciting to also know that here, we can do so much more to help patients, with our larger facilities, new IT systems and personalised service. It feels really good to have contributed in making the patient journey more convenient, seamless and hassle-free.

Roslindah Moktha

Patient Service Coordinator, Specialist Outpatient Clinics





TURNING MOMENTS INTO MEMORIES







Honouring our Service Stars.



We embrace each day with great energy, ensuring the best experience for our patients and their loved ones. Each of us cannot do it alone, but together, we can definitely make a difference through our attitudes and actions.

Service Quality Team

COMMENDATIONS FOR OUR STAFF

We want to recognise and acknowledge good staff and excellent service. Please let us know if our staff has left an impression on you.

I would like to nominate this staff for Service Ambassador Award.

Name of Staff: XII What Attended to me at

Department/Ward: Ward & Bed 29.

Describe your experience:

Turning Moment: Into Memories.

We know the little things can be infinitely important and make a big difference, so we take pride in making the patient journey a pleasant one. Be it a kind word, an offer of shelter in the rain, or checking in with patients well after they have been discharged, we know the attention to detail and the small gestures will bring us from great to excellent. Nothing gives us better satisfaction than seeing the smiles on our patients and their loved ones.

SWEAT STHE SMALL SMALL STUFF

THE JOY OF SERVING

As a patient greeter, I help with directions or with registration. Many times, I get asked other questions like "How do I get subsidised care?" or "How do I get a new appointment for the one I missed?" Some questions are not within my area of expertise, but I always try my best to help. If I don't know the answer, I will search and find out more. This is why, if you go through my pockets at the end of a work day, you will find scribbled scraps of paper (which I will later type into a document so that others can refer to it too). I don't mind the questions as long as I can help others as well as to serve our patients and visitors, and make their visit here a better one.

Anchammal V.S.

Senior Patient Greeter, Specialist Outpatient Clinics

As a volunteer, I am pleased to play a small role in giving back and to be part of the JurongHealth family, which has been so welcoming. In my green vest and 'happy volunteer' badge, I take great joy in being on the look out for visitors who might need my help - whether it is to direct them to the right place or to self-register at the visitor management kiosks to visit a patient. As a Jurong resident myself, I am grateful to have such a convenient hospital in the community.

Angie Ng

Volunteer, Friends of JurongHealth Programme





When I started working at JurongHealth in early 2015, it was still under construction and was very dusty and messy. But now when I see how clean and neat the hospital is, I am very proud of it – and I'm even more proud to continue to keep it new and clean. When I'm done cleaning the ground floor, I sometimes head upstairs to see what else I can do, like wipe some windows, clean coffee stains or tidy the offices. It's not much, but I am happy to do a little extra. After all, when you love your work, you want each day for things to be even better!

Mohamad Rafie Bin Ibrahim

Housekeeper, Operations Support Services





LET'S GET MOVING



We had so many heart-stopping moments and sleepless nights in the lead up to our final move to Ng Teng Fong General Hospital and Jurong Community Hospital. As the General Services team, we managed a wide range of behind-the-scenes services that people don't usually notice as the vital support for frontline operations. The biggest task was the massive coordination with all the departments to move a total of 170 offices to our new home.

From Alexandra Hospital, we carted some 10,000 carton boxes to 227 locations via a total of 187 trucks. All these in just 30 days! We were besieged with tight timelines, adverse weather conditions and urgent requests from departments. We had to execute the move while minimising disruptions to the ongoing commissioning works and full dress rehearsals at the new hospitals. Over at the new facilities, we also had to concurrently set up procedures for office space and meeting rooms support, retail space support, allocating phone lines for the entire organisation, and audio-visual equipment management.

In fact, this work will never stop as we continue to ramp up more areas in our hospitals. Needless to say, the opportunity to interact with a large number of our colleagues has allowed us to forge friendships and develop good connections along the way.

General Services Team



RE-DESIGNING THERAPY WORKSPACES



We took the chance to re-design our hand therapy tables to improve on the conventional rectangular table setting in most treatment rooms. To achieve a setting that is both ergonomic and wheelchair-friendly, we came up with the idea of a tri-petal table for us to sit closer to patients and still offer enough table surface area for both hands to be treated. A single therapist can also work with two patients concurrently. In addition, we integrated power sockets in the 'petals' to cater for multiple users and did away with dangling electrical cords for a safer environment.

Qiu Huaying

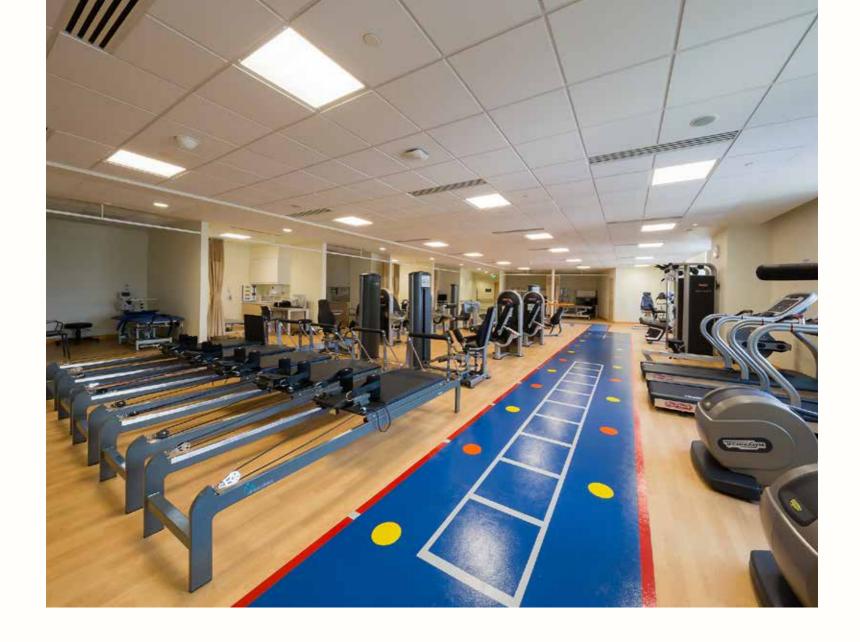
Head, Occupational Therapy

For greater patient convenience, we tapped on the modular form of our clinic floorplan to streamline our services spatially for voice, communication and swallowing consultations. Patients can now join a dedicated queue to reduce the waiting time to see their specialists. We also have the flexibility to re-configure our rooms to cater for more appointments.

Rick Kang

Therapy Associate, Speech Therapy





What stands out is the true multi-disciplinary spirit at JurongHealth where physiotherapists work daily in close proximity to clinicians, nurses and fellow Allied Health colleagues as part of the holistic care plan to give the best care.

Hermione Poh and Lim Kian Chong

Principal Physiotherapists, Physiotherapy

It has been exciting to witness the growth of the Podiatry Department from the "two-man show" it was five years ago when I first started at Alexandra Hospital, to the current team of 13. We went from making orthotics in a space the size of a small cupboard to a large custom designed workshop with sound proof walls and a state of the art grinder.

Nicolas Mcindoe

Senior Podiatrist, Podiatry

















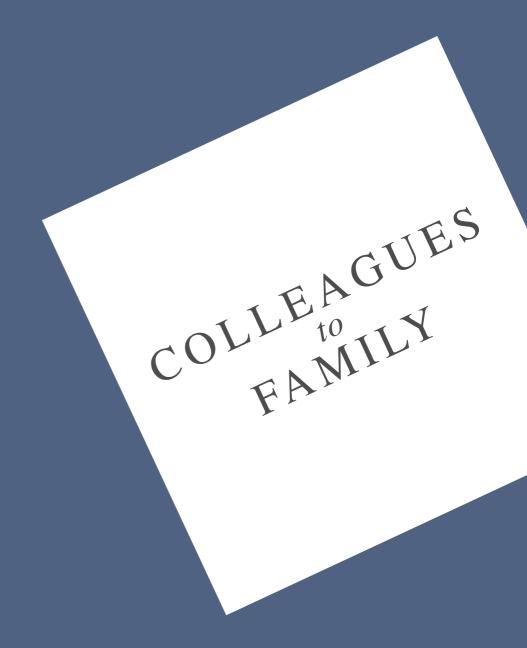


It has been both a challenge and an opportunity to seed the foundations for a green and healing environment at our two new hospitals. We have planted a variety of evergreens to create an interesting mix of skyrise greenery, including an interactive urban healing garden, with herbs and vegetables to activate the sense of smell and touch for Dementia patients. To pay tribute to the natural heritage of Singapore, we also created a Jelutong Walk, a garden path lined with Jelutong (Dyera costulata) trees. The Jelutong is a registered species on Singapore's Heritage Tree Scheme. As with all things, growth takes time. In the years to come, I hope what has taken root will grow and flourish into a uniquely green and lush landscape that can be enjoyed by patients, their families and the community.

Stella Khoo

Executive, Environmental Services

We brought to JurongHealth, our diverse backgrounds and different skills to serve, live the same vision and to serve one mission. Through this roller coaster ride of six years, we have built not one organisation, but two hospitals and more importantly, a family - the JurongHealth family.







HOME AWAY FROM HOME



The Health Promoting Health Services (HPHS) Committee was formed in 2010 to drive JurongHealth's goal to be a health promoting organisation. There are four key areas of focus – Patient & Caregiver, Staff, Community and Environment. To achieve our mission of Bringing Health To Every Home, we agreed that we must start with our own JurongHealth family. Thus began an internal movement to achieve health for every employee so we can give our best to every patient. This was guided by a four-pillar framework: Be Active, Eat Right, Think Positive and Appreciate Much.

The first step to healthy living is health screening, and to this end we have done well as a group. Staff have been very game with a good turn out for our annual screening exercise. The outcomes of screening help the Committee to target areas that require more attention and take appropriate measures. Our annual vaccination exercises allow us to keep staff healthy as well and the take up rate has been high.

Activities were developed under each of the four pillars. Be Active and Eat Right were the earliest to start. Activities such as 'Ride the Bike at AH' and 'Fun Fridays at 5' were well-received by staff and also recognised at the Health Promotion Board's Singapore H.E.A.L.T.H. Award 2015 and clinched us the Gold Award. We now have a Healthy Kopitiam right where we work, with choices for healthier foods made more affordable for all.

As staff became more involved in the work of operating Alexandra Hospital, building the two new hospitals and developing our community role, we saw more staff experiencing fatigue and stress. The HPHS Employee Health & Wellness sub-committee reached out to support fellow colleagues and developed programmes to encourage them to pen notes of encouragement and appreciation to one another. Our Medical Social Services colleagues also started a counselling service to offer private support sessions for staff. The Appreciate Much and Think Positive pillars were born during these trying times and again, staff have shared that they Appreciate Much these efforts that show JurongHealth cares!

Underlying the achievements made by the committee is a bunch of fun-loving, caring and passionate staff who go out of their way to organise events that appeal to staff. Over the years, we have seen much improvement in our staff health profile, and this brings great satisfaction to the team.

Health Promoting Health Services Committee



A SUPPORTIVE TEAM; A FULFILLING JOB



We journey with our patients and their loved ones as guides to connect them with the resources they need; from financial, emotional to community support, we help them navigate their way better within the healthcare system.

The work of a Medical Social Worker requires resilience, resourcefulness, good communication skills, empathy and most importantly, teamwork. Coming together to set up the medical social work functions at Ng Teng Fong General Hospital, Jurong Community Hospital and Jurong Medical Centre has been an invaluable experience – as we use this opportunity to build better relationships with patients and community partners as well as forge closer bonds with each other as a team. It was our 'trial of fire' as the learning curve was steep. But learning from one another and working together to tackle obstacles and develop new processes have certainly strengthened our Medical Social Services family too! Seeing the team step up to the challenge, supporting their peers, which included providing counselling to our own colleagues to combat fatigue, has been immensely heartening. As medical social workers, what we do goes beyond hard work. It is a whole lot of heart work as well.

Molly Koh

Head, Medical Social Services, Jurong Community Hospital

Steven Chua

Principal Medical Social Worker







MISSION POSSIBLE!



Overseeing hospital facilities from head-to-toe and everything in between, our team was responsible for the purchase and coordination of all Mechanical & Engineering systems, non-medical equipment and furniture for the different facilities in both hospitals. From storage cabinets, ladders, clocks and ironing boards to generator rooms, water tanks, lifts, airconditioning and lights, we did it all! The list also included patient beds, stretchers, bedside tables and cabinets. It was a daunting task that involved a great deal of juggling, complete with the immense pressure of a tight timeline, licensing and full dress rehearsals. This meant we had to think on our feet and work around obstacles daily, often for long, late hours and as a team to meet impossible deadlines. Looking back, the support we had for each other was what kept us going despite the hectic months. The whole experience has brought the team closer and we know for sure, that we can always depend on each other.

Facilities Management Team















WORK-EAT-PLAY



Through all the hard work of developing new systems, creating new work flows and moving towards a paper-less model for our new hospitals, friendships were forged. In the intense period leading up to the move, all of us had to work long hours with regular overtime to sort out the numerous aspects regarding transition such as new processes, costings for the new hospitals, training, user acceptance testing and scanning of documents into the new Electronic Medical Records system. It also meant spending a lot of time in each other's company: working, eating – and yes – complaining. With so many projects to juggle and on top of the day-to-day work at Alexandra Hospital, we had to be there for each other, covering duties, sharing jokes and occasionally letting loose with team outings. Through this process, we got to know each other really well, and learnt to work more cohesively as a team and be part of the JurongHealth family.

Finance, Business Office and Legal Team







THROUGH THICK AND THIN



15,000. That's the number of equipment our team had to specify, procure, receive and test. For almost three years, our team would eat, sleep and dream NTFGH and JCH equipment daily! There were times when we thought the work would never end, especially with the countless engagement sessions with users, negotiations, and challenges regarding logistics, coordination and storage. What got us through was our incredible team; although we were constantly caught up in situations where we had to improvise or work around hurdles. But the team simply pushed on. Credit too goes to users who were patient with us and accommodating the changes along the way. There have been times when our patience wore thin or when we had our disagreements, but these 'tumultuous' times have helped us to understand each other better, enabled us to grow stronger as individuals and collectively as one JurongHealth family. Apart from bonding over work, we also play hard together - we exercise, celebrate events, hold gatherings like annual Family Day barbeques and find the time to volunteer to help the underprivileged. These precious family-bonding moments have brought us closer and provided the much-needed boost to charge us up for the work ahead.

Biomedical Engineering Team









Creative 'kampung' spaces for staff to work and rest.



MILESTONES

2009 - 2015

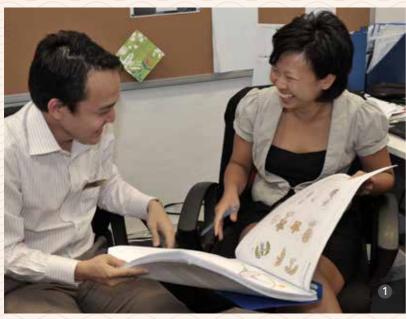
2009

1 AUGUST

Our pioneer team at Blocks 14 and 22, Alexandra Hospital (AH).

2 OCTOBER

The JurongHealth Board at the construction site of the future Ng Teng Fong General Hospital (NTFGH) and Jurong Community Hospital (JCH).









3 JUNE

Launch of JurongHealth's vision, mission and values – also our first anniversary.

4 NOVEMBER

Ground breaking Ceremony of NTFGH and JCH.







6 APRIL

JurongHealth assumes management of Jurong Medical Centre.

AH under JurongHealth's management, clinches 2nd spot in MOH's Patient Satisfaction Survey.

Launch of our Chronic Obstructive
Pulmonary Disease (COPD) integrated
care pathway – a structured
coordinated approach to help
patients with COPD across the
care continuum.

6 SEPTEMBER

Signing Ceremony for the commencement of the Superstructure phase of NTFGH and JCH.

JurongHealth Integrated Healthcare Hub Ng Teng Fong General Hospital and Jurong Community Hospital Keeping our Community's Health in Check 8 September 2012 Guest-of-Honour Mr Gan Kim Yong ter for Health



MARCH

AH under JurongHealth's management, emerges tops in the Customer Satisfaction Index of Singapore and achieved the most improved score among public restructured hospitals.



7 JULY

Bringing care even closer to the community with the launch of Lakeside Family Medicine Clinic, a collaboration between General Practitioners and JurongHealth.

8 JANUARY

Topping Out Ceremony of NTFGH and JCH on 20 January 2014

Topping Out Community Event at JEM.

APRIL

#1! Bagging the top spot in MOH's Patient Satisfaction Survey.













9 FEBRUARY

Obtained Temporary Occupation Permit for NTFGH Clinic Tower on 9 February 2015.

MARCH

Obtained Temporary Occupation Permit for NTFGH Ward Tower on 12 March 2015.

10 MAY

Making the big move from AH to NTFGH.

1 JUNE

Obtained Temporary Occupation Permit for JCH and the two link bridges to Westgate and Big Box on 5 June 2015.

Closure of AH on 29 June 2015, 5.30pm after the successful transfer of remaining patients to NTFGH.

Opening of NTFGH on 30 June 2015, 8am.







1 JULY

JCH commences operations on 22 July 2015.

SEPTEMBER

NTFGH Ceremony receives HIMSS Analytics EMRAM Stage 6 award, under two months after opening its doors.

10 OCTOBER

Official Opening of NTFGH and JCH by Prime Minister Lee Hsien Loong.



OUR STORY CONTINUES...

We have come a long way as ONE JurongHealth family.

It has been most exciting, with its fair share of challenges. We are happy to have settled happily in this neighbourhood in the west to start yet another exciting and fulfilling chapter.

This journey has built a bond that lasts.

Thank you for being part of our story.



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