

# Building a Patient Advocacy Network in an Asian Healthcare System to Enhance Patient Experience and Patient Safety

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## **ABSTRACT**

Patient engagement & partnership to improve healthcare and elevate the patient experience, can work well in a community in Asia, where patient partnership is a new concept. Using the development of SingHealth Patient Advocacy Network (SPAN) as the case study, the key factors for enabling the successful development of patient partnership and patient advocacy, are distilled. SPAN secretariat, together with the SPAN leaders, continues to seek further directions and to expand its work to elevate the patient experience, improve patient safety, amplify patient voices and to grow the body of knowledge on patient engagement and patient advocacy for the Asian community.

**Keywords:** *Patient partnership, patient advocacy network, patient safety, patient experience, patient engagement*

## **INTRODUCTION**

Patient engagement has long been recognised as an approach to improve patient experience, patient safety and healthcare. Hospitals and healthcare systems are increasingly engaging patients and family caregivers as partners in their design, delivery and improvement of health services.

The Patient and Family Advisory Council (PFAC) has emerged as a strategy for systematic patient engagement and a tool to elevate patient and family-centred care. It is a well-established approach in many healthcare organisations in Northern America, Europe and Australia, having proliferated in these regions since the 1970s. Patient engagement through PFAC has been recognised as a promising method to improve patient experience, patient safety and patient and family centred care [1]. In a 2018 report on PFACs in New York State Hospitals, it was found that hospitals with high-functioning PFACs reported lower rates of pressure ulcers, sepsis, septic shock, 30-day hospital readmissions, along with better patient satisfaction scores, when compared to hospitals with low-functioning PFACs [2]. A PFAC is generally composed of patients and family caregivers who have used the services of the hospital or health system. Through the PFAC, patients and families are engaged to share their lived experience and perspectives with healthcare providers. It provides a platform for partnership with healthcare professionals [3].

There are significant benefits to be reaped through patient involvement. It provides a richer insight and shines a deeper and broader light on problems and helps us to reframe issues for more amenable solutions. These potential solutions are also free from institutionally limited thinking – to ask “what if?” – which will widen the array of options for improvement and change. These changing relationship between the healthcare professional and the patient gives permission for others to explore and go beyond defensiveness. Individual benefits include patients feeling more confident, developing their skills and expertise while the healthcare professionals reconnect with their own humanity. The overall outcome is better quality decisions being made, restoring and enhancing the trust and confidence in the healthcare system. These benefits transcend individual projects, and can start a virtuous cycle of improving outcomes through co-creation of solutions by healthcare professionals, patients and caregivers working together.

In 2021, the World Health Organisation (WHO) made ‘Engage and empower patients and families to help and support the journey to safer healthcare’ as one of the 7 strategic objectives of the Global Patient Safety Action Plan 2021-2030 [4]. One of the 5 key strategies within this objective is to ‘build the capacity of patient advocates and champions in patient safety’. The strategy advocates instituting measures to fully engage with patients and families to enhance their opportunities to contribute to processes to improve patient safety’; and to ‘develop a strategy for involving patient safety advocates and champions as educators.’ Creating PFACs that are focused on patient safety is one of the recommendations.

## ***SITUATION OF PATIENT PARTNERSHIP IN ASIA***

While PFACs have grown in healthcare systems in Western societies, the story is different in Asia. In Asia, patient groups that are disease-based and independent of hospitals have been in existence in various Asian countries, including India, Philippines, Thailand, Japan, Taiwan, Malaysia and Singapore. However, PFAC in an Asian hospital or healthcare system remains a new concept.

The healthcare systems in most Asian countries are in nascent stages of opening to patient involvement in healthcare decision-making processes. It has been purely driven by the healthcare officers at the ministry and key physicians who might have not seen the value of the consumer’s (patient’s) involvement. Today, there are still physicians in practice that have the impression that patients are not able to comprehend the requirements of their own care; and what more; make decisions for other individuals in the same state of affairs. This is an assumption and a cultural hindrance to the development of patient involvement.

This assumption is also clouded by the fact that some countries in Asia with developing economies have issues such as illiteracy, poverty and affordability to deal with. These basic issues steer the patient away from getting involved in such affairs that take time away from their day to day challenges. The key issue on hand is stigma. This keeps them away upon diagnosis. They might come forth if the condition stabilises, if not it can be very challenging in most disease areas.

Historical cultural practices also govern patient involvement. In Asia, doctors are seen to be “superior” as they can “determine” the life expectancy of the patient. With that in mind, most cultures here let the doctors decide on the next steps for their treatment options. Cultural dominance is a big aspect of Asian culture. It can influence us to an extent that we underestimate. As patients, dealing with disease and coping with the daily challenges are by themselves uphill tasks. Many will go into recluse with their families to find an avenue for a better quality of life.

Therefore, advocacy and elevating the patient’s voice is a very new concept in this part of the world and in Singapore. The issues that have been dealt with have been very clinical and scientific for a long time. It is in recent times that the psychosocial dimension has been recognised as a key factor for progress in patient outcomes and caregiver support. In tandem, there has been a gradual shift in mindset towards patient-centered care and growing acceptance on the merits of patient engagement and patient advocacy in improving healthcare. It is within this climate that patient engagement and patient advocacy started to take root in Singapore.

## **PATIENT ENGAGEMENT & ADVOCACY IN SINGHEALTH**

SingHealth, Singapore's largest public healthcare cluster comprising 3 General Hospitals, 1 Women's and Children's Hospital, 3 Community Hospitals, 5 National Specialty Centres and a network of primary care polyclinics, has been adopting a patient-centred approach in healthcare through its patient experience offices and patient support groups set up across its network of 11 healthcare institutions. SingHealth is united by a common purpose, "Patients. At the Heart of all we do". It aims to ensure patients remain well-supported as they journey across the full care continuum offered by SingHealth. In continuous improvement and innovation, SingHealth has adopted a patient-centred approach by engaging patients and families in the co-creation process.

In 2017, SingHealth made a commitment to enhance patient engagement and give heed to the patient perspective in the organisation through setting up a patient advisory/advocacy committee, akin to the PFAC. The setup was named the SingHealth Patient Advocacy Network (SPAN). The organisation decided on a nomenclature different from Northern American hospitals. Instead of Patient Advisors, the term "Patient Advocates" was used as it preferred the more proactive meaning of "Advocate". The inception of SPAN within SingHealth was spearheaded by its SingHealth Duke-NUS Institute for Patient Safety & Quality (IPSQ), led by Professor Tan Kok Hian. Patient engagement (with empowerment and partnership) was seen as a key strategy for improving patient safety and quality. IPSQ identified two key partners, the Group Office of Patient Experience (OPE) and Group Nursing to form a guiding coalition, supported by the SPAN Secretariat.

While healthcare in Singapore has been increasingly adopting patient-centricity in the delivery of care for the past decade, setting up a patient advocacy group in a healthcare cluster, to bring patients and families to the table to improve healthcare, is a new step. Generally, healthcare providers are seen as the experts and patients defer to their advice and direction. There are concerns among healthcare providers that giving patients decision-making authority and roles could lead to confusion and unmet expectations. While patient engagement initiatives had been adopted by some healthcare teams in Singapore hospitals, structured patient engagement through a PFAC aimed at co-development of care and service is new. Introducing a PFAC is a major change, shifting the culture of receiving and delivering care.

It was a greenfield for the staff and the pioneer patient advocates, as PFACs and patient advocacy are new in Asia and Singapore. For both the patient advocates and staff, there were neither local reference points, nor Asian models, nor a structured system with effective patient engagement tools and training to harness the patient's voice and lived experience.

The SPAN Secretariat and founding Co-Chairs of SPAN (Ms Ai Ling Sim-Devadas and Mr Ellil Mathiyan Lakshmanan) took reference from online PFAC materials published by Northern American hospitals. This helped the team to structure its programmes and chart its development. Through partnership with the SPAN Secretariat staff and pioneer group of patient and family advocates, SPAN began to build its membership, programmes and projects. Since 2017, SPAN has grown from a 13-member setup to its current membership strength of 50 patient and family advocates, offering valuable perspectives and involvement in more than 100 projects.

Today, beyond participation in healthcare improvement projects, SPAN actively advocates for more patient engagement throughout SingHealth. SPAN amplifies the patient's voice through speaking engagements, such as talks and webinars with healthcare professionals. By contributing to the conversations on improving healthcare (e.g., through live-streamed panel discussions on topics such as "Patient experience during the pandemic", "Kindness in healthcare" and "Patient engagement in healthcare improvement") and being on the same platform as healthcare professionals, SPAN has helped change mindsets and positively impacted the involvement of patients in the decision-making process.

With a good headstart, SPAN Patient Advocates have since received frequent invitations to join various high-level hospital commissioning committees to provide perspectives at a strategic level, as well as judging panels of national-level awards and competitions such as the Singapore Health Quality Service Awards, Singapore Health Inspirational Patient & Caregiver Awards, Singapore Healthcare Management poster abstract competition and the National Dental Centre Singapore (NDCS) Director's Awards, to provide the patients' perspectives.

What is most significant is how PFACs and patient engagement (in the form of SPAN) have started to take root within SingHealth institutions. SPAN has demonstrated to the wider healthcare community in SingHealth how partnerships can be built with patients and families and how to co-create and co-develop solutions with patient advocates. This has led to the growth of SPAN@Institution in Hospitals and National Centres in SingHealth.

## **ROADMAP FOR BUILDING A SUCCESSFUL PATIENT ADVOCACY NETWORK – CASE STUDY ON SINGHEALTH PATIENT ADVOCACY NETWORK (SPAN)**

With the successful development of the patient advocacy network within SingHealth, in a country and culture where patient engagement is new, the authors have reflected and distilled the key factors for enabling its development.

### **1) Have Strong Leadership Commitment**

In any organisation implementing change, leadership buy-in and commitment is essential. This is key, especially when what is being introduced would radically impact the organisation's culture and work processes, as well as the healthcare team's relationship with patients and families. Strong leadership endorsement and commitment is, therefore, a critical first step for any healthcare institution planning to introduce a patient advocacy network in their healthcare system. Engaging patients and caregivers as key partners – with the strong belief by SingHealth leadership that this should be a key strategy for the organisation for building a robust safety culture, SPAN was born.

### **2) Get The Right People**

“People are not your most important asset. The right people are.” This quote by business guru, Jim Collins, hits the nail on the head on what is needed to drive a budding patient advocacy network. Having the right staff from the organisation to work on the endeavour, and recruiting the right patient advocates who will become the pioneer members, are key ingredients for a successful concoction.

### **3) Build a Guiding Coalition**

SingHealth teams from IPSQ, OPE and Group Nursing came together to shape the development of SPAN. The leaders of each department were appointed as Advisors to SPAN, with staff from IPSQ and OPE forming the dedicated SPAN Secretariat, which was important in driving the initiatives, work and activities that ranged from volunteer recruitment and management, to project development, staff outreach and more.

### **4) Start with a Dedicated Group of Patient Advocates**

It is important to begin with a dedicated group of patient advocates who are committed to the network's vision. Beyond the motivation and drive to achieve shared goals, this also helps to build trust with healthcare providers. SPAN started in 2017 with 13 members. To grow SPAN in the early days, recruitment for patient advocates was deliberate from the start, with the intention of bringing in members with the right attributes to contribute and support its growth.

Back when patient advocacy and engagement were new in healthcare improvement projects, it was important that SPAN members were able to champion the cause of improving patient experience and patient safety in meetings and forums, while at the same time, build trust with healthcare professionals in these partnerships. This means that it is crucial to be selective and recruit only suitable members with the right attributes that SPAN valued. These desired SPAN attributes (Table 1) are being Insightful, Motivated, Passionate, Adaptive, Confident and a Team Player (IMPACT).

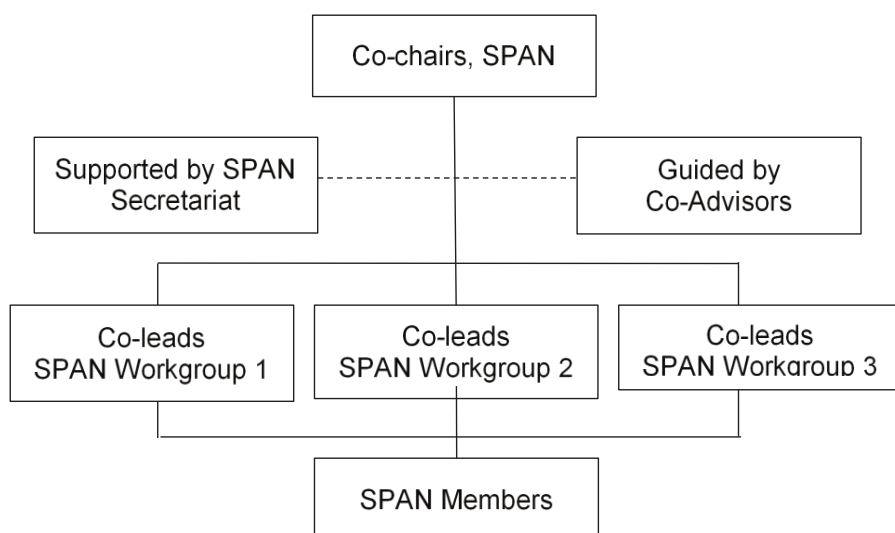
**Table 1 – Desired attributes of a SPAN Patient Advocate**

Attributes	Description
Insightful	Able to draw constructive insights from his/her own experiences to help others learn and improve
Motivated	Willing to listen and respect different opinions and perspectives
Passionate	Keen to improve the healthcare landscape in Singapore, which is aligned with SPAN's purpose
Adaptive	Sees beyond personal experiences and shows concern for more than one issue/agenda
Confident	Comfortable with speaking up in a group and interacts well with people from different walks of life
Team Player	Works well in a team; able to commit time to attend meetings and be involved in projects

The consensus among SPAN Advisors and the secretariat team was to ensure quality recruitment over quantity. We were mindful of the need to have members who can contribute confidently and constructively to projects and meetings at all levels in the healthcare institutions. As such, recruitment growth was kept slow and steady to bring focus to the building of relationships and competencies among members.

From the pioneer group, patient advocates with leadership capabilities were identified to serve as SPAN co-chairs and workgroup co-leads. This establishment of a leadership structure for SPAN was an important milestone for the development of SPAN (Table 2). Today, patient advocates continue to be recruited through referrals from healthcare professionals and patient advocates.

**Table 2 – SPAN Structure**



## 5) Promote Onboarding and Competency Development of Patient Advocates

While recruitment for members with the right attributes took care of having the right people, we needed to do more to onboard SPAN members, helping them to develop their skills and knowledge. This was essential especially in Singapore's context where patient advocacy is still a new concept.

To equip SPAN members with the right competencies, we (the authors of this paper and the SPAN Secretariat) developed the Patient Advocate Communications Training (PACT) Programme. A mandatory half-day workshop for all SPAN members, it aims to achieve the following learning outcomes:

- Understand the role and responsibility of a patient advocate in hospital workgroups and committees
- Recognise the opportunities and challenges as a patient advocate
- Learn to communicate the patient's perspective
- Acquire skills to build trust and manage difficult situations

Due to the pandemic, the PACT workshop was moved to blended learning in 2020 – a mix of asynchronous learning on the Learning Management System (LMS) before a Zoom Workshop for discussions and skills practice in communicating the patient's perspective, as well as communicating to build trust and manage difficult situations.

PACT is the foundation programme for SPAN members. We have since developed a Training Roadmap for Patient Advocates with workshops to build competencies in story-telling, design-thinking and quality improvement (Table 3).

**Table 3 - SPAN Development Roadmap**



## 6) Empowerment and Co-creation with Patient Advocates as the Guiding Principle

From the start, the Advisors and the Secretariat of SPAN were clear that empowerment and co-creation with Patient Advocates would take centre-stage in how SPAN would be organised. This guiding principle shaped the Network and demonstrated the style of engagement with patients and families that SPAN wants to introduce to the healthcare teams in their approach to healthcare improvement projects.

For the pioneer Patient Advocates, this guiding principle was based on openness and generous sharing, discussion and co-creation was empowering and encouraged many to participate actively to build SPAN and contribute to improvement projects. An example of the co-creation, was the Vision, Mission and Core Values for SPAN (Table 4). This was co-created with members in 2018 through a number of Visioning sessions.

**Table 4 - Vision, Mission and Core Values**

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**VISION**

Empowered patients. At the heart of quality healthcare.

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**MISSION**

To advocate partnership-in-care between healthcare professionals and patients to enhance experience.

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**CORE VALUES**

Compassion. Integrity. Collaboration.

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**7) Drive Culture of Patient Engagement Through Communication and Hard-wiring Processes Within the Organisation**

In driving a culture of patient engagement, the Secretariat and SPAN adopted a two-prong approach through communication with healthcare teams and embedding processes that encourage patient engagement.

**a) Reach Out to Healthcare Teams**

Reaching out to healthcare teams to communicate the need for patient engagement and how SPAN can help to improve healthcare processes and experience is key. SPAN had to be introduced to the healthcare teams in SingHealth institutions. This was done through sharing at various stakeholders' and partners' platforms within SingHealth and its institutions. The mission, vision and expertise that SPAN brings were communicated at these platforms. Pilot projects were taken on to create the opportunities for SPAN to collaborate with healthcare teams. In the process of collaboration, it provided an excellent platform for exchanges and learnings, where both parties brought their perspectives in achieving a common goal to enhance safety and quality of care, as well as overall patient and staff experience. The learnings were shared and best practices spread.

The genuine communications and many conversations between healthcare teams and SPAN have brought trust and good word of mouth. This helped SPAN reach out to more healthcare teams since its establishment in 2017. Requests from healthcare teams to partner SPAN have gained good momentum and in the right direction, where SPAN at SingHealth will support the setting up of SPAN at each of its institutions, in the next few years. The SPAN model successfully implemented at the cluster level will be spread across its 11 institutions, where membership from institutions will grow to support institution specific improvements and the community of advocates coming together to share learnings from within the healthcare cluster.

**b) Embed Processes that Encourages Patient Engagement**

To hardwire the need for patient engagement and patient perspectives in healthcare improvement projects, patient engagement is included, for example, as a criterion in the annual SingHealth Duke-NUS Quality and Innovation Day Poster Awards where healthcare teams who partnered patient advocates, patients and families in their improvement and innovation journey are recognised at this cluster event. In embedding patient and family engagement in healthcare improvement, a project matching feature will be embedded in the SingHealth Improvement and Innovation Portal (SIP). SIP will be the one-stop improvement project registration and ideas generation portal for healthcare teams to register their projects, source for ideas and indicate their interest in partnering with SPAN. Resources on patient engagement strategies will also be shared via this portal, including the "Engagement Toolkit with Patients and Families for Healthcare Improvement Projects", co-developed by SPAN and staff from SingHealth Innovation Office.

Adopting a structured methodology where both healthcare teams and patient advocates are equipped with common knowledge and tools such as Quality Improvement and Design Thinking for continuous improvement, will enhance the partnership experience. Healthcare Quality Improvement and Design Thinking workshops are conducted for both SPAN members and healthcare teams within SingHealth institutions. Patient feedback provides insights and when studied add great value to improve healthcare experience and safety. Hence, it is important to constantly review processes through feedback loops. The support from OPE and IPSQ enables SPAN to gain insights into patient feedback, where key issues are often discussed at SPAN Annual Think-out

sessions to determine the key areas to work on. Tapping on technology as an enabler in gathering and analysing feedback, crowdsourcing of ideas, sharing of best practices and challenges are key to successful patient engagement and co-creation of value.

### 8) Develop Meaningful and Impactful Activities and Programmes for Patient Advocates and Healthcare Staff

Above all, in all we do, the activities and projects driven by SPAN must be relevant and meaningful to the patient advocates and healthcare staff. It must benefit both parties (Table 5). What that means, is what we do, must contribute to improving patient experience and patient safety as well as demonstrate partnership with healthcare teams through thoughtful consideration of their needs and priorities too.

**Table 5 – Meaningful Activities**

<b>Activity</b>	<b>Description</b>	<b>Objective</b>
The Plain Language	150 commonly used medical terms and jargon into layman terms	To improve communication between healthcare professionals and patients by “speaking the patient’s language”
Engagement Toolkit with Patient & Families	A guide to engaging patients and families for healthcare Improvement Projects	To demonstrate the steps to include patient engagement in healthcare improvement Projects.
Partnership with healthcare teams during COVID-19	Recruit volunteers from the public to act as translators for affected migrant workers posters, flyers and videos to allay concerns of foreign workers	To encourage and provide support to healthcare staff and migrant workers during COVID-19
COVID-19 Patient Survey	Survey among patients and caregivers. Followed by focus group discussion to deep dive into specified topics	To provide insights of patient experience during COVID-19 and propose actions to address identified gaps in healthcare facilities
Be Kind to your Healthcare Team	To have patients and families express their thanks and appreciation after interaction with healthcare workers	To encourage patients and families to be kind to healthcare team at the point of care
PEx Talks	Patient Experience Talks at various healthcare institutions’ events	To share the voice and stories of patients and also to raise awareness of benefits of harnessing patient perspectives
Events & Webinar	As speaker, panellist or part of judging Panel	To share and raise awareness of patient perspectives
Healthcare Improvement Projects	As project members	To provide input from user perspective and serve as a sounding board
Healthcare Commissioning Committees & Workgroups	As members	To provide input from user perspective and serve as a sounding board



## 9) Make Patient Advocacy Fun!

Finally, because patient advocacy is a collective of patients, families and staff coming together to make healthcare better, it is important to make it fun. Only then can barriers be eliminated so patients and healthcare providers can share freely and build on one another's ideas. We also recognise that SPAN members are volunteers who contribute actively because they find meaning in improving healthcare, while at the same time, enjoy being part of a friendly community of patient and family advocates.

In making SPAN fun, we found that the following work well:

- Informal networks through WhatsApp chat groups help to build bonds. Secretariat staff are part of these chat groups and participate actively with members.
- Lunch and Coffee Chats, especially over a shared love for favourite food. For the SPAN Co-Chairs and Secretariat - it was Prawn Noodles (!)
- Regularly reaching out to members, maintaining friendship - The Co-Chairs and Co-Leads of SPAN regularly reach out to members assigned to them as part of the Buddy system. This was important especially during the pandemic, when we stopped meeting face-to-face.
- Annual Year-End Party where SPAN leadership, advisors, secretariat, members and partners celebrate the contributions and experiences in improving healthcare for patients and healthcare teams. It is also an opportunity for everyone to get together and bond.
- Most importantly, the SPAN Secretariat and Leadership practise a generous, inclusive and open approach which engenders fun at work!

## Outcomes

SPAN has been actively involved in projects with healthcare teams from the various institutions in the healthcare cluster. Although effective outcome measurement will require more time for co-created solutions which were implemented, there has been increasing calls for SPAN to be involved in projects at all levels. From January 2018 - December 2021, SPAN had been involved in 105 projects (see examples in Table 6)

**Table 6 – Some Examples of Projects**

S/N	Project Title
1	Consultation on Informed Consent from MOH
2	COVID-19 Translator by SPAN and Changi General Hospital
3	Mobility-X FGD by SGH Division of Organisation Planning & Performance
4	National Dental Centre, Singapore Chatbot
5	Consultation by MOH Health Regulation Group on Consumer Education Strategy
6	Ministry of Health, Singapore Focus Group Discussion
7	IBM Design Thinking Workshop & FGD for ECC & NDCS by SingHealth ECC & NDCS Planning Team
8	Future Outpatient Journey Taskforce by SingHealth Marcoms
9	Elective Surgery Taskforce by SingHealth Office of Strategic Management
10	Singapore General Hospital Business Office service transformation
11	Consultation on Patient Education Material by National Cancer Centre Singapore
12	Feedback for Informed Consent Forms by Singapore General Hospital Obstetrician & Gynaecologist
13	Patient Management IT System by Integrated Health Information Systems Pte Ltd (IHIS)
14	SPAN Initiated Survey on COVID-19 experience

15	SingHealth ARTpreciate Wellness Application
16	Redesign of care process and the environment - Bright Vision Hospital
17	Singapore General Hospital Emergency Medicine Building Commissioning Committee
18	National Heart Centre, Singapore service vision and service values
19	Blueprint of patient journey by Singapore General Hospital & Public Service Division
20	Elective Care Centre & National Dental Centre Singapore (ECC & NDCS) Commissioning Committee
21	Reading Materials on iPad for Patients in Isolation Ward at Singapore General Hospital.
22	Improving the Adoption Rate of Electronic & Mobile (E&M) Appointment transactions in National Cancer Centre of Singapore
23	Community Care Facility 14-day Patient Activity Itinerary by SingHealth Group Office of Patient Experience
24	Focus group discussion by Ministry of Health, Singapore
25	National Dental Centre, Singapore Chatbot Trial 2.0
26	My SurgeryApp, Singapore General Hospital
27	Information pamphlet on pregnancy and radiological examination scheduling by Singapore General Hospital Division of Radiological Sciences
28	Meals To Smile About by National Dental Centre, Singapore
29	Ministry of Health, Singapore Diabetes Care – Expert Work Group
30	Agency for Care Effectiveness (ACE) Campaign
31	Dialogue with ACE Consumer Engagement & Education (CEE) Team
32	SingHealth Engagement Toolkit with Patient & Families
33	SingHealth Tower Wayfinding Project
And many more	

More than the impact that is made at the project level, SPAN has demonstrated to the wider healthcare community in SingHealth on how partnerships can be built with patients and families, and how solutions can be co-created and co-developed with patients and caregivers. As a result, it has encouraged the formation of PFACs in individual institutions in SingHealth, or what we refer to as SPAN@Institutions.

Starting with SPAN@KKH in 2020 and SPAN @SGH Department of Emergency Medicine in December 2021, PFACs are being formed in the other hospitals and National Centres at the time of writing. The move towards forming PFACs at the institution level is very encouraging as it signals how each institution is moving towards embedding patient engagement and patient advocacy within their systems. This is also necessary as many improvement projects are at a local level, and practices and processes need to be customised to meet institution-specific needs.

On a national level, SPAN has also been consulted by healthcare agencies, who require feedback and inputs on matters ranging from government policy to effectiveness of public education information brochures. Its composition of a diverse group of patients across all demographics, committed to working with the healthcare institutions for improving patient experience, safety and overall outcomes makes it an ideal patient organisation for such purposes, and at present is the only such patient and caregiver group. In 2022, SPAN Leadership, together with its advisors and secretariat from SingHealth made an important decision to expand its reach to patient organizations in Singapore. The Singapore Patient Advocate Connection (SPACe) was initiated as a

half-day event organized by patients for patients. It aimed to create a high-level platform for national patient organization leaders and healthcare to connect and develop patient and family engagement capabilities for patient advocacy and healthcare improvement in experience and safety for patients and healthcare workers. The inaugural event was held on 29 October 2022 with more than 220 participants from patient organizations and support groups, patients, caregivers and families, and healthcare teams.

On a regional level, SPAN is encouraging patient engagement and patient advocacy in healthcare systems in Asia-Pacific. By actively participating in initiatives and programmes on platforms by the World Health Organisation (WHO), the International Alliance of Patients' Organization (IAPO), Asia-Pacific Patients Congress (APPC), The Beryl Institute, SPAN aims to build capacity and capability not only among patient advocates, organizations and healthcare facilities within SingHealth, but also in Singapore, Asia-Pacific and beyond.

## **FUTURE DIRECTIONS**

While we have set-up a patient advocacy network and attained certain achievements, our work is not complete. The SPAN secretariat, together with the SPAN leaders, continues to expand its work to elevate the patient experience, improve patient safety, amplify patient voices and grow the body of knowledge on patient engagement and patient advocacy for the Asian community. As we work towards this vision, these are the areas we would be considering for the future.

### **1) Measure outcome and impact of patient and family engagement in patient safety & experience**

As we move towards measuring the outcome and impact of patient and family engagement, relevant indicators from Strategic Objective 4 "Patient and Family Engagement" published in the "WHO Global Patient Safety Action Plan 2021 - 2030" will be taken as one of the key reference documents in helping SPAN to measure the impact its initiatives bring:

- Number of policies and guidelines on safer healthcare co-developed with SPAN
- Number of established networks of patient advocates and champions through SPAN Model or collaboration
- Number of established patient and family advisory committees (or its equivalent)
- Number of developed and implemented procedures for disclosure of adverse events to patients and families
- Number of patient-reported experiences or related safety outcomes

Other measurements such as some of the following will be considered for continuous sharing and learning:

- The Patient and Family Engagement Climate within SingHealth
- The outcomes of improvement and innovation projects, relevant to the inputs from patient advocates
- Sharing through speaking at conferences and written materials such as manuscripts, posters, bulletin, case studies, guides & toolkits)

Ultimately, the aim is for SPAN to have partnership and engagement experiences shared with healthcare teams as well as other patient advocacy organisations and networks, and for patient advocacy models to be spread and strengthened through the growing advocacy network to improve healthcare where patients and staff are truly at the heart of all we do.

## **2) Expand diversity of SPAN members and continue to build trust**

A collaborative model works when there is sufficient trust. In this respect, SPAN will continue to engage both healthcare teams and its members in regular dialogues (embedded in the system) and in encouraging open-mindedness through facilitating the dialogues, especially so when it intends to expand the diversity of its membership to contribute to healthcare improvement and innovation as well as experience. Putting in place a framework for engaging SPAN members and in empowering healthcare teams and advocates in effective communication is one of the key focus areas of SPAN.

## **3) Build a group of patient safety champions to help and support the journey to safer health care (WHO Global Patient Safety Action Plan 2021-2030)**

SPAN, through IPSQ, has been introduced to the WHO Global Patient Safety Action Plan 2021 - 2030 (GPSAP) and has participated in the Asia-Pacific Patients Congress Consensus Building Workshop in 2021, where it facilitated a group discussion focusing on Strategy 1 of Strategic Object 4 - Patient and Family Engagement. The Global Patient Safety Action Plan (GPSAP) on Patient and Family Engagement Co-Creation Consensus Workshop Report was published in 2022 [5,6].

SPAN was also invited to speak at the Global Actions for Leadership and Learning Organisations for Patient Safety (GALLOPS) on "The Role of Patient Advocates in Advancing Healthcare Experience & Outcome". GALLOPS was developed by IPSQ and its curriculum mapped to GPSAP with the aim to accelerate action to implement global action on patient safety in Asia, establish a network of patient safety advocates and promote multi-disciplinary teams to prioritise and improve patient safety. These were opportunities and valuable experience for SPAN co-chairs in playing a part in driving patient advocacy beyond SingHealth.

GPSAP together with SingHealth's strategy map has guided SPAN's strategic planning. Driving patient safety and building a group of patient safety champions are key focus areas of SPAN. It will continue to equip its patient advocates as well as healthcare teams with the knowledge of global actions in making healthcare safer and in playing roles in eliminating avoidable harm.

## **4) Grow capacity and capability of patient advocates as well as healthcare professionals involved in work to improve patient experience and patient safety.**

SPAN will continue to curate training and development programmes and initiatives to grow capacity and capability of patient advocates and healthcare professionals. The aim is to empower both parties to be able to work collaboratively in understanding the pain points for better patient and staff experiences, and safety.

Some recommendations are:

- Co-develop programmes in the training of patient advocates to be empowered to contribute to co-developing policies, guidelines, establish networks and patient and family advisory committee, develop and implement processes/ procedures such as disclosure of adverse events, reporting of experiences and related safety outcomes
- Co-develop programmes in the training of healthcare professionals such as residency communication training, empathy and compassion, strategies in engaging patients and families
- Partner knowledge experts and organisations to establish collaborations in areas such as training and research in patient advocacy, sharing of best practices.
- Introduce a train-the-trainer model to sustain training and development

## **5) Enhance engagement with SPAN patient advocates during the pandemic and beyond when there is less face-to-face interaction**

Learning from the COVID-19 pandemic, continuous conversations with SPAN members and healthcare teams are essential to establish new relationships and strengthen existing ones. Leveraging technology and having the engagement, including training and development on suitable platforms, such as video-conferencing and e-learning, is necessary for adaptation. Strong leadership at the organisational and patient advocacy network levels, and strong support and allocation of institution resources to the patient advocacy network and support groups, are critical in enabling the group of volunteer advocates to continue with the agenda, as well as to respond, recover and thrive during a crisis such as a pandemic. Therefore, the development of advocacy leadership to drive the network is an important strategic investment.

## **6) Develop Patient Engagement and Patient Advocacy Resources**

Having walked this journey to set-up a patient advocacy network within a healthcare cluster in a country and culture where patient advocacy is new, SPAN would like to support other healthcare organisations in developing their capability in patient engagement and patient advocacy. To do so, we would like to contribute to the body of knowledge on patient engagement and patient advocacy for the Asian community.

SPAN published the “Engagement Toolkit with Patients & Families for Healthcare Improvement Projects” in 2021. It was co-developed by the Co-chairs of SPAN and the Director of the SingHealth Office for Service Transformation. It serves as a simple guide for healthcare teams to engage patients and families for healthcare improvement projects and in introducing SPAN.

Moving forward, to support the development of SPAN@Institutions and WHO patient and family engagement initiatives, SPAN aims to co-develop implementation guides and toolkits to:

- Support SPAN@Institutions in setting up a patient advocacy structure at respective SingHealth Institutions;
- Provide technical advice through test-bedding of WHO patient and family engagement guides and tools in Singapore healthcare facilities; and
- Produce relevant implementation guides as well as case studies to elevate patient and family engagement

## **CONCLUSION**

This has been a remarkable journey for everyone in SPAN. In the past five years, we have demonstrated that engaging patients and families through SPAN (a PFAC) to improve healthcare and elevate the patient experience, can work in an Asian community. At the heart of it all, the desire to build trust, commitment and a shared vision of doing what matters for the patient has helped us drive this forward. While we continue to grow, we hope to have more conversations with healthcare organisations in Singapore and in Asia in growing and measuring the impact of patient engagement and patient advocacy in the region. Together, we can make healthcare better and safer for everyone.

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