



Annual Report

Sheikh Khalifa Medical City Ajman

20 18





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01

Our Message

Initiatives of His Highness Sheikh Khalifa bin Zayed Al Nahyan, President of the UAE

"Our main goal is to build our country and citizens. Man is the real resource. The United Arab Emirates, through its federation, provided a live and honorable example of a country which derived from its past, a path to the present.

What we have achieved so far is a coronation of strenuous and great efforts to attain a comprehensive developments strategy."

H.H. Sheikh Khalifa bin Zayed Al Nahyan President of the UAE, (may God save and bless him) gave the highest priority to building the Person, and confirmed the continuity of this approach as a continuous target by stating that "the focus of our attention shall always remain the Emirati Person as the ultimate objective and goal of the development, in the present and the future.

The person is the real wealth of this country, before the oil and after, hence the interest of the citizen shall remain the goal we are working to achieve day and night ". In line with that, came H.H.'s initiatives to achieve the aspirations of his nation, which - in the healthcare arena- included the establishment of world-class hospitals at the highest level of efficiency, and sophistication.

Inspired by the objectives specified in H.H. the President of the UAE, Initiatives, came the Cabinet Decree in 2016 for SKMCA to become under the supervision of "The Medical Office" in the Ministry of Presidential Affairs, which aims to create a system that guarantees access to integrated healthcare services to Nationals and residence in various parts of the country, and to transfer knowledge from international companies to the UAE nationals through the implementation of an effective system for the employment and development of nationals.

In executing its mission, His Highness' President's Initiatives has opted to partner with Global Health Partner (GHP) who assumed full responsibility of the hospital operation in December 2016, with a key mission of providing the highest standard of health care to Ajman community and the people of Emirates.



His Highness Sheikh Mohammed Bin Zayed Al Nahyan

**Crown Prince of Abu Dhabi & Deputy Supreme
Commander of the UAE Armed Forces**

Achieving the maximum level of social progress will remain a major goal for creating a comprehensive system for the development of society. Our reliance on knowledge and science is our path to achieving comprehensive development.

Our beloved country has attained great achievements which are highly admired and appreciated by the whole world.



His Highness Sheikh Mansour Bin Zayed Al Nahyan

**Deputy Prime Minister and Minister
of Presidential Affairs**

Our vision of the future is obvious towards all those related to our country and citizens. The Initiatives of His Highness the UAE president do not have any timelines or boundaries as they fulfill the interests of the citizens and meet their needs. The directives of His Highness “May God protect him” the aim for utilizing all possibilities and efforts to enhance their livelihood, security, stability and dignity.



Message from the CEO

Dear friends,

In essence, the core reason we exist is to, without a doubt, serve the community. It's this thinking which has fundamentally formed the basis of our goals and processes throughout 2018, along with a strong focus on the augmentation of our capabilities to ensure the healthy future of SKMCA. Along the way, many notable achievements were made, from refining of new clinical services to new facilities, all in line with our vision.

With the past year showing a substantial increase in the number of patients and visits at the Medical City, we are proving that SKMCA is on the right track - both in the quality of care, the scope of services delivered and optimizing the brand of the hospital - further cementing ourselves as an integral part of the Ajman community.

Focusing on the patient

Improving the patient experience has been at the forefront of our efforts in making the Medical City a place of comfort and quality care. Our ambition is to further implement personalized care that puts an emphasis on the patient's individual journey.

The Centers of Excellence continue to be at the core of SKMCA development. With their multi-professional teams, transparent outcome measurements, common routines, procedures and guidelines, they provide SKMCA with the ability to reach patient's long-term health targets, efficiently and holistically.

We do everything in our powers to further develop our Centers of Excellence in order to continue providing our patients with the desired experience of convenience, warmth and ambiance blended seamlessly with professional medical expertise. In order to reach these goals, we have continued research how we can further develop the SKMCA brand values and services to deliver going forward.

Patient safety is elemental

Although there have been inroads made in developing a consistent patient-safety culture across all points of service, there is still a division relating to the old hospital structure. SKMCA has a lot to gain through enhancing its ability to work as one unit; sharing resources and competencies to improve efficiency. This will further facilitate our improvements within patient safety and quality of care.

Initiatives to unify and train teams across the previously existing borders remains fundamental, enabled by further adaptations of the governance model of SKMCA to support the necessary changes. Key focal points for the delivery of consistent high quality care into 2019 include the refining of lean processes, optimizing the OPD and



bed management, plus the further enhancement of clinical guidelines and procedures.

Looking forward

As CEO of the Medical City, I am enthusiastic about the coming year, as we continue to see strong improvement in the quality of care. I believe that we are well prepared to face the coming challenges and I am confident that SKMCA will be successful and take a leap towards our vision – to be the Patient's First Choice.

Truly yours,
Erik Wassberg
SKMCA CEO, MD, PhD, MBA



A Message from GHP

"GHP began operations in the UAE over 10 years ago and we are proud to continue serving the community of Ajman and the UAE. Our role has grown from developing and managing the Rashid Centre for Diabetes and Research (RCDR) to the full Sheikh Khalifa Medical City in Ajman. It is a true honor and privilege to have extended responsibility for the healthcare provided in the community. GHP is very proud of SKMCA's accomplishments over the last two years and look very much forward to the journey ahead."

Representing the finest in Swedish healthcare

Well-renowned for its notable patient care, focus on patient safety and strong clinical outcomes, Swedish healthcare is considered world-class. GHP stands out as a top provider of patient quality and clinical efficiency, with outcomes that impress, both in Sweden and internationally. We strive to provide the best possible evidence-based healthcare in a patient-centred manner, with consistency and efficiency for leading outcomes at SKMCA as a result.

Committed to Ajman and the UAE

Creating and maintaining an exceptional healthcare service takes time and consistency is a must. We are honored by the trust put in us by both the Ajman population and the Ministry of Presidential Affairs. Again, we reaffirm our continued commitment to the healthcare of Ajman and the UAE; always seeking to advance the standards of care and service provision to the community. Knowledge transfer is an imperative part of GHP's

strategy towards an optimized state and we are committed to the open-ended exchange of knowledge between the Swedish and UAE healthcare system and to, for example, establish additional opportunities for training and education to reach even higher levels of quality and set a long-lasting footprint in the UAE community.

Supporting healthcare in the GCC

As trusted advisors to all stakeholders in the healthcare sector, GHP is always committed to our patients first. Value to society is fundamental to us, which we realize by providing optimal care for each patient at optimal efficiency and by taking a stewardship role for operations we manage. We are confident that our successful journey together with RCDR and SKMCA will continue and that our experiences will allow us to further contribute and support the development of leading healthcare services to the benefit of the population in Ajman, the UAE, and the larger geographic region as a whole. This role enables us to continuously learn and develop our patient-centered approach even further”

Tobias Linebäck CEO, GHP International



GHP is a Swedish healthcare provider that conducts both outpatient and inpatient care in the Nordic countries and the United Arab Emirates. Our clinics focus on a specific patient group, which leads to higher quality, efficiency and patient safety.

Ensuring that every action that is taken is the one that does the most good for the individual patient. For society, this means that every investment contributes as effectively as possible to good quality.







02

Our Journey

Better Together

Integrating all clinical departments for quality and efficiency

Sheikh Khalifa Medical City Ajman (SKMCA) always envisaged the joint organization of all our clinical services. Although historically fragmented, we believed this integration would benefit the quality of patient care we provide. During 2017, in alignment with the Medical Office's vision for the centralization of service with a focus on efficiency, and GHP's strategic statement 'Quality through specialization', crucial changes were initiated to achieve this vision.



On the Road to Becoming the Patient's First Choice

During 2018, SKMCA and the GHP chose to focus on emphasizing lifestyle change, patient-centered care, quality through specialization and collaboration as key values. These provided the groundwork for good operational routines, patient safety, staff training and support. Now in place, this enables clinical services and delivery to an increased number of patients to be implemented rapidly.

Fundamentally, all SKMCA departments support the education and empowerment of patients to improve their own health. It is well-established that the burden of disease, particularly in the Western world and the Middle East, is rapidly shifting from acquired and communicable diseases to diseases that are the result of lifestyle choices and aging.

By focusing on lifestyle change, and other preventive care, SKMCA will yield better health outcomes for the people of Ajman and the Northern Emirates.

A key feature, in both the clinical and the strategic plan, is to organize care based on medical conditions with multi- and interprofessional teams gathering around the patient. Focusing care delivery into centers with large enough volumes to create excellent patient-related health outcomes. This is particularly evident in the four Centers of Excellence (CoE), where needed core services are coupled with holistic, excellent care.

Besides quality, the overriding focal point for care will be lifestyle education for change.

Moving Towards A Quality Driven, Collaborative System

Going forward, the guiding principle for the leadership of SKMCA is to produce good outcome for our patients and the Ministry of Presidential Affairs (MOPA) by carefully measuring and continuously optimizing our outcomes using improvement cycles.

Unifying all clinical departments in the Medical City under one structure was a key goal accomplished during 2018, which together with

the further development of cohesive principles, routines and guidelines, will ultimately lead to a more increased pace of development. The aim being to reach a state where everyone in the organization – in a systematic, responsible and collaborative way - continuously improves patient care and results. These changes will then be followed by expansion and Emiratization during the following years.

In the long run, to further strengthen sustainable results, training and research are imperative. This will ensure scientific progress, but also serves to stimulate our staff's personal development, ultimately benefiting the patients. Thus, we have created collaborations with both Ajman and Sharjah Universities and expect these to be important catalysts.

Infrastructure-wise, refurbishments and construction continued in 2018, building on achievements from 2017. SKMCA is now in a stronger position and can increase focus on developing clinical services during 2019.

The Emergency Department as a Gateway to Care

The majority of patients arriving present themselves via the Emergency Department and SKH-WC Urgent Care, making this a high priority for the whole Medical City. Even if almost 50 percent of the patients are triaged as less acute cases, the numbers of polytrauma, high-impact trauma, and complicated trauma are substantial; rapidly increasing and requiring extensive resources 24/7.

A complex service involving many specialties, SKMCA is now functioning at full Level II status, according to the American College of Surgeons definition. The goal being to aim for Level I status in the future.

In order to succeed with these ambitious plans, collaboration is a must, both internally and externally. Internally, we are prioritizing seamless care and teamwork through joint clinical services, while externally, we plan to further increase our

collaborations with our sister hospitals within the MOPA network.

Focusing on centralizing services and increasing patient volumes for all hospitals within the MOPA family will lead to better medical outcomes for all hospitals. SKMCA will focus on patient pathways where the patient volume is large enough and do this in collaboration with The Medical Office as well as the other MOPA hospitals.

SKMCA is looking forward to delivering on these ambitions, for the benefit of the population of Ajman and the Emirates and also the journey towards realizing our vision. Where we plan to exceed expectations.

Volume Matters When It Comes to Good Outcomes

Several studies have shown evidence that volume matters when it comes to good treatment outcomes and quality patient care. Cognizant of this, SKMCA has taken into consideration that SKMCA's Clinical Departments will benefit from working more universally through the creation of shared services.

This relates not only to physicians but also to nursing and support staff. For example, the midwife needs to maintain a certain volume of deliveries to practice safe and high-quality patient care. Specialized nurses need to obtain the latest trends and to share the latest evidence-based facts within their scope of practice. This can only be done by creating shared services within specific areas where it is identified that the volumes might be too low if these specialist nurses and midwives aren't in a larger context.

This ensures safety and patient care quality as well as care effectivity and sustainability regarding all clinical care within SKMCA by the development of common standards, procedures, and common equipment standards. Significantly improving both the planned and emergent care for the whole facility. Looking to the future, we are now focusing on how to unite and train the teams together where previous boundaries existed.

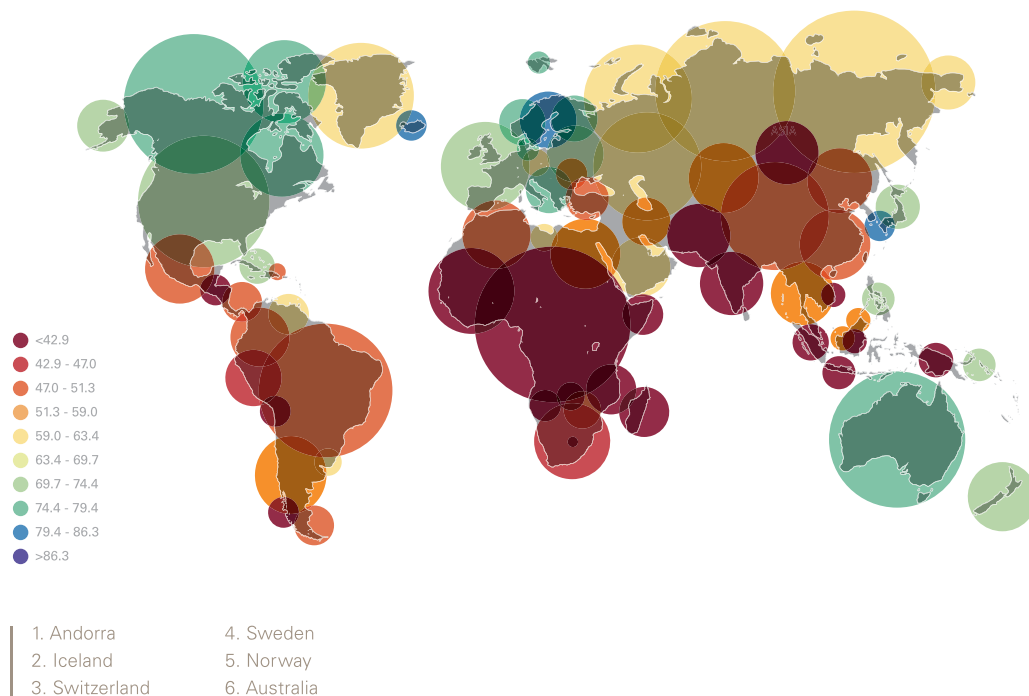
Fundamentals of Swedish Healthcare Excellence

Ranked number four in the world for quality healthcare, in a study published by Lancet May in 2017, Sweden is universally-recognized as delivering healthcare at world-class standards. The principles of modern healthcare management having been consequently utilized in a stable government-financed system, giving unique possibilities to develop a homogenous system that benefits everyone.

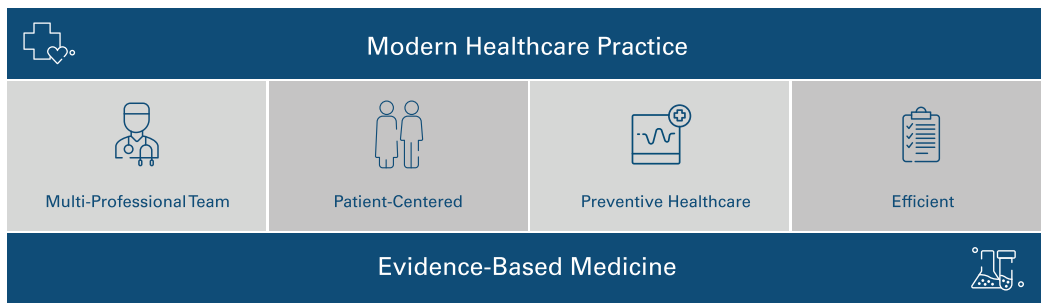
From this standpoint, leadership and the healthcare staff from Sweden have distinctive experiences and perspectives to share with other healthcare systems.

Guided by the principles of evidence-based care, preventive medicine, team-based multi-professional care and patient-centered care, modern healthcare practice is more efficient than ever before.

Sweden is rated as having the fourth best quality in healthcare



Healthcare Access and Quality Index based on mortality from causes amenable to personal health care in 195 countries and territories, 1990 - 2015 a novel analysis from the Global Burden of Disease Study 2015. The Lancet May 2017



Preventive Care in a Collaborative Climate

Realizing that true strength comes through the engagement of different sectors, the focus on multi-professional care has been possible to test and develop in an intertwined organizational model. The professional content is overseen by strong academic and professional associations, both in the medical profession, as well as nursing, and allied health.

Preventive medicine has an evident role due to the fact a healthcare system only adds to less than one-third of the health in a population. The rest can be attributed to smoking, food habits, traffic, drugs, violence and other factors connected to human behavior. Therefore, patient education through the preventive approach plays a substantial role in future population health.

Standardized Care Practices

One of the crucial cornerstones of good healthcare in Sweden is to ensure every patient goes through the same process anywhere in the country. This means everybody has equal access to best-practice medicine, no matter where they live.

It's this systematic approach to healthcare which makes Sweden one of the most effective healthcare systems in the world.

Our accumulated knowledge in implementing standardized care practices is what stands us in good stead for the future.

Total, Efficient Primary Care

Access to comprehensive care at the right level is ensured from the first point of entry, therefore patients are afforded accurate care according to their needs.

Studies comparing Sweden's healthcare system to others shows the country performs very well, being top-ranked in quality and efficiency.

The last decade seeing a strong focus on reducing waiting times, and concentration of care efforts, to have an optimal effect.

A Culture of Innovation

In 2016, Sweden was ranked number one in the European Union (EU) as an innovation leader. At its heart, Sweden aims to improve itself and its systems, for the betterment of all. This core feature being intrinsic to its success in healthcare and beyond.



An assessment performed by the Organization for Economic Co-operation and Development (OECD) evaluated the Swedish healthcare system "to have excellent healthcare" in its Healthcare Access and Quality Index (2015).

Swedish Medical Schools Rank in Top Five Globally

A Saudi Arabia-based consulting organization has published yearly rankings of world universities since 2012 (QS World University Rankings). Rankings are based on the quality of education, alumni employment, quality of faculty, number of publications, number of publications in high-quality journals, citations, scientific impact and number of patients.

The top 10 medical schools based on this ranking are medical schools from the United States (6), United Kingdom (3) and Sweden (1). From Sweden, the University of Uppsala and the University of Lund are ranked amongst the top 100 in the world. That means that 40% of Sweden's medical schools are ranked in the top 100 in the world.

²<http://www.topuniversities.com/university-rankings-articles/university-subject-rankings/top-medical-schools-2016>



***Looking forward
to a healthful future***

40% of Sweden's medical schools
are ranked in the top 100 in the world





03

The Medical City

Bringing superior healthcare to
where it's needed most

The Heartbeat of the North

As the only government hospital in the region, Sheikh Khalifa Medical City Ajman (SKMCA) has an extensive responsibility to the Emirate. Serving the local population in almost all their healthcare needs during one's lifetime, we operate with approximately 40 distinct specialties.

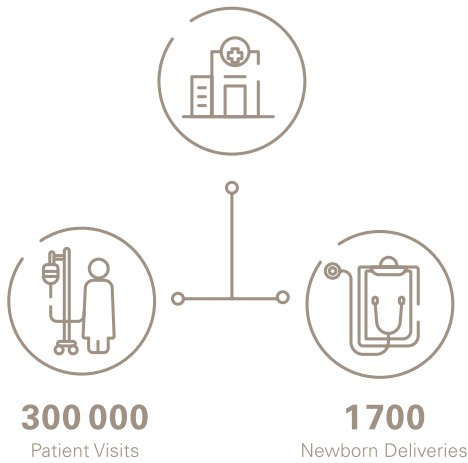
Comprising of the four collaborative hospitals, the goal is to provide easy-access, holistic medical care to the surrounding region with our continuing vision – 'To Become the Patient's First Choice'.

Focusing on Patient Education for Increased Sustainable Success

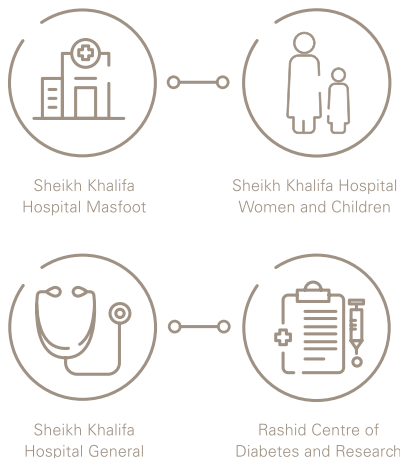
Today the disease burden in the UAE and the Western world is rapidly shifting from acquired or communicable diseases to chronic conditions - largely due to lifestyle and aging. It is therefore imperative that focus on sustainable lifestyle changes for patients and families through public awareness and patient education increases.

To succeed in attaining their healthcare goals, every patient needs to take responsibility and change their lifestyle to gain and maintain optimum health. Our healthcare professionals' focus is to gain an understanding of what matters to the informed patient, and empower the patients through education, training and collaboration to take on that responsibility and change their lifestyle.

The Rashid Centre for Diabetes has done just that, and the rest of SKMCA intends to work with the same, successful health-promoting strategy.



Sheikh Khalifa Medical City Ajman remains vital to the Ajman community with an impressive number of almost 300 000 visits, patient days and more than 1700 deliveries in 2018.



SKMCA comprises of the four collaborative Hospitals including the Sheikh Khalifa Hospital Masfoot, Sheikh Khalifa Hospital - Women and Children, Sheikh Khalifa Hospital - General and Rashid Centre of Diabetes and Research.

01 | Sheikh Khalifa Hospital General (SKH – G)

At Sheikh Khalifa Hospital General, our service expansion has enabled us to see an increase in patient visits reaching 160 000 this year. In the Emergency Department, not only have the number of visits increased but the acuity levels have shifted to more severe than previous years.

Major achievements include the further development of the Trauma Care Unit and all related specialties, the introduction of modern stroke care protocols through the Stroke Project in mid-November, and the development of the Centers of Excellence, in the Orthopedic and Gastroenterology specializations.

Patient safety is still a major focal point, with the full implementation of the Green Crescent as a daily patient safety tool, performed weekly along with patient safety rounds. Ensuring our patients are in safe hands.

Growing to Meet the Medical Needs of the Ajman Community

To meet demand, the Trauma Care Unit successfully extended its services to reach Trauma Centre Level II status. The launch of specialist surgical services includes Pediatric Surgery, an Ophthalmology service encompassing cataract surgery along with updated newborn retinopathy care, and vitreoretinal surgery. In Orthopedics, the improvement of trauma care for pelvic fractures and prosthesis surgery are now successfully underway while the 'rapid recovery' concept was implemented.

Within the Internal Medicine Department, the Gastroenterology service has expanded its adult care while also added support from Pediatric Gastroenterology. New services in Cardiology



and Neurology include the introduction of modern stroke care protocols while the first thrombolysis was also a significant achievement.

Following Global Trends in Therapeutic Medicine

Jan Blond, the Head of Department for Medical Diagnostics, has been instrumental in introducing the benefits of a full Interventional Radiology (IR) service covering endovascular, urological, gastrointestinal, liver and general interventions to SKMCA. Hailed as cutting-edge in therapeutic medicine, it allows for patient treatment using minimally-invasive techniques.

Now able to perform major surgeries with less mortality and morbidity, SKMCA also treats patients previously not fit for conventional open surgery. In addition, IR procedures play a major role in palliative medicine during tumor ablation.

For SKMCA, as a trauma hospital, the main role of IR will be the embolization of bleedings. Diabetic patients suffering from lower extremity ischemia can be treated with angioplasty, keeping lower

extremity vessels open and keeping AV-fistulas open in patients with chronic hemodialysis. It can also provide help in obstetric cases with increased risk and/or postpartum bleeders.

In addition, the successful installation of a new Fluoroscopy X-ray machine means that our doctors now have access to real-time moving images. Currently, training is underway for the new service to start up.

High-Tech CT Scanner Installation

SKMCA's new premium dual-energy Computer Tomography (CT) scanner was installed and operational by October with staff being fully-trained. Already making a substantial impact on workflow, it was a positive addition to our services.

Blood Donation Drive Surpasses Its Goals

Organized by SKMCA, in collaboration with the Sharjah Blood Transfusion and Research Centre, our blood drive aimed to highlight the necessity of donating blood in order to save lives. The core idea promoted through this campaign was that 'every donation matters, as it could save more than one life'.

The initial blood donation goal set by Dr. Najat Rashid, our Medical Laboratory Manager, was 40 donations. However, SKMCA reached 71 units in just four hours. A great achievement by the team. A result of hard work, commitment, and a true belief in what is important.



"A blood donation means
a few minutes to you, but a
lifetime for somebody else."

Dr. Najat Rashid, Medical Laboratory Manager

02 | Sheikh Khalifa Hospital – Women and Children (SKH-WC)

The only stand-alone women and children hospital in the Northern Emirates, SKH-WC is JCI-accredited. Expansions during the past year saw its services extend with new specialties in Pediatric Cardiology, Pediatric Neurology, Pediatric Endocrinology, Pediatric Surgery and Pediatric Gastroenterology.

Around 60 000 patients visited the Outpatient Clinic including urgent care visits and the SKH-WC had more than 1 700 deliveries during the year.

Quality of care remains a key value and several services were implemented including extensions to existing services. Around the clock labor pain relief was introduced; pharmacological - epidural analgesia - as well as non-pharmacological forms - TENS and massage.



Creating a Family-Centered Care Culture

Fundamentals like this are vital to future family success and SKMCA, recognizing this, encourages a family-centered approach at all our facilities. Fathers are encouraged to be present at the deliveries of their children resulting in better parent bonding.

Raising Feto-Maternal Care Standards

The focus has been on reducing episiotomy frequency during labor and this has notably decreased, with the Caesarean-section rate also stabilizing at approximately 25 percent.

In addition, the Feto-Maternal Center of Excellence's care standards are being based on the core values of Swedish antenatal practice. This means an emphasis on lifestyle education with the Enty Al Hayat Clinic exclusively focusing on the pre-natal information and post-birth baby care.

03 | Rashid Centre for Diabetes (RCDR)

Comprehensive Diabetic Care under One Roof

The objective of the tertiary-care unit, RCDR, is to improve the quality of life of diabetic patients by combining compassionate, modern diabetes and obesity care with high-quality research and the fostering of community awareness.

JCI-accredited, this Centre of Excellence provides holistic care for Type 1 and 2 Diabetes, Gestational Diabetes and Obesity - all under one roof. To do this effectively, the team comprises of: endocrinologists, ophthalmologists, a dentist, diabetes educators, a nutritionist, dieticians, a physiotherapist, a podiatrist, and wound care nurses.

Tremendous expansion was achieved during the year, with an all-time high number of 45 000 visits. An on-site pharmacy and a fully-equipped laboratory allowing swift care which is also convenient for the patient.

Diabetic Care Expansion and Integration

No longer just a stand-alone clinic, RCDR endeavored to integrate its specialized services through outreach programs coordinated through the other Centers of Excellence. During 2018, a standardized new Antenatal Diabetes Care program for SKMCA was established in collaboration with SKH-WC and new adult endocrinology services were initiated at RCDR.

The Centre has also introduced 24/7 in-patient cover for the hospital wards at Sheikh Khalifa Hospital General. Development of the lifestyle clinic to cover medical as well as pre- and post-bariatric care also started during the year and in collaboration with SKH-G, we are launching our Bariatric Surgery program.

Serving Beyond the Northern Emirates

Receiving patients from all over the Northern Emirates and in some cases also from other countries in the Gulf region, RCDR is now open to expats who have insurance coverage or who are self-paying.

04 | Sheikh Khalifa Hospital - Masfoot

Located in the Muzeirah-Masfoot region, an Ajman enclave located about 130 km southeast of Ajman city, close to Hatta and the Omani border, the Hospital opened for the first time in December (2016) offering outpatient clinical services, supported by radiology, laboratory facilities, and a pharmacy.

However, under careful leadership, the hospital underwent a major reconstruction and has now significantly augmented its services and capabilities. With completion imminent, the major refurbishment saw the addition of single private rooms in the wards, modernized operating theatres and a CSSD (sterile room).

The augmentation of services in both clinical and non-clinical areas are set to enable the 24/7 opening of the Hospital and regular drills are being held to prepare for the opening in April 2019.

Further to this, the Outpatient Clinic expanded with the number of patients almost doubling during the year. Due to demand, an evening clinic service started during the Spring with high satisfaction levels from the patients, and the Dialysis Unit saw its very first patient on the 23 December 2018.

Services offered include:

- OPD with:
 - General Medicine
 - Internal Medicine
 - Pediatrics
 - Orthopedics
 - OBGyn, General and Antenatal Clinic
 - Surgery
 - RCDR Specialist Clinic
- Two dialysis beds
- Two ambulances
- Laboratory services
- Radiology services

“The Masfoot Team has been putting in a lot of work and effort into the launch process and I am certain that with our combined efforts we will have a smooth and successful start of 24/7 operations at Masfoot Hospital. I also want to take this opportunity to thank all of the staff who have been splitting their duties between Masfoot and Ajman, or continuously supporting either unit, over the past year or two. I really appreciate your commitment to Masfoot Hospital and for making it all possible.”

Marcus Larsson,
Deputy Chief Medical Officer



04

Centers of Excellence

Specialized, Holistic Patient Care

Playing a crucial role in SKMCA's strategy to support the population of Ajman's long-term health, the Centers of Excellence are intrinsic to our vision of becoming the 'Patients First Choice'. The four areas of focus - Feto-Maternal, Gastroenterology, Diabetes, and Orthopedics & Spine – are designed to offer scope and quality care in the view to provide excellent outcomes for our patients and the community as a whole.

These Centers were selected based on necessity, and SKMCA will continue to organize care at the level of the medical condition. Creating an unbroken and continuous flow of care, where the patient is treated by a multi-disciplinary team using a holistic approach.

Center of Excellence in Orthopedic & Spine



Providing the Backbone of Spinal and Orthopedic Healthcare

From knee injuries to chronic back pain, the Orthopedic & Spine Centre of Excellence provides well-rounded, integrated osteo-care and neuromuscular treatment. A year of changes, a major focus was on the recruitment of orthopedic consultants to extend the Centre's offerings to include orthopedic trauma, knee, shoulder and hip arthroplasties, spinal surgery, and sports injuries.

Advocates of Lifestyle Change

Not content to only offer a service whereby the problem is fixed through surgery or medical procedures, the Centre prefers to encourage healthier lifestyle options which include the cessation of smoking and the increase of physical activity.

Throughout the year, visiting doctors with particular skillsets in relevant areas have been invited on rotations to enhance our service.

While the Physiotherapy Department complements a team of doctors to ensure the complementary care of patients for a speedy recovery.

Saving Vital Minutes and Lives

Motor vehicle accidents often result in life-threatening trauma injuries to the pelvis and skeleton due to the proximity of major blood vessels. In the past, patients with severe spinal and pelvic fractures had to be transferred to the nearest capable facility hours away; losing crucial time and delaying necessary surgery.

Expert emergency care is vital to patient survival, and due to our collective team efforts, we are now a referral center for severe traumatic pelvic fractures in the Northern Emirates. A proud achievement.

Placing the patient first, we aim to aspire to excellence in trauma care; giving the local community peace of mind and vital support.



Center of Excellence in Feto-Maternal Medicine

Major Milestones Achieved in 2018

- 01 Launch of Enty Al Hayat clinic with 750 patients/ women educated on healthy lifestyles.
- 02 24/7 Epidural Anesthesia introduced.
- 03 C-sections down from 33% to 24% with 7% increase in deliveries.
- 04 Minimally-invasive gynecological surgical operations increased.
- 05 Warming and humidity control of newborns.
- 06 Kangaroo method introduced.
- 07 NIDCAP introduction (the systematic training of NICU staff to deliver care to the preterm related to the development of the child and not only gestational age).
- 08 Special Care Baby Unit opened at the beginning of 2018
- 09 Creation of a nutritional team with NICU/SCBU staff including a pharmacist, dietician, lactation nurse and infection control nurse.
- 10 Visiting Physicians Program commenced on 4 May 2018.



Educating Women on Lifestyle and Pregnancy

The newly-opened Enty Al Hayat clinic is contributing to the prenatal education of several hundred pregnant women in the region. Lifestyle education during pregnancy is one of the key aspects of our service, as pregnancy is a window of opportunity to educate the women about their health, starting with pregnancy, but it's an optimal time to encourage them to take a long-term view of their and their family's health.

For many, the clinic is their first touchpoint with SKMCA, and so we are also able to educate them on the types of services and treatments the Feto-Maternal Center of Excellence can offer to them post-pregnancy.

In addition, multi-disciplinary clinics have been opened for more complex pregnancies e.g. pregnancy and diabetes, and complicated pregnancies. A Pediatric Endocrinologist, Pediatric Cardiologist and Pediatric Surgeon joining our team to further augment capabilities.

The major goal being to successfully reduce the C-section rate has been achieved and we are down from 33% to 24% to date. The number of perineal cuttings at delivery has substantially decreased from 58% to around 16%. Meaning quicker recoveries for mothers post-delivery. During deliveries, the lowering of the C-section

rate as well as the use of scalp, umbilical cord blood-gas and lactate measurements ensure the well-being of the unborn child during labor and gives the delivery team more control. Thus, improving safety and good outcomes for both mother and child.

‘Pain-free’ deliveries were also introduced using avenues such as epidural anesthesia - now available 24/7. Encouraging family involvement has been a focal point and the father’s presence at normal deliveries is strongly recommended to ensure parent and child bonding.

Going forward, the modernization of labor ward care and relevant services will be consolidated and developed during 2019. The introduction of central CTG monitoring for safety reasons is a possibility among the extension of other services.

Recognizing Children’s Rights

The UAE signed the U.N. Convention of Children’s Right at SKMCA through a Standard of Children’s Rights. This is displayed in the hospital and systems are being developed and implemented to improve our interactions with our child patients.

Extension of Minimally-Invasive Surgical Techniques

The Centre of Excellence in Feto-Maternal Care aims to expand the benign gynecological care for women in the Ajman area. This would constitute treatment of varying degrees of urine incontinence, bleeding disorders, and myomas - causing both menorrhagia and pain. We also believe there are women silently suffering from uterine prolapse causing severe discomfort and incontinence.

With this in mind, our goal is to build awareness in the community that we can now treat these issues successfully using minimally-invasive surgery techniques - including laparoscopy - while further consolidating this service in 2019.

Launch of the Special Care Baby Unit (SCBU)

The launch of the Special Care Baby Unit (SCBU) has had a meaningful impact on the care of our little patients, relieving the NICU from the intermediately sick children such as jaundiced neonates and neonatal growth problems. This leaves the NICU better equipped to deal with more serious cases.

At SCBU the family is encouraged to be involved in the care of the baby which will improve the bonding between the parents and the baby, improve breastfeeding, and affect growth which in the end builds a better foundation for a comfortable family. Newborns that are admitted to SCBU could, for example, have jaundice, low blood sugar, breathing irregularities among other conditions.

Launch of Postnatal Services

The NICU also introduced the Kangaroo Method, as well as postnatal temperature and humidity controls. These actions have been demonstrated to decrease the oxygen demand in the newborns.

The Pediatric service actions worked with the high routine use of antibiotics as well as routine intravenous lines in children. In addition, we started the Pediatric Gastrointestinal and Pediatric Cardiology services as a part of our Centre of Excellence offerings.

The service of the unit underwent a modernization process introducing the Kangaroo Method, hub humidity control, optimization of nutritional support and NIDCAP care. Improvements are ongoing and shall continue into 2019.

Developing Intensive Care

The NICU is an intensive care unit with a high number of extreme preterm babies and other sick neonates or pre-terms. In 2018, we had a 74% occupancy rate with almost 4000 patient days on the ward and an average duration on the ward of almost 4 weeks per patient.

With a new Pediatric Cardiologist, we can improve our neonatal cardiology care. We hope that we will get CFM/EEG services in the near future, creating possibilities to improve our diagnostics when we have infants with seizures. And, as mentioned above, we are working on improving neonatal nutrition, implementing Kangaroo Care and more parental involvement but also highlighting issues on how to decrease the risks of infection and improving our total neonatal outcomes.

We have also created a new department, the Special Care Baby Unit (SCBU), which will relieve the NICU by caring for the babies with lesser needs of medical attention. This helps us to follow up with our at-risk patients and all other neonates that need follow up in the OPD.

However, as our operation continues to grow, space is proving a challenge. This is a concern that we are aware of and working to solve as this could ultimately affect patient safety.

Optimizing Breastfeeding

Consultant and Head of the NICU, Per Ansved, is confident the purchase of a Human Milk Analyzer will allow the NICU to gain important and necessary information on how to add the right amount of extra proteins and fat to the expressed breast milk to further improve growth. If we achieve this, we shall be the first NICU in the UAE to implement this strategy.

"I am especially proud of the fact that 84 % of the major gynecologic surgeries are laparoscopic, despite the increased complexity of the procedures nowadays being performed"

Mats Jernetz Head of Department Obstetrics & Gynecology



Future plans

Improved quality in the obstetric department with modern pain management to enhance early recovery.

+

Implementation of non-invasive ventilation strategies in NICU based on the Scandinavian model.

+

Introducing Pediatric Ophthalmologist to the hospital for Retinopathy of Prematurity investigations and treatment.

+

Center CTG monitoring and expert interpretation of CTG to improve patient safety.

+

Novel surgical techniques for diagnose and suture of tears.



Center of Excellence in Diabetes

Rashid Center for Diabetes and Research (RCDR)



The inception of the Lifestyle Clinic at the Rashid Center for Diabetes and Research (RCDR) aims to provide health by adopting a scientific approach in lifestyle management of chronic diseases like Diabetes and Obesity.

The team of professionals include an Endocrinologist, Dietitians and Physiotherapists who monitor and support the patient based on evidence-based practice.

Managing Obesity Effectively

Obesity is a major threat to public health and wellbeing, therefore RCDR has expanded its services to include obesity management from the second quarter in 2018. We initiated the medical management of obesity through a structured process, where the patient is advised for various

modalities of weight loss including lifestyle modification and pharmacotherapy.

In addition, we will also be initiating the surgical management of Obesity through a Bariatric Surgery Program in collaboration with the Sheikh Khalifa General Hospital in the first quarter, 2019. The Bariatric Surgery Program will specialize in the surgical treatment of obesity and weight-related health complications like type 2 diabetes.

Additional Key Services

Continually looking to update our offerings, 2018 saw the introduction of the Diabetes Antenatal Clinic providing service one day a week to pregnant woman with Gestational Diabetes, as well as Type 1 and Type 2 diabetes, in collaboration with the SKH-WC. Soon we hope to extend our services also to other hospitals in the region.

Consultants from RCDR together with a diabetes educator nurse are also providing consultation for inpatients at SKH-G and SKH-WC. We have also initiated an extended service within the lifestyle clinic for individuals with obesity, and in the near future, it will include bariatric surgery if needed.

Plans for Bariatric Surgery Introduction

Targeting patients with high-risk obesity who urgently need additional modalities along with medications, this service will further increase our ability to assist patients. Complementary to other treatments such as new medications, studies show that Bariatric Surgery in the right circumstances can be lifesaving; helping alleviate the symptoms of Type 2 Diabetes such as hyperglycemia. In some cases, patients can successfully halt their prescribed diabetes medication.

Fundamentally, a future collaborative service between the SKH-G and RCDR is the goal, where RCDR will provide the pre- and post-surgical care for the patient. However, this service requires a specialist team around the patient – comprising of a Physician, Surgeon, Bariatric Nurse, Dietitian, and a Physiotherapist – which we are currently putting into place.

Launching Pediatric Endocrinology

As community awareness of RCDR's services grows, many parents are bringing in their children for check-ups and treatment. Studies show that early effective treatment of Diabetes Type 1 and 2 is the best way to reduce the risk for future complications.

With this development, and the above research in mind, we were committed to the attainment of a resident Pediatric Endocrinologist in 2018. The hiring process commenced in the later part of the year and in early 2019 we officially began offering this service, further augmenting our capabilities.



My Journey

"Arriving in the UAE on 4 January 2018 was a major change for me, leaving Stockholm and Danderyd Hospital to start a new life here as the Hospital Director of RCDR. Having worked with diabetes since 2000, I believe it to be one of the most important fields of medicine, mainly because it affects such a large portion of our society.

Indeed, I was profoundly shocked when I realized how prevalent the incidence of diabetes is in the UAE. It is a large proportion of the population who have diabetes or who are at risk to develop the disease. This means that if nothing is done to prevent this, a substantial number of patients will have complications such as heart attacks, stroke, foot ulcers, renal failure or eye problems. Ultimately, impacting on society both economically and socially. It is therefore crucial that RCDR continues its work in the Ajman Emirate to delivering the best diabetes care possible for all patients.

Overall, I am very impressed by the staff at RCDR. They are motivated, trustworthy, competent, and have a large amount of diabetes knowledge, supporting me as I adjust to my new role.

During my first year, I have seen an unprecedented increase in patient visit volumes. However, we are achieving our KPIs and patient satisfaction scores. This for me is great evidence that RCDR has outstanding staff; making me proud to be the Chief of this Center of Excellence.

Implementing new services and maintaining a high standard of care remains our goal. We have challenges, but I am certain with teamwork it can be accomplished. Even compared to Sweden, this Center has the same high quality of some of the best university clinics treating diabetes."

**Dr. Joakim Bragd, Hospital Director,
Rashid Center for Diabetes and Research (RCDR)**



Center of Excellence in Gastroenterology



In 2018, many positive changes were instituted. Outlining scope of service, guidelines, routines, and procurement of proper equipment was just the beginning, with the major accomplishment being the launch of an endoscopy service - for both outpatients and inpatients - at the beginning of 2018.

With the majority of inpatient procedures being performed in our main operating theater, a full-time endoscopy-nurse has also joined our team. To raise awareness of this service, patient-information leaflets for gastroscopy and colonoscopy procedures in both English and Arabic have also been distributed.

Launch of Specialist Gastroenterology Care for Children

The introduction of a Consultant in Pediatric Gastroenterology also enhanced the Centre's capabilities. Starting with the OPD clinic, the Consultant created guidelines and checklists, and education session for colleagues while also directing the procurement of equipment needed for pediatric patients. This collaboration further intensified with the addition of Pediatric Surgery, together with the Surgical Department, towards the end of the year.

Expanding Services

Percutaneous Endoscopic Gastrostomy (PEG) procedures for patients with feeding difficulties have been performed in addition to Endoscopic Retrograde Cholangio-Pancreatography (ERCP)

procedures for patients with common bile duct stones. The operating theatre nurses are now trained to assist with these procedures being performed three and a half days per week with the number of patients rising steadily.

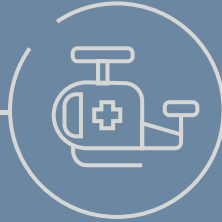
Specialized Care for Inflammatory Bowel Disease

Assigned Gastroenterology Nurse, Muna His Mohamed, is continuing an online course in Inflammatory Bowel Disease (IBD) and will complete a preceptorship at Al Zahra Hospital alongside a fully educated IBD-nurse. This will further strengthen our potential treatments for those with a chronic, long-term disease like IBD.

For patients with chronic iron deficiency and the need for intravenous iron, we have begun treatment with a Ferric Carboxymaltose infusion working together with the Emergency Department. For these patients, this is of great benefit and substantially increases their quality of life. Ultimately, on our wish list would be a 'day-care unit' for many of the patients as they need continuous ongoing care.

Antiviral Treatment for Hepatitis-C

The availability of modern antiviral treatment for hepatitis C was introduced during the year. Increasing the possibility to cure patients with the disease.



05

When Great Care is Critical

Optimizing Surgery at SKMCA



Taking our surgical services to new levels

A different clinic today compared to just over a year ago, after undergoing a major overhaul with significant competency and strategic expansion, our General & Trauma Surgery Department currently consists of five Consultants, six Senior Specialists, four Specialists and three experienced General Practitioners with significant surgical training.

Notable was the paradigm shift where all became certified in Advanced Trauma Life Support. In addition, the team have been trained in Trauma Team Management of severely injured patients, as well as receiving instruction and privileges in modern surgical techniques for both acute-care surgeries and a range of elective procedures.

Laparoscopy Service Commences

All surgeons are now operating, and we are preparing for the expansion and the sub-specialization of elective services such as laparoscopic bariatric surgery, laparoscopic hernia repair, and coloproctology - in collaboration with the Obstetrics & Gynecology Pelvic Floor clinic – as well as endocrine surgery - in collaboration with RCDR - during the coming months.

“We are now performing the vast majority of abdominal procedures laparoscopically - both acute and elective - with minimal complication rates.”

*Dr. Jody Miller MD, FACS
Head of Department, Surgery, SKMCA*

Adhering to Surgical Gold Standards

The Department practices with strict adherence to the World Health Organization's safe surgery protocols with very good outcomes including high patient and personnel satisfaction.

On average, there are more than 60 trauma admissions per month, of which approximately 10 percent arrive with life-threatening injuries. Many lives are now being saved thanks to the intensive trauma training of all physicians and nurses in surgery, orthopedics, neurosurgery, ICU/anesthesia, and emergency medicine.

Adding Plastic Surgery to Our Skillset

During the past few months, reconstructive surgical services have been added to all MOPA hospitals. Inclusive of procedures such as abdominoplasty, breast reconstruction post-tumor surgery, abdominal wall reconstruction, removal

of large skin and soft tissue tumors, surgical management of skin disorders, reconstruction after trauma, pressure ulcers and malignant tumor surgery. Hand surgery such as tendon repairs, re-implantations (after traumatic amputations), Dupuytren's contractures, and carpal tunnel will also fall under the Consultant's scope of service.

Boosting Surgical Eye Care

A very talented Vitreoretinal Surgeon has been added to the team fusing the ophthalmology departments in SKH-G and RCDR. As a result, SKMCA now has a well-rounded service, able to deal with virtually any eye disorder or injury including general ophthalmology, squint surgery, posterior segment surgery, and medical retina diagnostics.

Expanding Pediatric Surgical Care

The first Pediatric Surgeon joined us in November and will begin establishing a MOPA-spanning pediatric surgery service in collaboration with Sheikh Khalifa Hospital – Women and Children. Additional pediatric surgeons & PICU physicians are expected to be recruited over 2019 to provide a high standard of surgical and critical care for children of all ages.



THE FACTS – GYNECOLOGY SURGERY

70% increase in the number of surgical procedures.

Minor gynecological cases dealt with more efficiently.

Complicated minimal invasive Gynecology surgery established 15-20 cases per month.

100% increase in OT utilization 2017 vs 2018

Introduction of laparoscopy for gynecological cases is attracting patients from the Northern Emirates, handling procedures as ovarian and tubal pathology, management of fibroids by myomectomy, laparoscopic hysterectomy for benign disease of the uterus.



Transforming Intensive Care in Ajman



SKMCA's Greatest Success Story

The true transformation of the Intensive Care Unit (ICU) at SKMCA cannot be overstated. From being a 6-bed ward mostly occupied with chronic patients with little active treatment, and a rather poor prognosis for the patient's future life, the ward has experienced an evolution into a vibrant, active, modern ICU, catering to every patient need.

Active recruitment drives mean our ICU is well-staffed, around the clock, with competent physicians, experienced consultants and specialists. The 'Nurse to Patient' ratio is increasing and aims to meet Swedish standards.

Running at around 90% occupancy, the ward can treat 12 patients 24/7, with highly-skilled doctors in-house, around the clock, specialized in modern state-of-the-art ICU competence. Meaning our never-ending influx of patients will be treated with expertise and care.

"Our ICU is one of the outstanding improvements SKMCA has achieved thus far. This transformation has been fought for with determination and zeal to create something necessary. Something that all SKMCA employees alike can be proud of."

Promoting Swedish Surgical Standards

Our Swedish consultants began internal education programs, for both nurses as well as doctors; offering hands-on training and practical demonstrations, inclusive of guidelines and medical protocols.

Newly-hired clinical resource nurses are teaching, training and guiding the less-experienced nurses to function expertly and safely in this active ICU setting.

Hosting the First International ICU Conference in the Northern Emirates

SKMCA was proud to host the first ever international ICU conference within MOPA in the Northern Emirates. The organizing committee managed to book some of the foremost, eminent international speakers in their respective areas, to come to Ajman.

Fully-sponsored by SKMCA and organized by the doctors and nurses within the ICU unit, the symposium was successfully held on 30 November and 1 December 2018 at RCDR.

With more than 80 attendees, the majority being SKMCA nurses and doctors, the symposium covered a broad spectra of modern ICU care including topics such as sepsis and antibiotic care.



MILESTONES ACHIEVED IN THE ICU

Bed capacity increased from 6 to 12 with patient occupancy always above 90%.

Arrival of new equipment including bedside cardiac monitors, ventilators and mandatory ICU staff training for all.

Formulation of 6 small projects for Quality Improvement and Patient Safety. Inclusive of VAP, CLABSI, CAUTI, ORAL CARE, MEDICATION ADMINISTRATION and PRESSURE INJURY.

Organ Donation has been launched under the ICU Department and advanced training in this area.

More specialist and Consultant doctors joined ICU, with 24 hours service of intensivists in ICU.

ICU won the Nurses Day presentation.

After Infection control audit from SKMCA infection control team, ICU team made action plan and worked to optimize efficiency in this area.

Implemented CAN-BAN system or main-store arrangement as per MOPA pilot project.

Upgrading Stroke Care Protocols

Working with Skåne Care

The high prevalence of risk factors such as smoking, obesity, hypertension and diabetes are responsible for stroke and other forms of cardiovascular disease being leading causes of death and disability in the UAE. Optimal care at a stroke unit reduces the mortality rates and contributes to better results for all stroke patients, regardless of whether the patient receives thrombolysis or not.

Therefore, SKMCA had a vision of establishing official stroke protocols and engaged Skåne Care in 2017 to perform a comprehensive review of existing services. As a natural second step, in 2018 SKMCA asked Skåne Care to support the implementation of recommendations on guidelines, processes, clinical practice and control required to achieve an end-to-end stroke process at the hospital.

The journey towards a full Stroke Care Unit was started in January 2018 with a kick-off planning meeting. Over the course of 2018, Skåne Care's

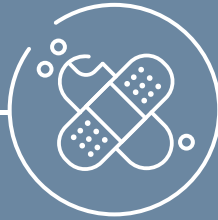
team of stroke experts repeatedly visited SKMCA to provide support where needed.

Both on and off-site support was required as well as an extended in-depth training program focusing on the acute stroke process and stroke unit care. As a result, crucial areas such as early stroke alert, stroke care, mobilization, swallowing assessments, and the National Institutes of Health Stroke Scale (NIHSS) have been implemented. A mix of workshops, lectures, case discussions and hands-on training sessions have been a success.

The project, and the Stroke Alert process, is a multi-functional collaboration involving staff from different professions and departments such as the Emergency Department, Coronary Care Unit, Radiology, Internal Medicine, wards, and more.

The change towards excellence is a long-term process and the drive towards such a vision must be owned and rooted with the local management and operational team at SKMCA.

SKMCA Stroke Alert went live on November 11, 2018 and it has made a difference to patients from the start, with the stroke patient receiving higher prioritization and quality care following the new implemented stroke care guidelines. Greatly improving the potential to reduce mortality, encouraging a stronger recovery and life quality.



06

Prioritizing the Patient Experience

Ensuring a comforting yet seamless encounter for all those coming through our doors

Inclusive Maternity Care for families

Three 'newborn' maternity delivery packages launched

“The maternity care packages we offer are very competitive. Especially, if you compare the services including free epidural anesthesia for the first six months from launch date.”

Muhammad Fazil, Director, Revenue Cycle Management

Full-service, SKMCA has a lot to offer in fetal-maternal care including the education and empowerment of patients and families, specialized services with advanced diagnostics, the treatment of maternal and fetal complications, combined with a competent delivery service, and neonatal care. All presented in one seamless pathway for continuous care.

With three brand new maternal and delivery packages, great care is now accessible to everyone. Including a professional pregnancy surveillance program - available for every pregnant woman - creating better outcomes for both mother and child.

The successful launch of the packages is proof of departments working cross-functionally with contributions from the clinical team at

SKH-WC, and the Departments of Revenue Cycle Management, Patient Affairs, and Happy Customer.



Connecting everyday

Becoming a customer service haven



Making customer service a priority is something we are committed to. Hospitals are places where people are often anxious, stressed and depressed, visiting for a variety of reasons. So, shouldn't hospitals be the best at making their visitors feel comforted, satisfied and completely at ease?

The answer to that is a resounding 'yes'.

Training is a crucial component to improving our customer service, but further to this, we emphasize that we, together as a team, must strive for success in this area every single day.

This starts with understanding why we are here and why we do what we do.

Customer happiness and satisfaction form part of every SKMCA employee's daily job. Each department is trained, equipping trainees with the necessary skills to achieve a better environment for every visitor. The training focuses on **H.E.A.R** with a capital H, as in the Here and now, with the aim to create common tools, so the entire hospital complex is aligned, as there is nothing better than a united front when someone steps through our doors.

Having trained nearly 400 employees this year, we are seeing improvements and a genuine desire from all participants to make this a better working place of care. Further, all trainees are educated on the problems and challenges SKMCA faces, hoping to solve them through mutual collaboration; creating a working environment we like, in order to translate that happiness to our visitors.

Here and now, be present and focused and listen to the person.

Establish good emotional rapport with patient/relatives. Be empathetic.

Act according to the patient's needs.

React with a proper plan for the patient/relatives.



Refining the Patient Experience

Making outstanding communication a key focus

The Patient Experience (PX) is an integral part of elevating SKMCA's general reputation to retain existing patients and attract new ones. PX includes all interactions the patient has with SKMCA and is the cornerstone of patient-centered care. It is realized via actual human interaction and in the care environment during the patient journey - including staff engagement from the front desk to the back office. This is a key success factor and where SKMCA's brand promise must be delivered.

Being Pro-active in Our Self-assessment

Several initiatives over the year were aimed at targeting and improving PX, including new and enhanced services, communication, and training. However, SKMCA still has improvement potential to reach a point where we become 'The Patient's First Choice'.

Ultimately, our target is to generate promoters of SKMCA. Looking to the future, SKMCA will use digital customer satisfaction surveys, mystery shoppers, general research as well as patient summits where patients can raise their opinions to keep an open dialogue with the view to further refinement.

Social Outreach through Digital Channels

Social media is a vital part of our digital strategy to build engagement with our community as well as provide useful information about our services. Based on two core components, consisting of long-term brand messages and short-term promotion messages, this channel helps keep our patients and the community up to date with events at SKMCA, and through this we can amplify our message that we are trusted lifestyle change experts who can help community members make healthier choices for a richer life.



Understanding a community's needs

During 2018, we collaborated with a research partner, as SKMCA wanted to better understand the community's expectations of healthcare and their patient experience at our hospital. Our main goal was to comprehend, on a deeper level, how and if SKMCA is meeting patient needs as a medical service provider and where optimization lay.

What Patients Want

Hospitals are often considered as business enterprises by community members, and many surveyed had negative perceptions when it came to admissions and treatment. Ultimately, most desire ease of admission, good treatment outcomes, and a level of ambiance in the patient journey – including comfort, cleanliness and added luxury. Professional conduct featured strongly in responses and played a fundamental role in the patient's decision-making.

However, trustworthiness was deemed one of the biggest influencers when choosing a medical service provider. The overall sentiment from the local community is that government hospitals have more credibility as they are not driven by profits alone. They are bound by their duties and not profit margins with a focus on hiring competent medical staff and are considered more cost-effective overall with higher standards of care.

The Way Forward for SKMCA to Improve Patient Satisfaction

The short-term requires focus on two key service components:

Optimizing patient flow in the Emergency Department

Treat emergency cases with due efficiency and care; eliminating obstacles that delay the patient receiving treatment in a timely manner. Strong emergency services are considered an added advantage for hospitals, especially in Ajman, RAK and Sharjah, where options are limited.

Optimizing the front-desk patient experience

Train front desk staff to exhibit positive engagement and a proactive attitude towards patients. The initial experience creates lasting impressions and staff must be equipped to provide sufficient and welcoming assistance to incoming patients.



How is SKMCA achieving these goals:

*SKMCA is focusing on Customer Happiness training modules to enhance staff competence.

*A queue-system was introduced for walk-ins (early 2019) to speed up efficiency and promote fair access to all.

*Simplification of registrations, admissions, and approvals are required.

*Data accessibility and reorganization will speed up registration processes.

Over the long-term:

For the SKMCA brand to have wider appeal, all sectors of the UAE population need to be engaged. We need to change the perception that we are only serving the local Emirati population and the expectation that being a governmental organization makes us susceptible to a bureaucratic and casual approach; driving the message to key target groups that SKMCA is stepping into the future with a culture of excellence and professionalism.

It will be beneficial to advertise our services and efforts, while simultaneously highlighting our achievements in patient care and medical science. Ultimately, becoming a place where favorable outcomes, patient engagement, and positive experiences shape the success stories of the community of the Northern Emirates in the years to come.







07

Making Quality Happen

Every step of the way, in every way

Protecting public safety through prudent antibiotic use



Anti-microbial stewardship at SKMCA

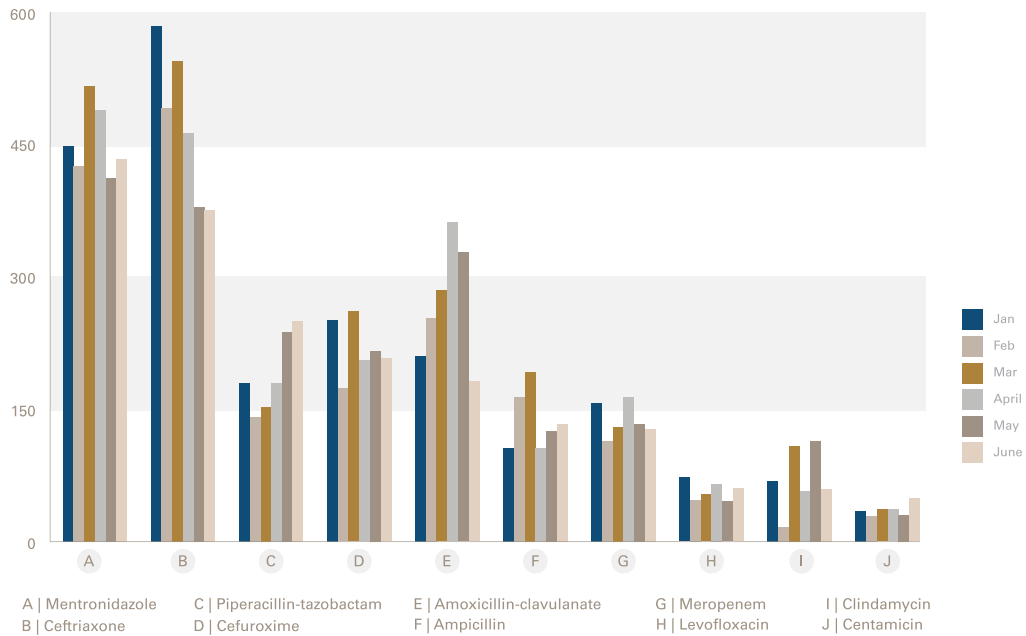
First introduced in the 1940s, the consumption rate of antibiotics has increased dramatically in human medicine, but also in veterinary medicine, in food production, and in agriculture. All antibiotic use, both well-motivated and unnecessary, contributes to selection and the development of antimicrobial resistance, which is a serious threat to global public health.

As bacteria become more and more resistant to antibiotics, this threat challenges the achievements of modern medicine, and there is a risk that we will revert back to a time when common infections and small injuries could kill, as concluded in the WHO Global Action Plan on Antimicrobial Resistance.

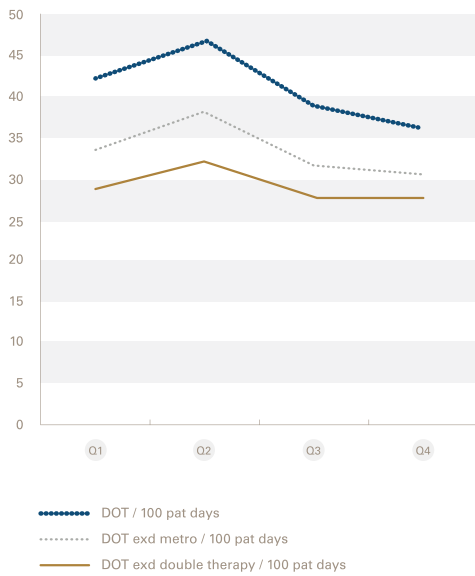
Responsible and appropriate use of antibiotics should be a highly prioritized goal in all healthcare settings and in line with this, an Antimicrobial Stewardship Program was first launched in SKMCA in December 2016 and has since been developed throughout the hospital.

TOP 10 ANTIBIOTICS USED AT SKMCA (2018)

Days of therapy (DOT) with antibiotic



Days of antibiotic therapy per 100 inpatient days



The Antimicrobial Stewardship Team leads the actions to improve, coordinate and measure the appropriate use of antibiotics by promoting the use of an optimal antibiotic drug regimen for the individual patient when indicated, as well as avoiding unnecessary antibiotic use, and the use of antibiotics with high-resistance selection potential. A strong leadership devotion parallel to personal engagement by responsible physicians and hospital staff is key to improving antibiotic use and that is what we are aiming for at SKMCA.

By adhering to these principles, the antibiotic use in SKMCA during 2018 has shifted towards a more ecological prescribing pattern, without adding patient risk; contributing to excellent care for our patients both today and in the future.



Making SKMCA child-friendly

The implementation of UN children's rights

The goal of this project was to become a certified Children-Friendly Hospital by using the Swedish evaluation method called 'Star'. Initiated by Jessica Jubner Wegbratt, Unit Manager of Pediatrics at the Women and Children's Hospital, the method is based on the UN Convention on the Rights of the Child (1997), NOBAB (a Nordic Network of Children's Rights) and EACH (European Association for Children in Hospitals) evaluating if each hospital meets the standards in five main quality control areas: Process of Care/Organization, Environment, Children's Security, Learning/influence and Children's Rights.

Incorporating each of SKMCA's four hospitals to reach our goal, we are working on our policies, to make sure that they are considerate to children, while simultaneously elevating the core competencies of our staff to ensure they are well-trained to take care of the children. Last but not least, SKMCA is remodeling our environment to be child-friendly and safe.

Currently, we are placing emphasis on shifting focus from the parent's perspective to the child's perspective. For instance, by preparing the child before any procedure, we will talk directly to the child instead of the parent, and also hand out Children's Satisfaction Surveys addressed to the child directly.

Since July 1, 2018, these surveys have been distributed and we now have a Standard of Children Rights displayed in SKMCA Hospitals located adjacent to our displayed Standard of Patient Rights.



"We want all children entering and experiencing SKMCA - either as a patient or a relative - to feel safe, listened to and treated with respect."

Jessica Jubner Wegbratt,
Unit Manager of Pediatrics at
the Women and Children's Hospital



SKMCA Quality Day

Dedicated to communicating how SKMCA is a safer and better option, this is a day where all SKMCA employees are educated on SKMCA's Patient Safety Culture, the Green Crescent protocols, and other tools for enhanced internal and external communications that provide the patient with a smoother and overall better patient experience.

Most importantly, internal improvement projects were presented and discussed. The focus being on celebrating the goals achieved and evaluating how we can further improve.

SELECTED WINNERS

Catheter Stewardship

Khalid Alshloul

Hip Fracture Process

Jonathan Berglund

Reduction of Episiotomy Rates

Annat Joseph

PROJECTS PRESENTED

Waiting Times in OPD

Helena Tarnow

Catheter Stewardship

Khalid Alshloul

Hip Fracture Process

Jonathan Berglund

Antibiotic Stewardship

Ulrika Snygg

Ultrasound Cannulation of AV-fistula

Nour Saada

Needle Prick Injuries

Hina Koja

Reduction of Episiotomy Rates

Annat Joseph

Reduction of IV

Complications in Paediatric Care

Sheeja Thomson

Efficiency Improvement in RCDR

Per Oskarsson





08

**Taking Action for
a Brighter Future**

One giant leap for bariatric surgery

Launch of the Bariatric Surgery Visiting Physician Program

From September 28-29, 2018, SKMCA hosted the very first program of this kind. Planned by Dr Mikael Ekelund, Consultant Surgeon at Sheikh Khalifa Hospital General, in collaboration with the Education, Training and Research Department, the first day saw more than 30 surgeons and operating theatre nurses do practical laparoscopic training at the Clinical Training Centre, University of Sharjah.

The second day was filled with informative lectures focusing specifically on obesity and its treatment employing obesity surgery. Professor of Surgery, Magnus Sundbom, from Uppsala University Hospital, Sweden, enlightened the audience with several useful lectures. Finally, Mr Tobias Antonsson, Master of Surgical Nursing, and an experienced bariatric nurse spoke about outpatient care and the need for a multidisciplinary approach to obesity.

The inspiring program was a resounding success and a great starting point for the introduction of bariatric surgery at SKMCA.



Investing in our best asset, our people

During the year, the recruitment of staff was a top priority, however, Human Resources (HR) made consistent efforts to focus on the intrinsic development of all current SKMCA staff.

Enhancing Communication through Language Training

English classes for UAE nationals were held as a result of feedback captured through the Training Needs Analysis and ongoing meetings between the Emiratization Department and the UAE staff.

One of the goals was for the line manager, the UAE individual and SKMCA's Human Resources Department to work together to create an individual development plan for each UAE employee.

This initiative will drive the necessary education and training that each employee will receive over the coming months and years to fill any gaps in their knowledge, skills and abilities.

Upgrading Quality in Performance Reviews

Line managers and heads of departments also received training from the Chief Human Resources Officer. A commonly overlooked area of training is with supervisors on how to conduct a well-rounded, detailed performance appraisal.

To address this need, multiple sessions on performance management, covering both the theoretical and the practical, were held to help calibrate the managers on terminology, practice and understanding of their roles in the performance management cycle.

Exercises to test perception and observation demonstrated the need to maintain objectivity and these were applied to scenarios to illustrate a common experience each manager encountered. At year-end appraisals, HR, for the first time, conducted a review of all appraisals to ensure adequate documentation, feedback and adherence to both policy and best practices that were shared during the workshops.

Recruitment Drives in Jordan and the Philippines

Recruitment saw another TMO-led nursing campaign to Jordan and the Philippines in the fourth quarter. Once again, the assistance of the Ministry of Health staff in conducting the Licensing Examination proved invaluable, ensuring all candidates interviewed would have already passed, further shortening the hiring cycle.

Automated Payroll and Time-tracking

As the year came to an end, the automation of payroll systems, time and attendance was nearing its final testing before implementation. This is expected to vastly improve the efficiency and speed of the HR team.

Great care starts with great nurses

Participating at the regional international nursing awards



The International Council of Nurses (ICN) sponsors awards that recognize outstanding achievement; encouraging initiative and talent. At ICN's regional conference in Abu Dhabi, SKMCA nursing staff were given the opportunity to attend and meet their fellow nursing colleagues in the spirit of idea-exchange and sharing of expertise.

The conference theme was 'Nurses: A Voice to Lead – Ensuring Access to Healthcare Through Leadership, Innovation and Collaborative Practice'. Featuring content-rich presentations on the Nursing Now campaign, a focus on the regional challenges of non-communicable diseases, innovative care models, plus updates on artificial intelligence in healthcare informatics, the ICN conference was a worthwhile endeavor.

Co-hosted by the Emirates Nursing Association (ENA) in collaboration with SEHA International Nursing, Midwifery, and Allied Health Conference, SKMCA had the opportunity to present our excellent work through submitted and accepted extracts.



The Patient Experience
of The ICU Environment
Susanna Hojden

Prevention of Peripheral
IV Cannula Complications
Haleema Mohammed

Organ Donation from a Swedish
Perspective and the Reduction
of Wait Times in Outpatients
Helena Tarnow

Improve Quality of Surveillance
Data Using Telephone Calls for Post-
Discharge Surveillance of Surgical Site
Infection Following General Surgery
at Ajman Hospital In the UAE
Tabrika Al Shaibah

Zero Tolerance to Pressure Injury
Sigi Simon

The Midwife's Role in Fertility Planning
Andrea Gartner

Initial Increase in Glucose Variability during
Ramadan Fasting in Non-Insulin Treated
Patients with Type 2 Diabetes Using
Continuous Monitoring System
Nesrin Aldawi

Sharing our endocrine expertise

Participating at EDEC

Diabetes specialist nurses from the Rashid Centre for Diabetes and Research (RCDR) continue to accomplish significant achievements. Growing in confidence and scope, SKMCA is proud of what this integral Centre of Excellence is achieving and its future capabilities.

Respectively nurses Zainab Mahmoud Al Abadela, Sijomol Sakaria, Mahra Murad, and Nesreen Ahmad Arafat Aldawi, in cooperation with the Diabetes Clinic Team, successfully participated at the Emirates Diabetes and Endocrine Congress (EDEC) with poster presentations on the following topics:

‘Driving and Diabetes’, ‘Hypoglycemia Staff Knowledge’, ‘Injection Technique’ and ‘Initial Increase in Glucose Variability during Ramadan Fasting in Non-Insulin Treated Patients with Type 2 Diabetes Using Continuous Glucose Monitoring System’.

A special mention must go to the ‘Driving and Diabetes’ educational poster which received third prize in the staff competition.



Zooming in on local talent

Underlining SKMCA's commitment to the development of all Emirati staff

SKMCA is committed to the development of our Emirati staff and building strong local capacity in both our clinical and administrative roles.

Embarking on an ambitious education program to equip Emirati staff with the latest skills and experiences in cooperation with renowned expertise from Sweden, SKMCA is delighted to offer opportunities for junior doctors to undertake a multi-year Residency Program in cooperation with Skåne Care.

Doctors undertaking the Residency Program will have access to expertise from Lund and Malmö Universities, some of the most well-recognized medical training Universities in Europe. In addition to the Residency Program, SKMCA will partner with Skåne Care to offer a Fellowship Program to more senior doctors looking to specialize in a chosen field of Medicine.

This Fellowship Program will equip doctors with the skills to return to SKMCA and take up senior clinical roles within one of our facilities or Centers of Excellence.

Both programs are offered as multi-year clinical programs designed around an individual curriculum for each participant. Part of the program will include learning the Swedish language so that participants can easily converse with patients as part of their learning journey.



Story of Dr Amna Al Shaali Deputy Chief Medical Officer, Sheikh Khalifa Hospital-General

As a dedicated and ambitious Emirati woman, a specialist in Internal Medicine and a mother to five children, Dr Amna Al Shaali is a self-described 'perfectionist' with a calm outlook and helpful disposition.

Having been certified in Internal Medicine with the Arab Board of Health Specializations Council, this ambitious doctor is looking forward to sub-specializing in Endocrinology and Diabetes care. Having contributed to the development to the healthcare system at SKMCA through her position as Deputy Chief Medical Officer, we asked Dr. Amna Al Shaali about her future plans.

What are you currently working on?

At the moment, I am studying towards my Master's in Healthcare Management through RCSI. I also plan on attending special courses in Leadership and Quality in the near future, to further my knowledge in this area.

What has your time at SKMCA taught you?

Working at SKMCA under Swedish management has enriched my experience and knowledge through considerable exposure to new leadership and management styles. I have learnt that



delivering high-quality patient-centered care can be achieved through staff engagement and commitment supported by standardized policies and procedures.

What would you like to say to future Emirati generations?

The UAE needs highly-qualified Emirati professionals in different healthcare-related professions - both in clinical and managerial roles. It is our responsibility as Emirati nationals to develop ourselves as individuals to be competent in our areas of expertise, to be able to give back to the country that made our career success possible.



"Working at SKMCA under Swedish management has enriched my experience and knowledge through considerable exposure to new leadership and management styles. I have learnt that delivering high-quality patient-centered care can be achieved through staff engagement and commitment supported by standardized policies and procedures."

Dr Amna Al Shaali – Deputy Chief Medical Officer of Sheikh Khalifa Hospital General



Story of Dr Khawla Al Blooshi Deputy Chief Medical Officer - Sheikh Khalifa Hospital – Women and Children

Certified by the Arab Board in Pediatrics and by the American Board for Medical Quality, Dr Al Blooshi is interested in health quality and health management leadership. The driving force behind her success is believing in the UAE and its leadership in giving women and children access to top healthcare and education.

What have you achieved this year at SKH-WC?

Many changes have occurred at the Women and Children Hospital. We have begun the launch of new services and our maternity care patient intake is growing. My aim is for this hospital to become a leader in women and children's health – for Ajman and the whole of the UAE.

Some special highlights this year include the launch of the Special Care Baby Unit (SCBU), epidural analgesia for women who are in labor, the launch of the Enty Al Hayat clinic where we educate the women in the Northern Emirates about pregnancy and post-natal care.

What have you learned through your experiences with SKMCA?

Life is not easy, and you will find many obstacles and difficulties. You have to take on all challenges. Whether you pass or fail, you always learn something. Learning from your mistakes is more

important than just succeeding in any mission. We need to ensure that whatever we do, we are learning.

I am also interested in General Pediatric and Quality in healthcare, and I believe that we as clinical staff need to provide exceptional care to all patients, especially women and children, and this is supported by our leaders' vision in UAE. Being a physician and a manager at Sheikh Khalifa Hospital - Women and Children gives me the opportunity to dedicate myself to achieving our leaders' vision.

What is your message to future generations in the same field?

Being a UAE national doesn't mean that you can have everything without doing something in return for the country. We should follow the example of our eminent father Sheikh Zayed Al Nayhan who showed us that each Emirati citizen is responsible for enhancing and doing good works for the betterment of our communities and the larger reputation of the UAE as a whole. Our leaders and rulers are here to support us, and hard work is necessary to succeed.

His great example is a special legacy for us to follow.

Also, I would like to emphasize that working with women and children is something to be proud of and has a great impact on the soul. Helping each other is the most fundamental form of kindness. Therefore, I am privileged to work in the hospital I do.

Positively impacting the outpatient experience

Revamping efficiency from the inside out

In the Outpatient Department, we have many challenges related to the implementation of various systems aimed at reduced patient waiting times, more efficient workflow, and better overall patient service.

To this end, we are working in several groups throughout the hospital. This close cooperation with the relevant departments is fruitful, and even if we have not yet reached all our KPIs, I know that we will see substantial improvement that will positively impact our patients; ultimately resulting in a better workplace for all our staff.

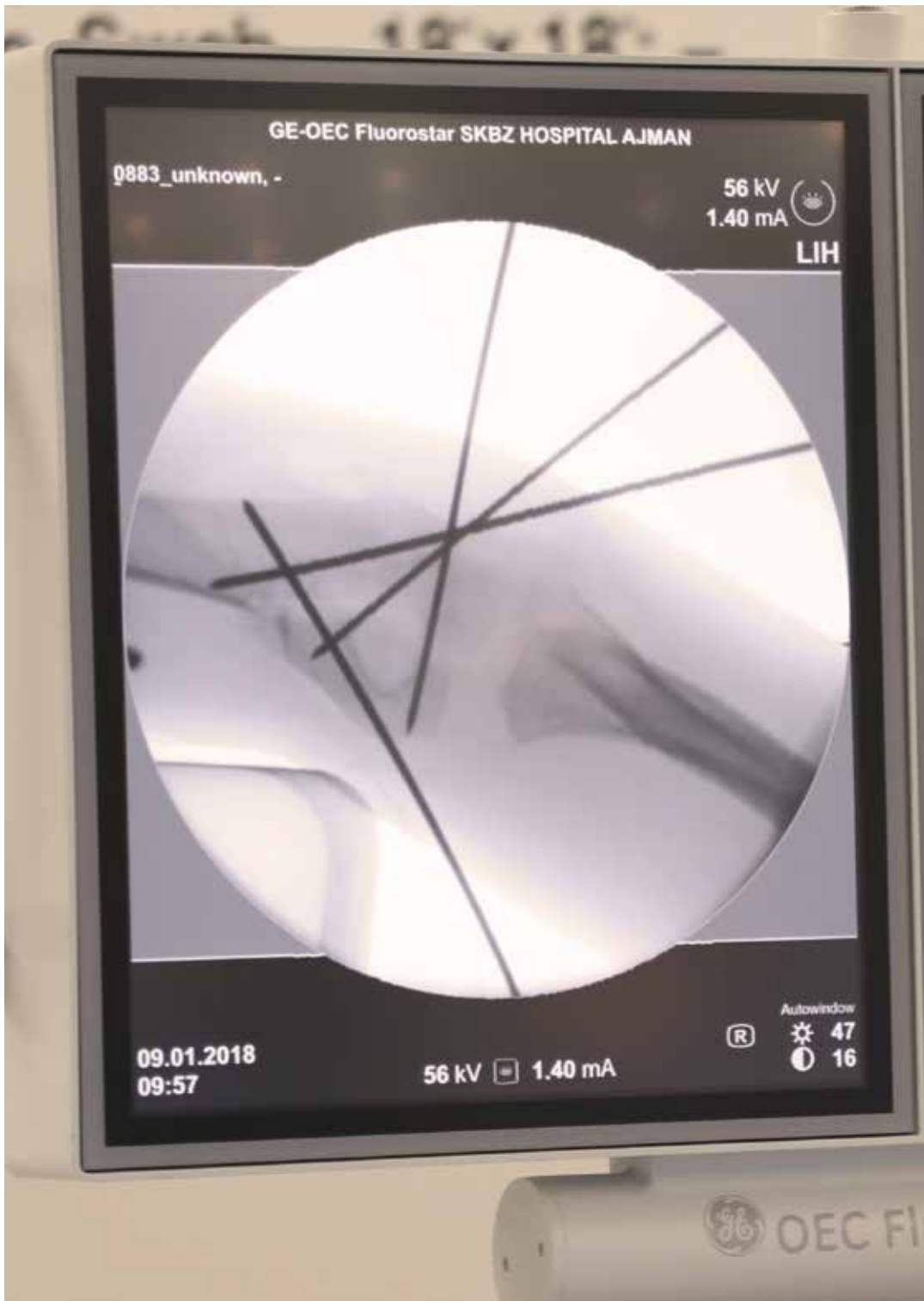
Since last year, we have integrated many new specialties such as Neurology, Plastic Surgery and Pulmonary Medicine into our current offerings with the number of patients increasing compared to previous years.

Work group initiatives include:

- A call center to deal with phone calls to SKMCA with easy possibilities to reach each OPD desk for physician appointments.
- A queue-system to provide equal access system for all patients.
- Processes for rules and information to patients, so we can have order and remedy.
- Phone calls to our patients before their appointment to reduce the number of missed appointments.
- Establishing processes so patients receive a physician appointment to eliminate unnecessary waiting.

The challenge is to optimize the workflow for our many outpatient clinics and ensure that everyone has tools for safe patient care. I feel very proud of all the hard work done by our devoted staff and their engagement in providing patients with the best possible care.”

Helena Tarnow, Acting Unit Manager, Outpatient Department





09

Constructing the Future, One Brick at a Time

Energizing the community through renewal

Sheikh Khalifa Hospital General Gets a New Look

'Modern' 'brighter' and 'airier' are just some of the words used to describe the updated entrance at SKH-G. Construction was carried out by the same contractor who did the refurbishment of the Operating Theatres and the Emergency Department. With energy-saving lighting installed and eye-catching steel-work, the new look gives an added sense of rejuvenation to the existing building.





Quick wins, better outcomes

Launch of Updated Operating Theatres

In the fall of 2018, the two remaining refurbished operating theatres (OT) were taken into operation, meaning that SKH-G has now gone from five small and outdated OTs to one large OT for orthopedic cases and three refurbished and updated OTs. The renovation was part of the Quick Wins Project and consisted of a complete refurbishment, including walls, floors, new ceiling, new ventilation with laminar air flow, new electrical system, updated energy-saving LED lighting, and in some parts, new medical equipment. In addition, all surrounding areas were refreshed as well including changing rooms, bed-hold area, PACU and reception.

Revamped Emergency Department

During the last quarter of 2018, SKMCA moved into the refurbished Emergency Department with finishing touches being completed for the opening in January 2019. A total renovation and fit out together with an expansion into what used to be the psychiatric ward, has given the Emergency Department a much-needed expansion. Updates included installations of floors, walls, ceilings, lightings, bedhead units, electrical system, and other necessities.

New Look, New Energy

Upgrading the façade of SKH-G and RCDR was successfully achieved through adding aluminum slates, which gives the buildings a unified modern look, further cementing the expression 'One SKMCA'.

The exterior wall around SKMCA has also had a facelift with a new coat of paint and new fence, which allows passersby a glimpse inside the walls.

Future plans for the extension and refurbishment of SKH-G

During 2018, representatives from SKMCA held numerous meetings with our counterparts at the Medical Office at MOPA, and also with architects and project managers from the consultants at Healthcare Designers and Project Managers, to discuss the extension and refurbishment of SKH-G, together with numerous other improvement projects within the same scope.

Plans so far comprise of the following:

The extension of SKH-G will contain a new ED (approximately five to seven times bigger than current), six OTs sized to the international standard - one of which will be large enough to double as a hybrid OT - and an ICU/CCU ward with a total of 24 beds.

Refurbishment of all the clinical areas in SKH-G will include, among others:

- o Wards with single patient rooms
- o A new imaging department
- o Updated VIP and royal suites
- o Centralized inpatient pharmacy
- o Centralized lab services

Refurbishment of the public areas, to mention a few:

- o New lobby and main reception
- o Updated staff cafeteria
- o New elevators

All meetings have been constructive, and we are several steps into the process of agreeing on a final design. However, construction will most likely start sometime from now.



10

**Into the
Community**

Encouraging mothers to make healthier choices

During 2018, SKMCA continued our outreach events in the community to educate many on the importance of healthy lifestyle choices, child care, and safety.

Under the theme 'Together Towards a Healthy Society', SKMCA has hosted several outdoor events in the community parks of Ajman. Topics covered included obesity, diabetes, child safety and care, children's rights and child abuse. These events were very popular and well-attended. Many received free screenings for blood pressure, blood glucose and their BMI while having the opportunity to meet the SKMCA physicians and nutritionists.

In addition, midwives and nurses enjoyed sharing their knowledge about pregnancy and child care. The goal being to share expertise and discuss relevant topics such as the importance of wearing a seat belt, using a proper child booster seat, wearing a helmet when biking, and keeping medicines in a locked cabinet.

Promotion of the Enty Al Hayat Clinic was a key goal and care was taken to enlighten the attendees on the services provided at the clinic including education on pregnancy, delivery and newborn baby care.

We expressed what SKMCA is proud to offer - healthcare with a Swedish touch – with emphasis on our successful pregnancy care program, which is available for every pregnant woman, to significantly improve health outcomes for both mother and child.

Celebrating 10 years of renal care excellence



Established in 2008, in January 2018, the Renal Unit celebrated 10 years of support to our patients with long-term chronic kidney disease. The day of celebration included patients being invited to attend lectures and it was an appreciated break from the usual day-to-day routine.

From 2008 to date, about 70 000 sessions of dialysis have been conducted and the unit currently serves 66 patients with their treatments, performing emergency dialysis as well as dialysis in the Intensive Care Unit.

Diabetes is a major cause of chronic kidney disease and the Renal Unit is a fundamental part of the Centre of Excellence at RCDR. In January, we were able to further augment our capabilities with two new nephrologists joining us from Dubai.

Community Outreach

In March, nurses and physicians hosted an awareness event with the theme 'Kidneys and Women's Health'. We checked the attendees BMI, blood sugar level, and blood pressure and each woman had an opportunity to speak with our resident nephrologist. Over three hours, more than 120 women received a personal plan for

increasing their individual health - minimizing any risk factors that may lead to disease.

A Year of Firsts

In June, we performed the first kidney biopsy, and in July, training of nurses in ultrasound-led cannulation of AV-fistula was implemented. This method will increase patient satisfaction and improves patient care.

Recently, the unit started peritoneal dialysis and two patients have been shifted from hemodialysis to date. Our aim is to enable patients to have more freedom by having dialysis at home.

These improvements coupled with complementary therapies have made it necessary to start pre-dialysis counselling clinics, which will be led by a consultant and nurse.



Community awareness events



Anti-Obesity Event

As part of our social responsibility to promote health awareness in our community, SKMCA collaborated with the Agriculture and Public Parks Department and the Municipality and Planning Department in Ajman to organize an awareness event at the sports park under the theme 'Together Towards a Healthy Society'. The event focused on how to fight obesity and free medical screenings were available to the public along with children's entertainment.

World Food Day

In celebration of World Food Day, the Nutrition Department organized a two-day awareness event under the name 'Light on Stomach'. The aim was to raise public awareness about the intrinsic role of the digestive system, and its most common associated problems and diseases, along with tips on how to maintain a healthy gut.

Special thanks to His Excellency Dr Sheikh Majid Bin Saeed Al Nuaimi, Chairman, Ruler's Court, Ajman, for his presence at the opening ceremony of the World Food Day Exhibition at SKMCA.

World Diabetes Day

As one of the most comprehensive Diabetes and Obesity care centers in the region, World Diabetes Day, marks a significant day for Rashid Centre for Diabetes and Research (RCDR). This day aims to increase awareness of the effects of Diabetes and its complications. On 14 November 2018, RCDR celebrated the event in the Sports Park in Ajman offering free screenings to the community, educating people on how to improve their lifestyle to avoid this life-threatening disease.





11

Empowering Technology

Revolutionizing patient care through digital transformation

Using information technology to drive our patient-centered approach to healthcare

In the past, Information Technology (IT) was considered a mere support function in the healthcare domain. Now, every single aspect of healthcare delivery has IT integrated into it, with it becoming a core function itself. In addition, SKMCA believes in transferring all technological benefits to the primary recipient, the patient. Therefore, all technological decisions and enhancements are driven by this belief.

To this end, over the past year, SKMCA changed its information system landscape to enhance the patient experience, ensuring we are heading towards a seamlessly-integrated system. In essence, a digitally-transformed experience where turnaround times are reduced at any given point, with no need to wait for a paper record or information.

Any caregiver will have comprehensive and complete access to a patient's clinical information – one single version of truth - irrespective of the clinics or Centers of Excellence the patient has visited. However, this process needs further refining before being complete.

Enhancing Business Intelligence

Data remains useless until it is transformed into information, and ultimately into wisdom, which is, in short, Business Intelligence. This was a key focus area for the IT team and our efforts to optimize our Business Intelligence capabilities will continue into 2019.

The Journey to the Smart Patient Experience

At SKMCA, we want patients to feel and be empowered, amplifying their patient experience. This thought was the driving force behind the creation of the new technology center. Realizing it was one of the remarkable achievements in 2018 and the first step in optimizing the Smart Patient Experience.

With regards to the youngest SKMCA member, Masfoot, this hospital has had a remarkable journey in 2018. Completely Wi-Fi-enabled, Masfoot is well on its journey from ambulatory to a fully-fledged care center with the technical team already working at an accelerated pace to extend the Hospital Information System (HIS) to a 24/7 feature.



Integrating Artificial Intelligence into SKMCA

The UAE is the first country in the world with a dedicated minister for Artificial Intelligence (AI) and we wish only success to H.H Omar Bin Sultan Al Olama, Minister of State for Artificial Intelligence, in his role. So, it is with great pride that SKMCA went live with artificial intelligence this year. A prime milestone in our ongoing technological plans, this project will directly benefit the Radiology Department.

Currently, AI capabilities are being used to support our radiologists in their radiology reporting. Marking problematic areas through heat mapping, this assists radiologists in increasing their diagnostic accuracy.

While the technology is only being used with chest x-rays for the moment, the plan is to augment services gradually. In addition, AI is enhancing reporting assistance in our Screening Centre Project (LIAQ).

AI has also proven its significance in the early detection of diseases with a high accuracy rate. Currently, the process of implementing AI in the domains of diabetes and radiology studies is being achieved and perfecting of the algorithm is ongoing.

In this scenario, we used the AI category called 'Narrow AI'. Narrow AI means, a machine-based system to address a specific problem. The approach we used is the 'Peer AI', where machines will do things the same way humans do, but the verification and the final word is always with the human. I prefer to define this as 'Collective Intelligence' rather

than Artificial Intelligence, as neither machine nor human can do the show alone. Technology doesn't make any sense if we can't apply it to real life. Thanks to everyone for the fantastic support. I would like to thank the Fuji Team, our data scientists, the SKMCA Radiology Team and everyone behind this project, who have made it a success."

Joseph George, IT Director, SKMCA

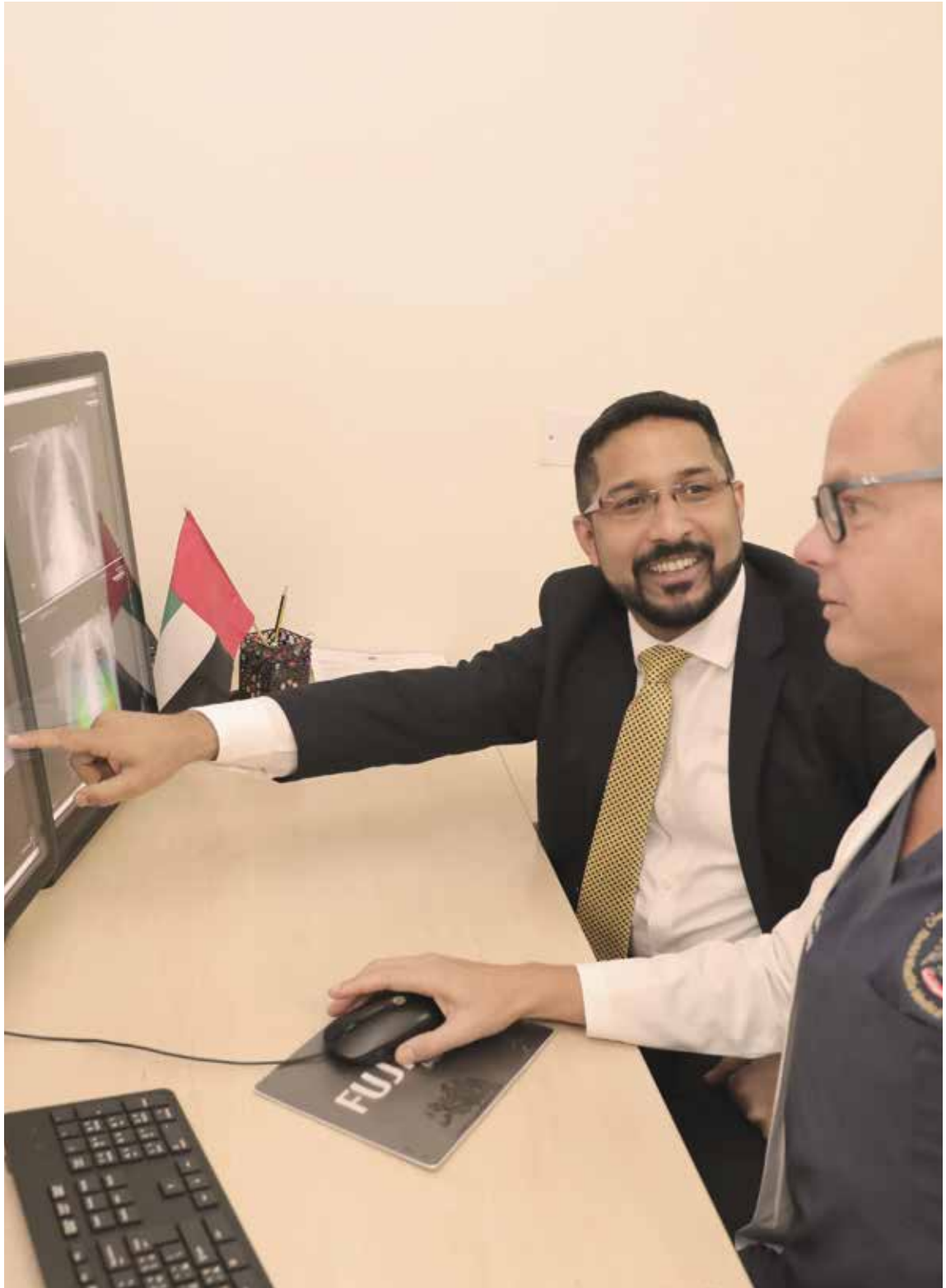
Helping Our Doctors Talk to Each Other

In this era of instant communication, productivity can be tremendously improved by a professional messaging medium, vastly enhancing operational efficiency. To this end, the entire SKMCA group is coming under a single IP messaging grid, irrespective of physical location.

In addition to this, Skype for business has also proved an invaluable and efficient channel in our workspace, with the IT support team receiving support requests through this medium.

Upgrading the Information Technology Infrastructure

One of the major goals for the team during the year was to enhance SKMCA's IT backbone infrastructure. Looking back, all systems were successfully upgraded, to the highest standard, with negligible downtime. One of the key milestones being the commissioning of a state-of-the-art data center with disaster recovery capabilities.





12

Digitalization and Process Improvement

Focusing on billing processes

Current technologies have enabled us to focus on stabilizing and automating the financial processes including online banking, management reporting, and billing. Emphasis on enhanced shared processes with HR, Procurement, and Strategy have also been a central point. Cost control mechanisms have been incorporated, with follow up measures to ensure cost control within areas such as manpower, education and training, and operational contractual costs.

A new external reporting format was introduced in the first quarter along with improved decision support from internal management reporting. In addition, an investment policy was implemented in the second quarter to ensure improved governance and control for SKMCA's future investments in medical equipment, facilities, and IT.

Compared to 2017, transactions have grown three-fold. The automation of financial reporting and accounting is underway to mitigate the

steep increase in the number of transactions SKMCA deals with as a result of patient volume growth.

To further support automation, other system-oriented initiatives included the introduction of online banking, as well as steps taken towards an in-house roll out of a full payroll solution for a more digitalized SKMCA. Blueprints have also been made for all major finance processes, in order to visualize and support further optimization potential going into 2019.

Automation of transactional processes

The journey towards a cashless system

Within Revenue Cycle Management (RCM), the priority has been on achieving full billing capabilities through RCM system solutions and manpower capabilities. In order to achieve this, significant training and development of Patient Affairs staff has been conducted in addition to all relevant clinical staff. In the second quarter, SKMCA began accepting e-Dirhams as a payment option. A step towards becoming a cashless hospital.



Extending our insurance network

SKMCA has continued to contract insurance companies with eight insurance partners being officially added. Guarantee of payment has been extended by 19 insurance organizations and talks with another nine companies are underway and shall be finalized in due course depending on availability of resources – coders and software solutions.

Overall, as of December 2018, SKMCA has reached approximately 6 700 insured patients and approximately 13.7 million AED in revenue.



OFFICIAL INSURANCE PARTNERS

Adnic	Al Khazna
Daman /Thiqa	Neuron
Mednet	Afiya
Pentacare	Almadallah



C

Appendix

Appendix



Patient Characteristics

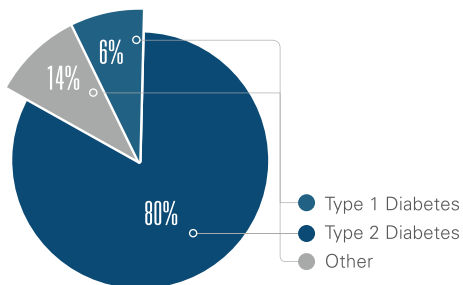
In 2018, 45362 visits were scheduled. This represents 45% increase compared to previous year. Patients are provided a multi-disciplinary care at the center which includes diabetologist, ophthalmologist, dentist, podiatrist, cardiologist, diabetes nurse educator and lifestyle assessment including physiotherapy. Patients are assigned a most responsible physician (MRP), who has the overall responsibility for the treatment of the patients registered at our clinic and manages their co morbidities in accordance with international guidelines.

The center receives primarily diabetes patients with referrals not only from the Northern Emirates but also from Dubai, Abu Dhabi and the GCC region.

Demographics and Distribution

Diabetes Type Distribution

Out of the total number of patients, 6% are diagnosed with type 1 diabetes while 80% are diagnosed with type 2 diabetes. The remaining 14% are diagnosed with secondary diabetes; pre diabetes and unconfirmed diabetes at the first visit.



| 1.a Diabetes Type Distribution

Gender Distribution of all Diabetic Patients

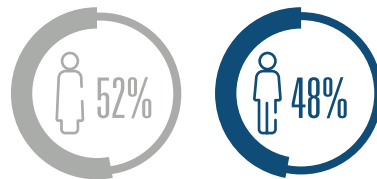
The distribution of gender among diabetic patients is 58% females and 42% males.



| 2.a Gender Distribution of all Diabetic Patients

Type 1 Diabetes Mellitus

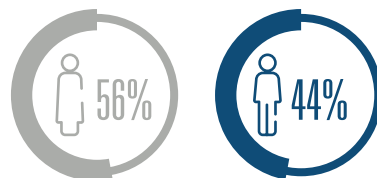
The distribution of gender among type 1 diabetes patients is 52% females and 48% males.



| 3.a Type 1 Diabetes Mellitus

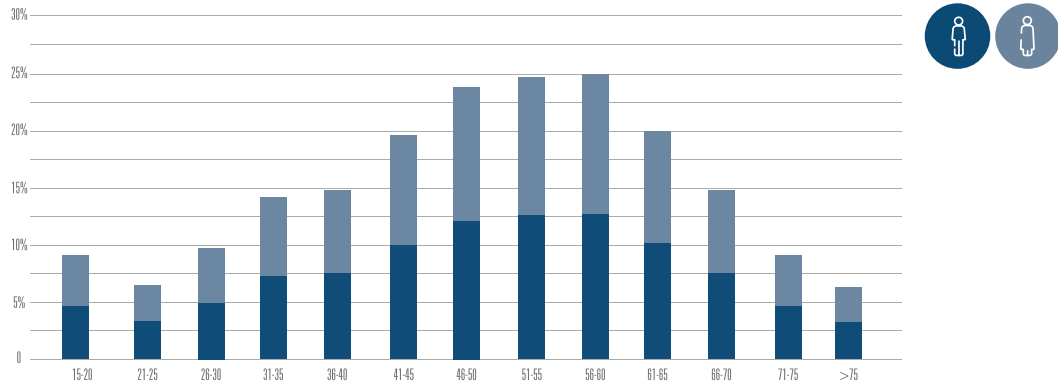
Type 2 Diabetes Mellitus

In type 2 diabetes patients the gender distribution is 56% females and 44% males.



| 4.a Type 2 Diabetes Mellitus

Age and Gender at Initial Visit



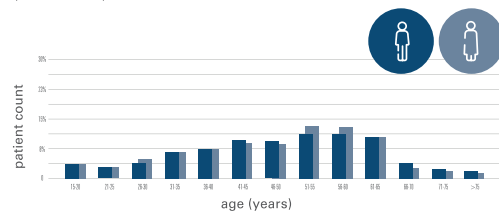
Diabetes Mellitus – Type Other



| 5.a Gender Distribution of all Diabetic Patients

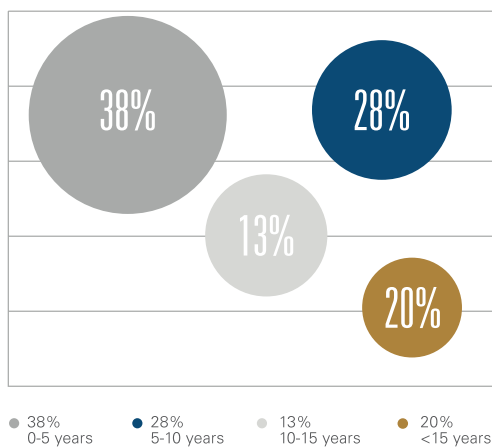
Duration of Diabetes at Initial visit

(continued)



Duration of Diabetes at Initial visit

Among the total number of diabetic patients, 38% have diabetes less than five years, 28% have diabetes between five and ten years, 13% have diabetes between 10-15 years and the remaining 20% have diabetes for >15 years. According to these figures, over one third of patients at our clinic had their diabetes for less than five years and a significant number of patients, 20%, have long standing diabetes.

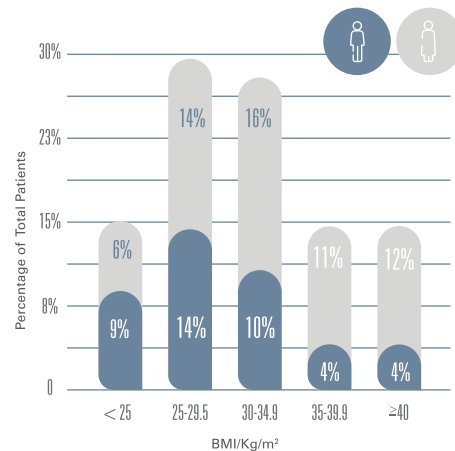


| 6.a Duration of Diabetes at Initial visit

Weight and BMI Factors (Dr Amena)

Body mass index

It is observed that patients visiting RCDR have an average body mass index (BMI) of (Mean \pm SD) 32.2 ± 8.2 Kg/m², female patients have slightly higher BMI compared to males (30.2 ± 7.4 vs 33.6 ± 8.4). Eighty five percent of our patients are either overweight (29%) or obese (56%) and the prevalence of obesity was observed to be higher in females (37%) compared to males (18%).



| 7.a BMI at Initial Visit

Appendix



Treatment Outcome

Process Measures

All patients undergo standardized measurements at initial assessment and at regular follow-ups thereafter, to identify risk factors, diabetes complications and to determine the patient’s individual treatment goals.

The table below shows type of standard measurements taken prior to their attendance with their diabetologist.

Diabetes Clinic

Assessment Protocol	Percentage (%)
BP Taken	93
BMI Recorded	97
HbA1c	99
Lipid Panel (cholesterol, HDL, LDL, apoA1, apoB)	99
Vitamin D Test	99
ECG Taken	99
Waist Measurement	92
Retinal Photographs	86
Urine Albumin: Creatinine Index	93
Patients Asked About Smoking	99
Valid Peripheral Vascular Exam (Distal Pulses)	100
Valid Peripheral Neurological Exam	100
Patients with Positive Retinal Screen Seen by an Ophthalmologist	34

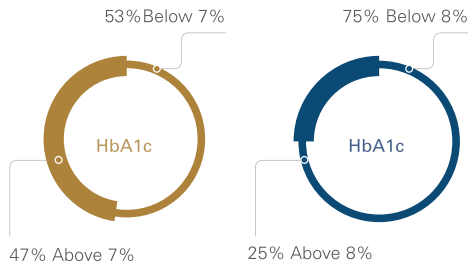
| 8.a Table shows Standard Measurement Tests (% Occurrence)

The treatment outcome in this report is not separated for type 1 and type 2 diabetes patients because of the low number of type 1 diabetes patients attended at our clinic. Type 1 diabetes patients make only 6% of our patients that are included in this report.

Type 1 diabetes patients will be presented separately in coming reports when we start seeing significant number of type 1 diabetes patients.

HbA1c

Glycated Hemoglobin is a form of hemoglobin that is measured primarily to identify the average plasma glucose concentration over a period of two - three months. High HbA1c indicates poor diabetes control and is associated with increased risk of long term diabetes complications like nephropathy, retinopathy, neuropathy and cardiovascular disease. We set individualized HbA1c targets and for the majority of our patients the target remains to be <7% (53mmol/mol) in accordance with the recommendation of the American Diabetes Association (ADA) and European Association for the Study of Diabetes (EASD). This year’s treatment outcome shows that 47% of our patients have achieved the target of HbA1c <7% (53mmol/mol) and 75% have achieved HbA1c <8% (64mmol/mol). These figures indicate continuously improved outcome results over the past few years.



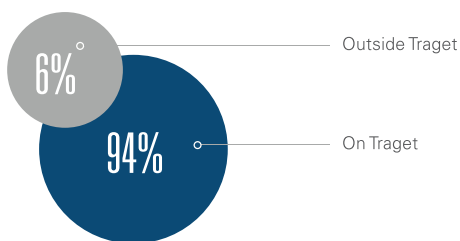
| 9.a-b HbA1c

Blood Pressure

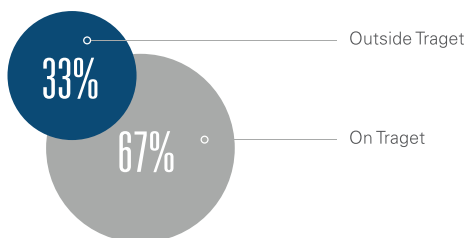
Hypertension is a common comorbidity of diabetes and a major risk factor for both cardiovascular disease and microvascular complication.

In type 2 diabetes patients hypertension is often present as part of the metabolic syndrome and insulin resistance and in the majority of type 1 diabetes patients its presence could primarily be associated with the onset of diabetic kidney disease. There is enough evidence showing that hypertension in diabetes patients will significantly increase the risk of macro and micro vascular complications.

According to ADA guidelines for 2017 most patients with diabetes and hypertension should be treated to BP goal <140/90. Lower goals such as 130/80 would be appropriate for those patients with an increased cardiovascular disease (CVD).



| 10.a BP Diastolic



| 10.b BP Systolic

Lipids

Type 2 diabetes patients have a highly increased prevalence. Type 2 diabetes patients have a highly increased prevalence of lipid abnormalities, which contribute to the increased risk of CVD. This group of patients has a lipoprotein pattern known as diabetes dyslipidemia or atherogenic dyslipidemia with low HDL, moderately elevated triglycerides and small dense LDL particles (cholesterol enriched remnant lipoprotein).

According to ADA recommendation, LDL remains to be the primary target with treatment of dyslipidemia with either moderately high or high intensity statin therapy for patients with DM based on age and CVD risk stratification.

Hypertriglyceridemia should also be addressed with lifestyle management and severe TG warrants pharmacologic treatment to reduce the risk of pancreatitis. Treating type 2 diabetes patients with lipid lowering drugs (statins) will unequivocally reduce the incidence of major CVD. The results for our patients are presented in Table X as a comparison with previous years targets.

Lipid Panel	Targets	Achieved Target in %
Total Cholesterol	<4.5 mmol/L	64%
HDL for men	>1.0 mmol/L	66%
HDL for women	>1.3 mmol/L	47%
Triglycerides	<1.7 mmol/L	68%

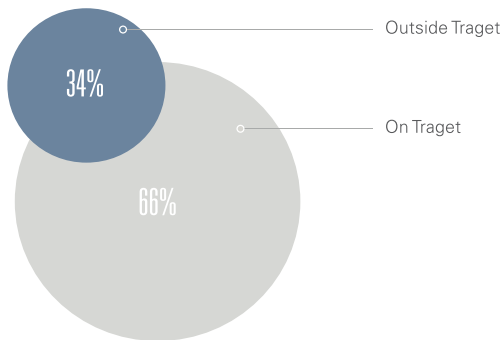
| 11.a Table shows Targets Achieved in Lipid Panel

Appendix

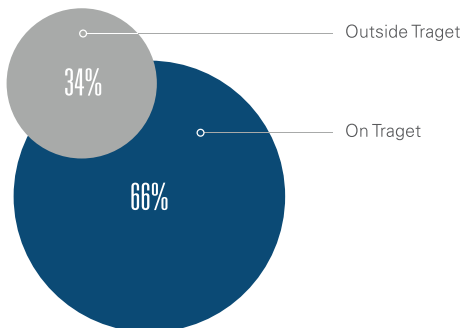


Lipids

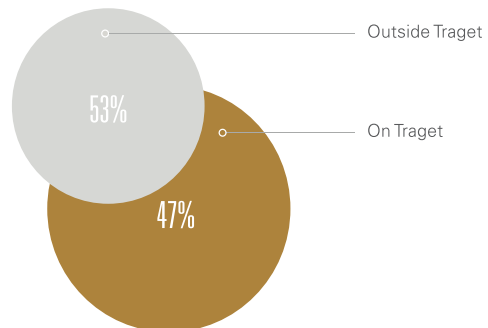
(continued)



| 12.c Triglycerides



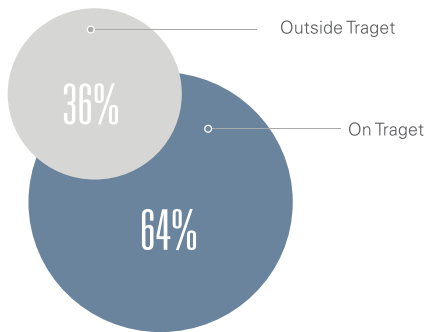
| 12.b HDL Male



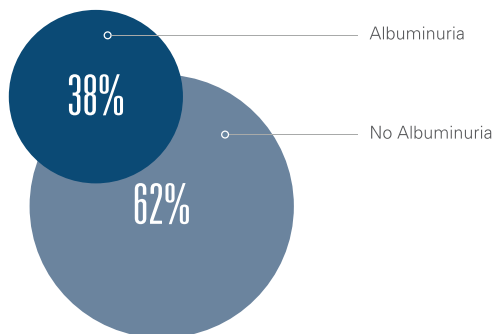
| 12.d HDL Female

Lipids

(continued)



| 12.e Total Cholesterol



| 13.a Albuminuria

Albuminuria

The earliest manifestation of diabetic kidney disease could be the appearance of persistent amount of albumin, 30mg/day or 20ug/min, in the patient's urine. This is referred to as moderately increased albuminuria. With aggressive treatment of diabetes and blood pressure, this modestly elevated albuminuria could be reversed to normal. Without specific intervention moderately increased albuminuria might progress to severely increased albuminuria, also called overt diabetic kidney disease with urine albumin >300mg/day or 200ug/min. Albuminuria appears in type 1 patients first after several years, while in a higher proportion of type 2 patients it could be present already at or short after diagnosis. Albuminuria is also a marker for increased risk for CVD.

In our diabetes population, 42% of the patients are positive for albuminuria while 58% are negative at the end of the year. These results show improvement in levels of albuminuria, in line with the outcome from previous years.

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