

## **Project Title**

Improve Staff Knowledge and Competency in Fire Safety using Fire Safety Pocket Card

## **Project Lead and Members**

Project lead: Ms Nancy Yeo Hiang Hwa (ADON, NURSING)

Project members: SNM Tay Lee Hiang (SOC, A43), ANC Masdiana Mohamed Yusof (SOC, A43) SN Komala Palaniandy (SOC, A43), SSN Sandra Yow Mei Xin (SOC, A34), SEN Hapreet Kaur (SOC A34)

## **Organisation(s) Involved**

Ng Teng Fong General Hospital

## **Healthcare Family Group(s) Involved in this Project**

Nursing

## **Applicable Specialty or Discipline**

Specialist Outpatient Clinic

## **Project Period**

Start date: Jun 2022

Completed date: June 2023

## **Aims**

Staff in the clinics are knowledgeable on fire safety procedure and competent in fire audit by June 2023. To achieve 100% of staff complete the annual fire safety training and 100% success rate in fire safety audit

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Lessons Learnt**

See poster appended/ below

## **Conclusion**

See poster appended/ below

## **Project Category**

Training & Education

Learning Approach

## **Keywords**

Staff Compliance, Fire Safety, Audit, Fire Incident, Standard Operating Procedure,  
Knowledge Retention

## **Name and Email of Project Contact Person(s)**

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# IMPROVE STAFF KNOWLEDGE AND COMPETENCY IN FIRE SAFETY USING FIRE SAFETY POCKET CARD

**MEMBERS:** MS NANCY YEO HIANG HWA ( ADON, NURSING)  
SNM TAY LEE HIANG (SOC, A43), ANC MASDIANA MOHAMED YUSOF (SOC, A43) SN KOMALA PALANIANDY (SOC, A43), SSN SANDRA YOW MEI XIN (SOC, A34), SEN HAPREET KAUR (SOC A34)

- SAFETY
- QUALITY
- PATIENT EXPERIENCE
- PRODUCTIVITY
- COST

*<Please delete this box before submission>*  
*You may tick more than one category above*

## Define Problem, Set Aim

### Problem/Opportunity for Improvement

Only 40-50% of staff passed the internal bi-monthly fire audit at Clinic A34 and A43 between June to December 2022. There are staff and patient safety concerns if there is a actual fire incident. Post Audit review showed staff were unfamiliar with fire safety procedures as a result of poor knowledge retention

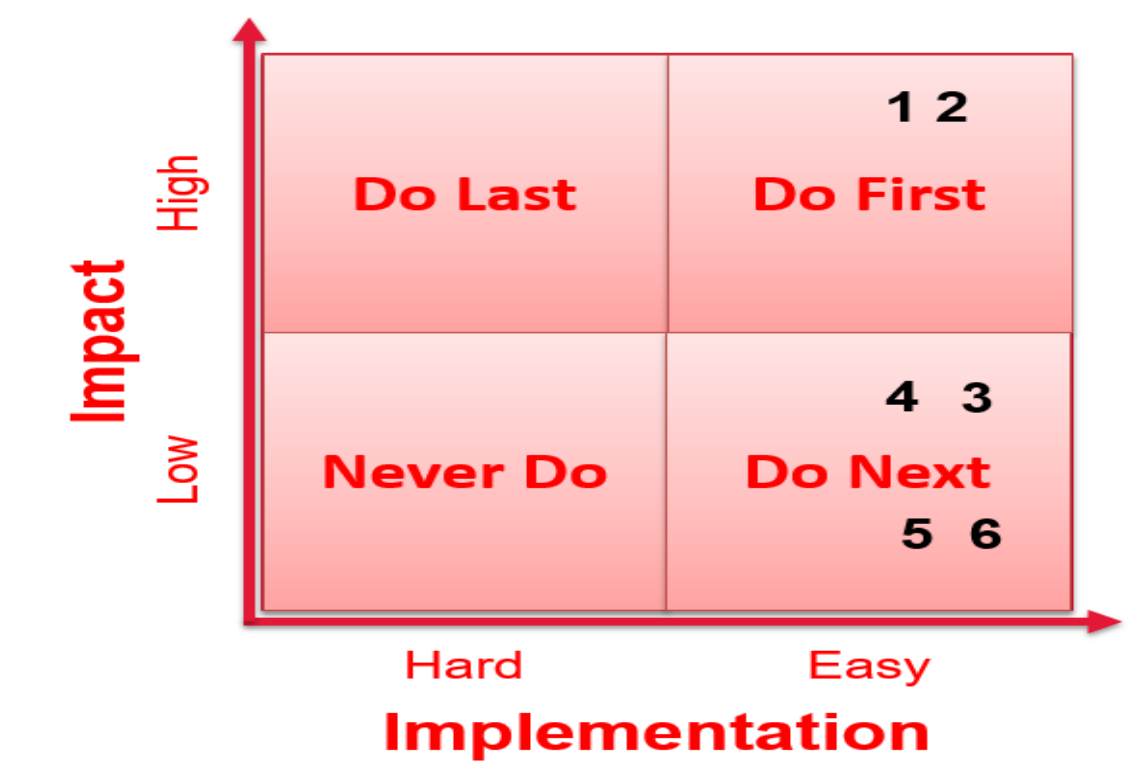
### Aim

Staff in the clinics are knowledgeable on fire safety procedure and competent in fire audit by June 2023.  
To achieve 100% of staff complete the annual fire safety training  
To achieve 100% success rate in fire safety audit

## Select Changes

**What are all the probable solutions? Which ones are selected for testing?**

Root Cause	Potential Solutions
Lack familiarity on Fire Safety Knowledge	1. Staff must complete e-learning on fire safety
	2. Conduct internal TTX on fire drill
	3. Provide pocket-size fire safety cards with essential fire safety information as quick reference guide for staff

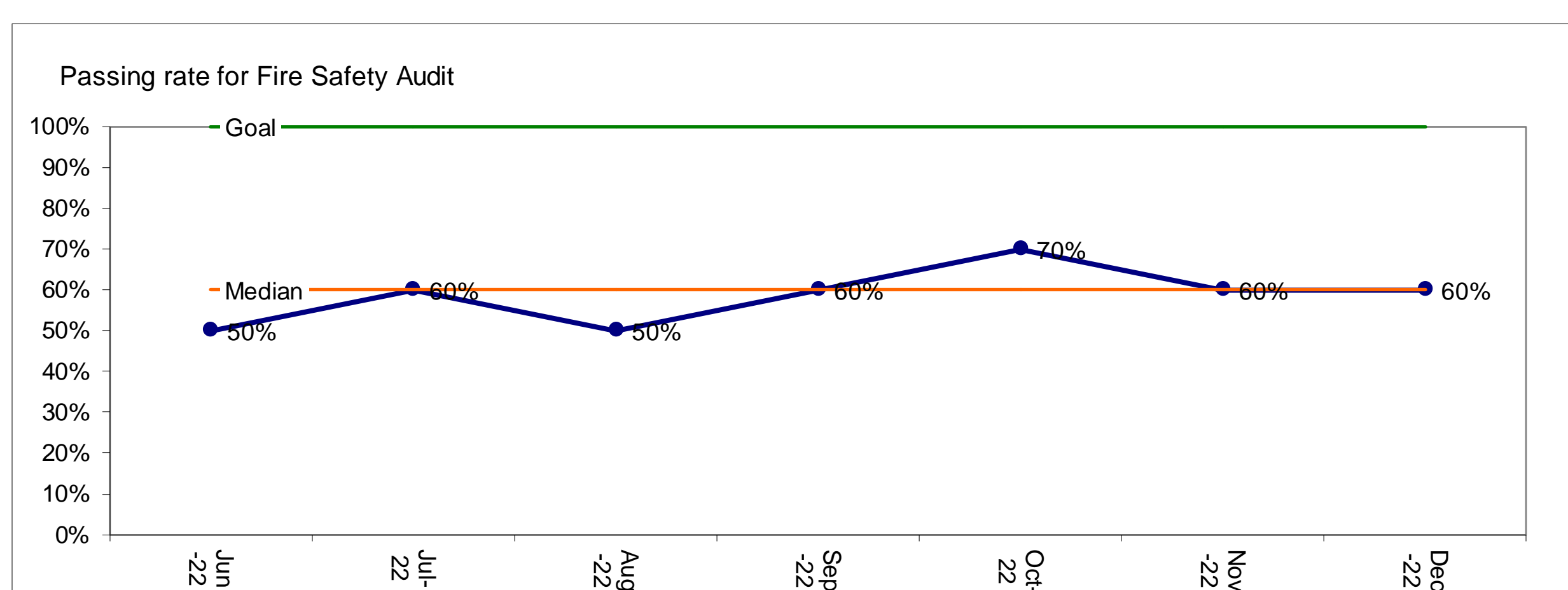


The team brainstormed and came out with a pocket-size card with fire safety information for all the staff in the clinics. This allows nurses to have quick guide and hence boost their confidence in handling fire incident.

## Establish Measures

### What was your performance before interventions?

50-60% of staff did not pass the fire safety audit between June to Dec 2022



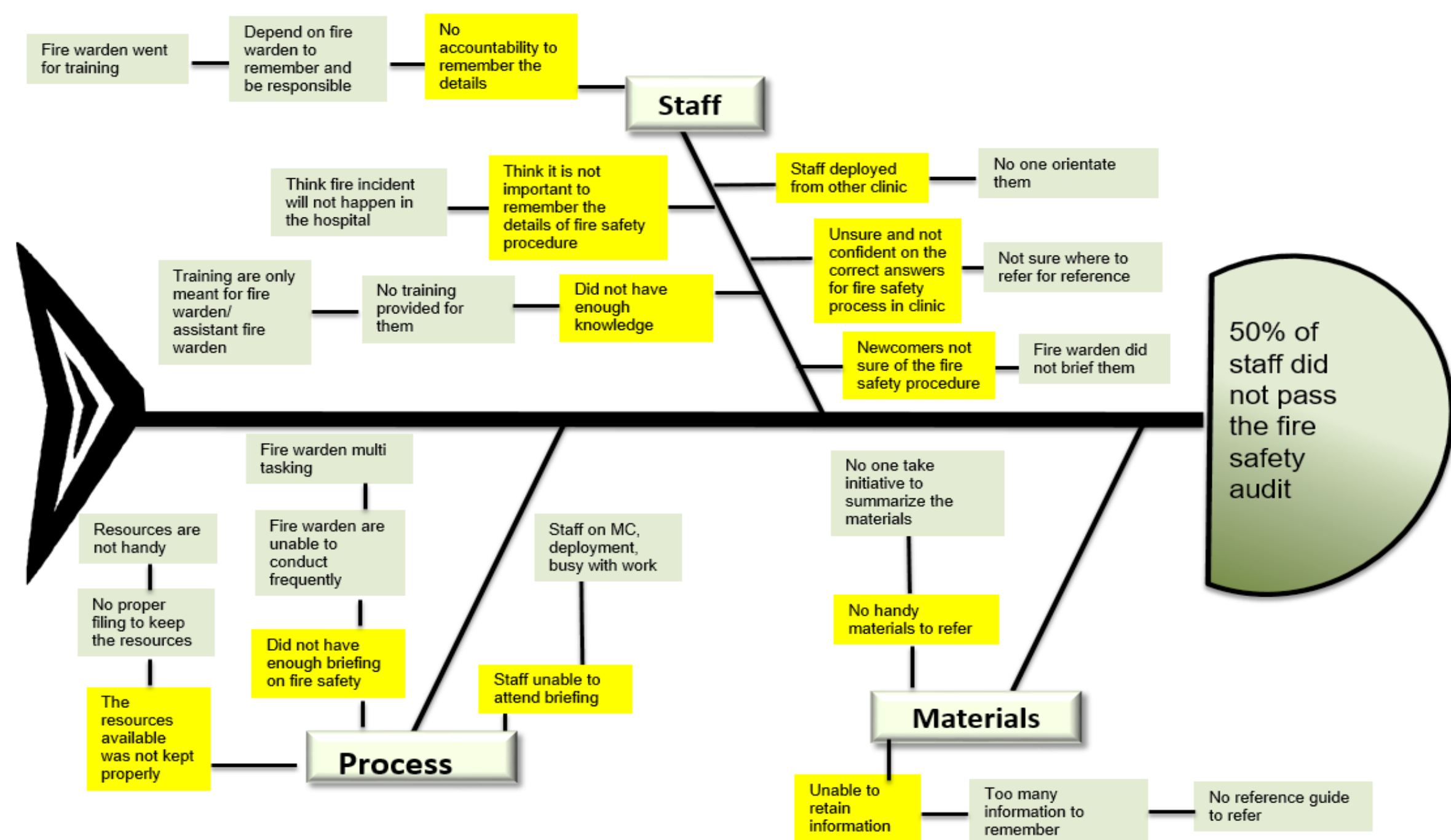
## Test & Implement Changes

**How do we pilot the changes? What are the initial results?**

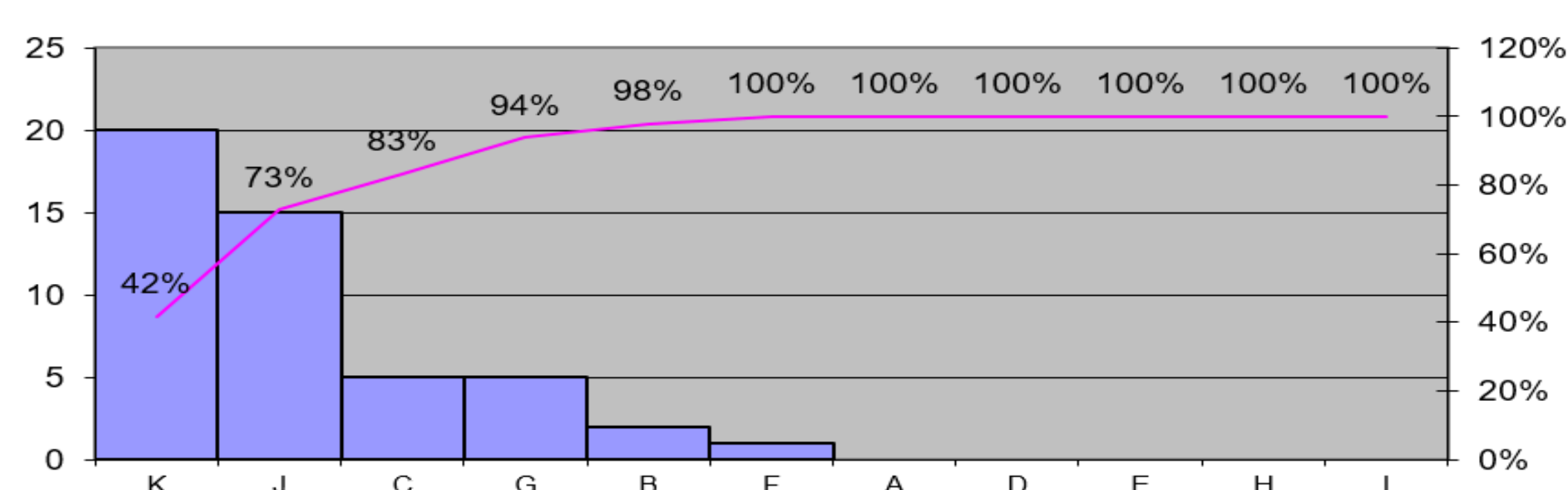
CYCLE	PLAN	DO	STUDY	ACT
1	Implement the fire safety card and test out at A34 and A43 in Jan 2023.	The pocket-size fire safety cards were printed to distributed to every staff. The test was carried out as planned.  Feedback from staff: 1. The pocket cards are small, light, easily fitted into the staff pockets. 2. Staff are more confident to face the auditor 3. Provide quick reference if	Post internal fire safety audit showed a 100% success rate where all the staff are competent and knowledgeable to the fire safety procedure.	This pocket-size fire safety card is a convenient and useful guide for staff.  Team decide to adopt this initiative.  External Auditors came and suggested for the team to spread this pocket cards to the entire outpatient in tower A.

## Analyse Problem

### Root Cause Analysis:

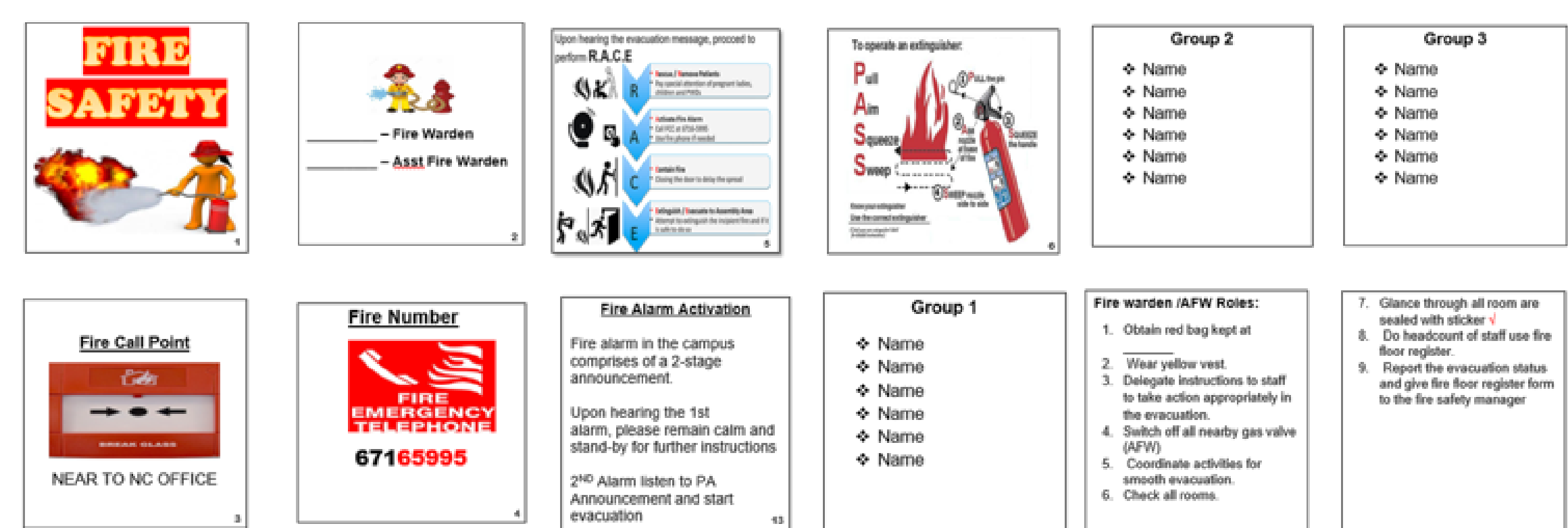


50% of staff did not pass the fire safety audit

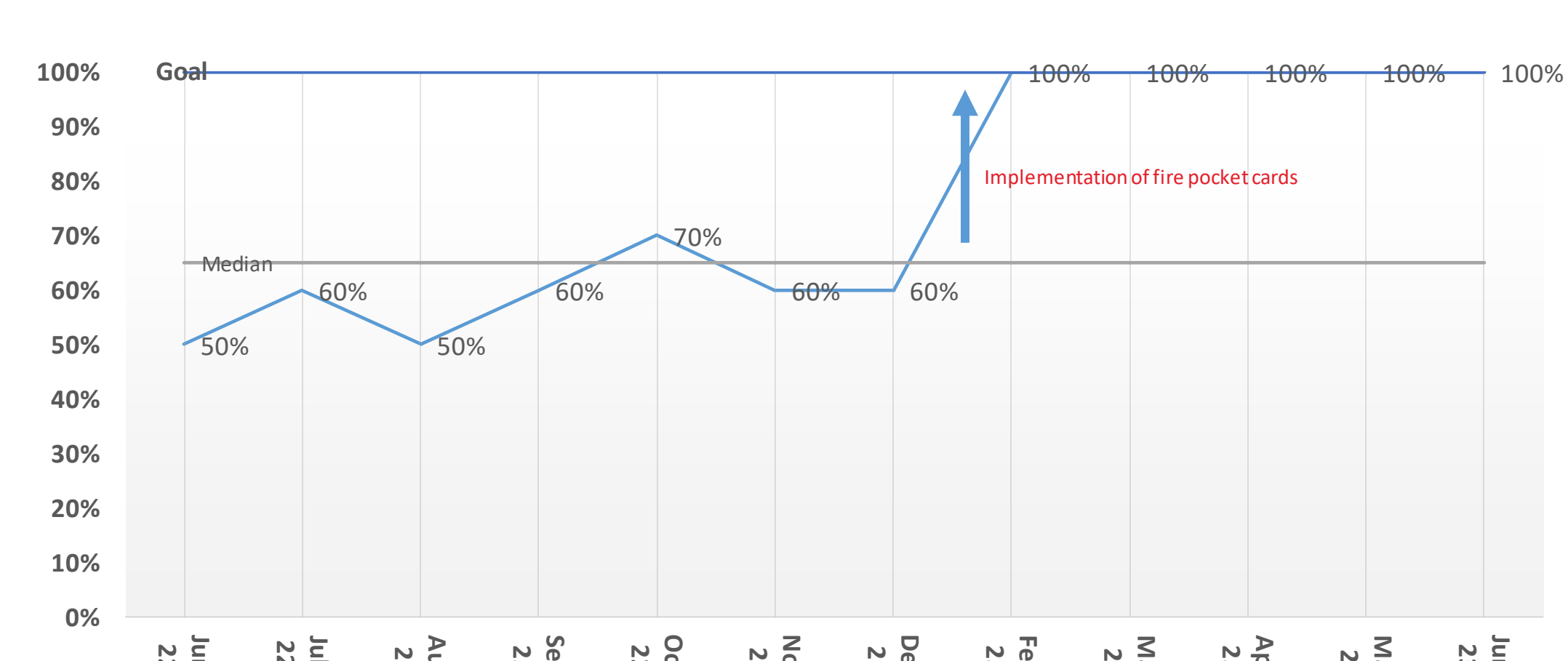


- A- No accountability to remember the details
- B- Think it is not important to remember the details of fire safety procedure
- C- Did not have enough knowledge
- D- Staff deployed from other clinic
- E- Unsure and not confident on the clinic process for fire safety
- F- Newcomers not sure of the fire safety procedure
- G- The resources available was not kept properly
- H- Did not have enough briefing on fire safety
- I- Staff unable to attend briefing
- J- Unable to retain information
- K- No handy materials to refer

### Samples of Fire Pocket Cards



Passing rate for Fire Safety Audit



## Spread Changes, Learning Points

**What are/were the strategies to spread change after implementation?**

- The team met up with all the fire wardens/assistant fire wardens (FWs/AFWs) in the entire outpatients to demonstrated the use of the fire pocket cards.
- The fire safety pocket card was further modified after feedbacks from the FWs and AFWs.
- The final fire pocket cards disseminated and adopted by all the SOC clinics.
- The information in the fire safety pocket card will be reviewed and updated annually or when there is change in the procedure.

**What are the key learnings from this project?**

Although the hospital provide e-learning on fire safety and annual audit by external auditors, it is challenging to ensure staff captured and preserved the knowledge as the workforce are fairly elderly and fire incident is not common here.  
The creation of the pocket cards provide concise and essential information will come in handy as quick reference in highly critical and time sensitive situation .  
Fire Safety should not just be the roles and responsibilities of the FWs and AFWs but rather it should be every staff roles and responsibilities