

## Project Title

Improving The Caregiver Nomination Workflow In Paediatric Business-As-Usual (BAU)  
Wards

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## Organisation(s) Involved

KK Women's and Children's Hospital

## Healthcare Family Group Involved in this Project

Healthcare Administration

## Applicable Specialty or Discipline

Operations, Paediatric

## Project Period

Start date: Not Available

Completed date: Not Available

## Aims

1. Review and streamline the change of CG nomination process
2. Empower CGs to perform self-nomination of CG change
3. Improve CG experience when performing CG change

4. Eliminate time spent by nurses to perform this administrative task

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

## **Results**

See poster appended/ below

## **Conclusion**

See poster appended/ below

## **Project Category**

Care & Process Redesign

Operation Management, Quality Improvement, Workflow Redesign

## **Keywords**

Caregiver Nomination, Electronic Forms

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# Improving the Caregiver Nomination Workflow in Paediatric Business-As-Usual (BAU) wards

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## Introduction

Besides patient care responsibilities, nurses in Paediatric BAU wards are involved in administrative tasks such as requests for change in caregiver (CG) nomination as shown in Figure 1.

Figure 1: Workflow for change of CG nomination

1. Nurse obtains hardcopy form from nursing counter



2. Nurse hands the request for change of CG form to CG at patient's bedside  
3. Nurse assists CG to complete form  
4. Nurse collects completed form and brings it back to nursing counter



5a. Nurse faxes form to Automated Visitor Management System (AVMS) OR  
5b. Nurse hands form to first CG to verify with AVMS staff on change of CG



6. Nurse files faxed copy into patient's case note



## Problem Statement

The existing 'Change of CG nomination' process in Paediatric BAU wards is tedious and time-consuming.

## Aims

1. Review and streamline the change of CG nomination process
2. Empower CGs to perform self-nomination of CG change
3. Improve CG experience when performing CG change
4. Eliminate time spent by nurses to perform this administrative task

## Methodology

The Plan-Do-Study-Act model was adopted. The nursing team collaborated with Visitor Services (VS) team to digitize the change of CG nomination process by creating a QR code that links to an electronic FormSG managed by the VS staff. CGs can access this QR code provided on visiting advisory signages.

**Second Caregiver Nomination Form**

1. No changes to the nominated person(s) is allowed throughout patient's admission.
2. All nominated Caregiver(s) must undergo Antigen Rapid Test (ART) before going up to the ward.
3. Completed nomination form received will be updated by the next working day at 2pm.
4. If any part of the form is not duly completed or contains error, no updating will be carried out.
5. Once there are two nominated caregivers in the system, there will be no addition or replacement of caregiver.

Please scan this QR code for the 2<sup>nd</sup> Caregiver Nomination Form.

## Results

A pre-implementation study was conducted from 22<sup>nd</sup> September 2021 to 28<sup>th</sup> September 2021 across five Paediatric BAU wards using the pre-existing hardcopy CG change form. During the pre-implementation study, 228 hardcopy requests were received. Nurses spent 2 hours 10 minutes daily with an average of 4 minutes per request. The results are shown in Table 1.

Table 1: Pre-implementation data- Total time spent on each change of CG request

Total no. of hardcopy forms received in one week	Time taken for change of CG request	Time spent per day
228/7 = 32.6 (33) per day	19.8 mins/ 5 wards	33 x 3.96mins = 2 hours 10 mins
= 33 forms received per day	= 3.96 mins per request	

The workflow was refined and a hybrid trial was conducted from 4<sup>th</sup> October 2021 to 10<sup>th</sup> October 2021, using both hardcopy and electronic forms. During this hybrid trial, 148 hardcopy requests were received and nurses spent 1 hour 23 minutes, similarly spending an average of 4 minutes per request. Concurrently, 72 electronic requests were received. Figure 2 shows the reduction in the number of hardcopy forms received during the hybrid trial.

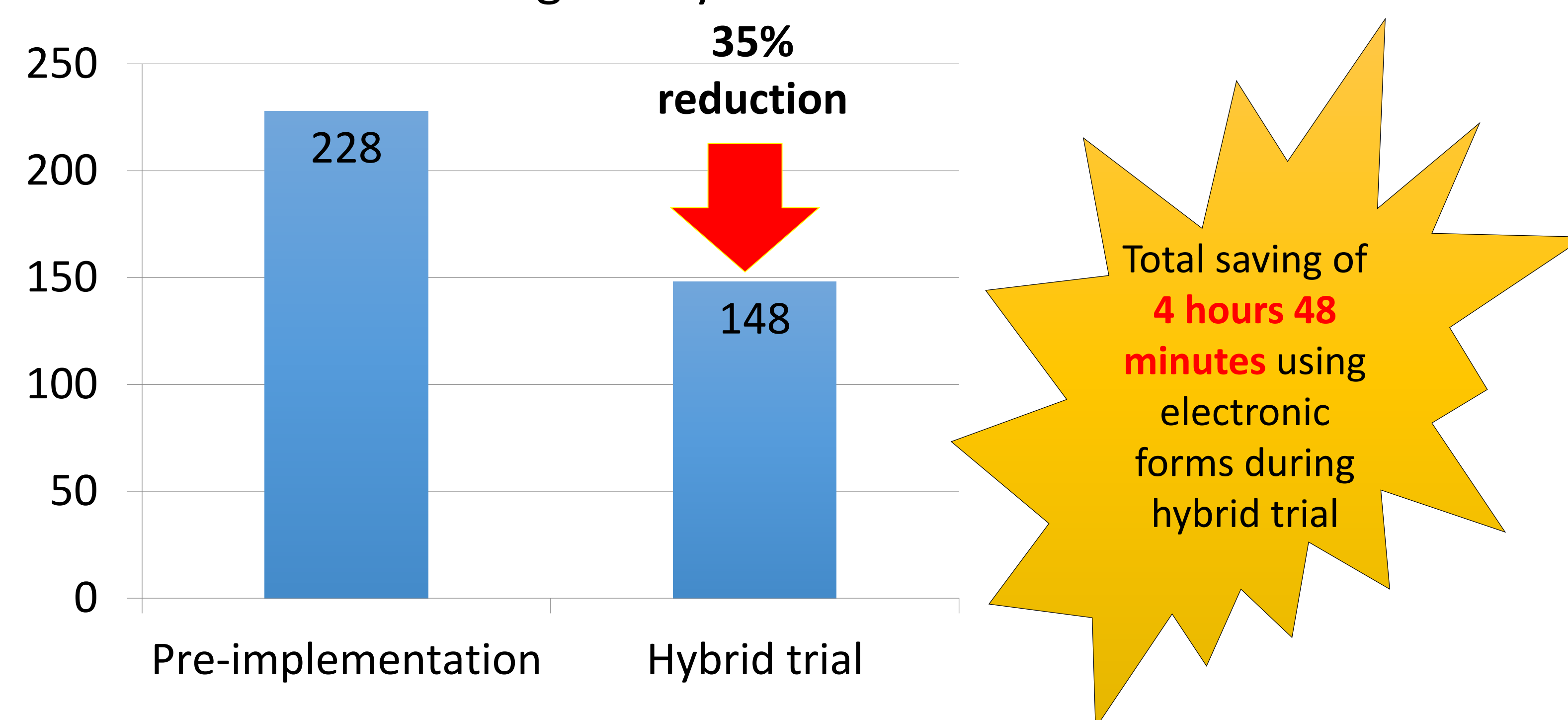


Figure 2: No. of hardcopy forms received

Post-implementation, 200 electronic forms were received over 20 days, equating to a significant saving of 13 hours 20 minutes of nurses' time.

## Conclusion

With the introduction of electronic forms, CGs are now empowered to perform CG change requests independently, leading to an enhanced inpatient experience for both CGs and patients. The time saved by nurses is better utilised in uninterrupted care for their patients.

## Acknowledgement

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