

CHI Learning & Development (CHILD) System

Project Title

Self Care for Nurses at Work (Sustainability Phase)

Project Lead and Members

Project lead: James Ang Wei Kiat

Project members: Chua Qing Wei, Susan Matthew, Pavalgaantham Rogawansamy,

Tapican Frenzes Paneiro, Muhammad Nur Khairul Nizam Bin Jaffar, Benjamin Huang

Organisation(s) Involved

Tan Tock Seng Hospital, National Neuroscience Institute

Healthcare Family Group(s) Involved in this Project

Nursing, Medical

Applicable Specialty or Discipline

Not Available

Project Period

Start date: Sep 2019

Completed date: Nov 2020

Aims

To improve AM Shift nurses' self-care at work from 67% to 90% at Ward Z over a sustained period

Background

See poster attached/below

Methods

See poster attached/below



CHI Learning & Development (CHILD) System

Results

See poster attached/below

Lessons Learnt

See poster attached/below

Conclusion

See poster attached/below

Additional Information

Accorded the NHG Quality Day 2022 (Category A: Improving and Sustaining Quality & Safety) Merit Award

Project Category

Organisational Leadership

Human Resource, Staff Wellbeing

Keywords

Meal Break Time, Staff Engagement, Team Situation Awareness

Name and Email of Project Contact Person(s)

Name: James Ang Wei Kiat, Senior Nurse Manager, Nursing Service

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Self Care for Nurses at Work (Sustainability Phase)

Mr James Ang Wei Kiat Nursing Service



Adding years of healthy life

Mission Statement

To improve AM Shift nurses' self-care at work* from 67% to 90% at Ward Z over a sustained period

*Self-Care at Work: Take at least 30 mins Meal Break

Team Members								
	Name	Designation	Department					
Team Leader	James Ang Wei Kiat	Senior Nurse Manager	Nursing Service					
Team	Chua Qing Wei	Executive	Nursing Service					
Members	Susan Matthew	Assistant Nurse Clinician	Ward Z					
	Pavalagaantham Rogawansamy	Senior Staff Nurse	Ward Z					
	Tapican Frenzes Paneiro	Assistant Nurse	Ward Z					
	Muhammad Nur Khairul Nizam Bin Jaffar	Staff Nurse	Ward Z					
	Benjamin Huang	Registrar	NNI					
Mentor: Adi A/Prof Tan Hui Ling								

Mentor: Adj A/Prof Tan Hui Ling

Sponsors: Ms Rozana Bte Arshad (Ward Z Senior Nurse Manager) & Ms Lek Jie Ying (HR Wellness Advisor)

Evidence for a Problem Worth Solving

Percentage of Staff taking >30mins break for AM Shift 100% | 90% | - 80% | - 70% | 60% | - 90% | 10% | - 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10% | 10

Staff Well-Being affects Patient Safety

- 1. Patient safety is threatened by nurse dissatisfaction; many nurses report that their workload causes them to miss important changes in their patients' condition.
- 2. Poor well-being and high levels of burnout were found to be significantly associated with more self-reported errors. They also put pressure on team relationships causing a poorer safety climate and quality of care.
- 3. Lower levels of staff engagement are linked with lower-quality care, including safety, and burnout limits providers' empathy.

burnout, and frustration with health benefits signal problems for patient care. Health Aff (Millwood 2011;30(2):202-210

2. Hall LH, Johnson J, Watt I, Tsipa A, O'Connor DB (2016) Healthcare Staff Wellbeing, Burnout, ar Patient Safety: A Systematic Review. PLoS ONE 11(7): e0159015. doi:10.1371/journal.pone.0159015

3. Perlo J, Balik B, Swensen S, Kabcenell, A, Landsman J, Feeley D. IHI Framework for Improving Joy Work. IHI White paper. Cambridge, Massachusetts: Institute for Healthcare Improvements; 201 (Available at thi org.)

Looking for

resources

(3-5mins)

Frequently

Macro Flowchart Micro Flowchart Routine Tasks Interruptions to routines Report for AM Shift Duty Time Registered Nurse Time taken away Rarely from routine per Clinical occurs Check Cases for the Day CLC, NIHSS Assessments occurrence 0745 Emergencies (60-180mins) 0815 Oral + IV Meds Admin Ward Roll Call 700am **Patients** Sponging/showering/assisted feeding/ with high 0900 NGT feeding/potting/turning needs (10-60mins) Handover by Night Shift Follow rounds Check and carry out changes in treatment orders Admission Prepare discharges/rehab transfers **Start Nursing Activities** Identify patients for Discharge Lounge (15-30mins) 1100 **Predict Trendcare** 2nd 745am Family **Going for Break** Break to Serve lunch + Assisted/Supervised Feeding 1130 enquires 130pm (5-15mins) Write report, 1200 parameters & CLC assessments **Continue with Nursing Activities** Medical 1230 team 2nd Turning / Potting (5-10mins) Handover to PM Shift 200pm

Flow Chart of Process

Cause and Effect Diagram

Receive admissions / Update family

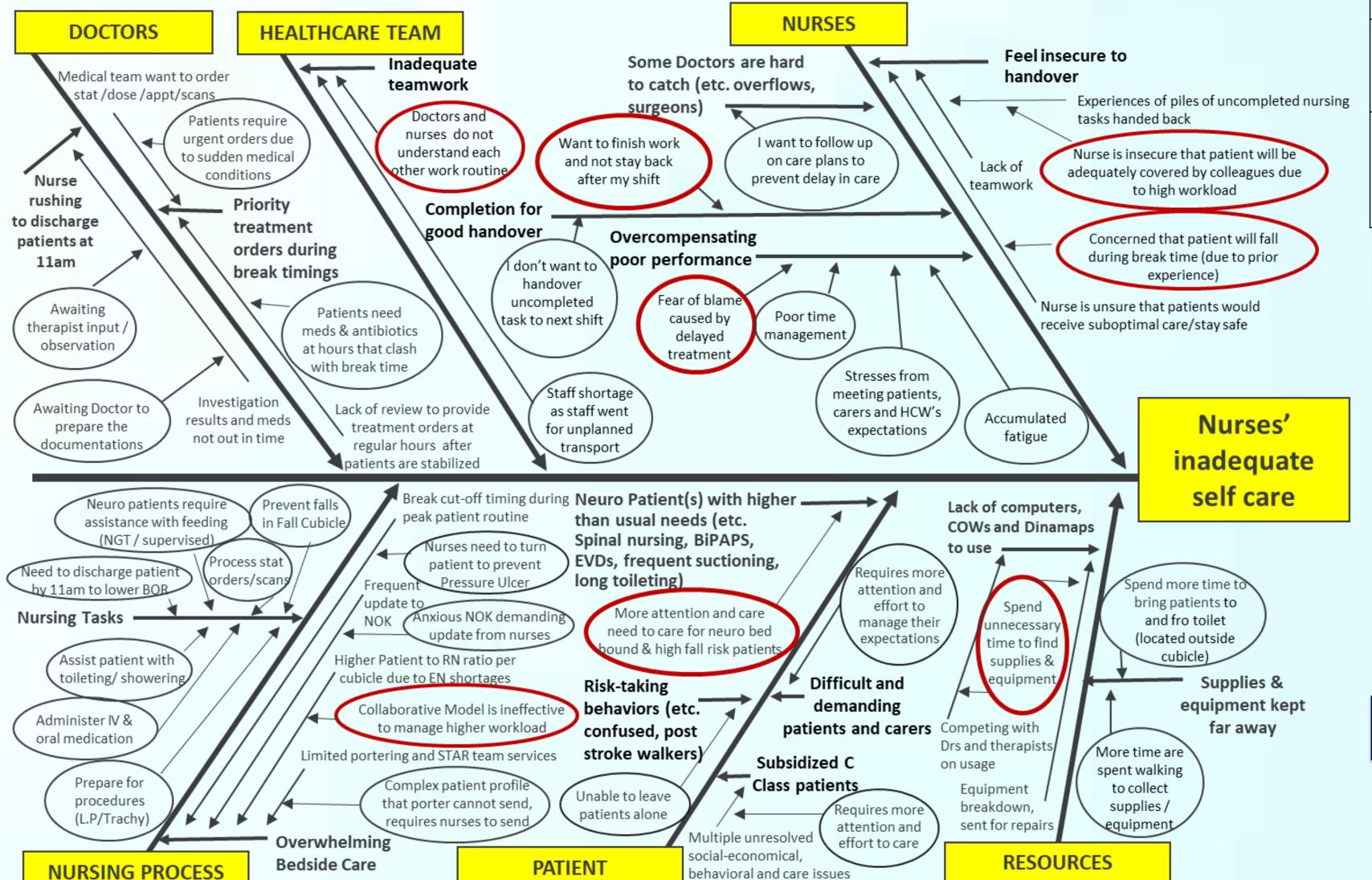
Serve Meds

1300

1330

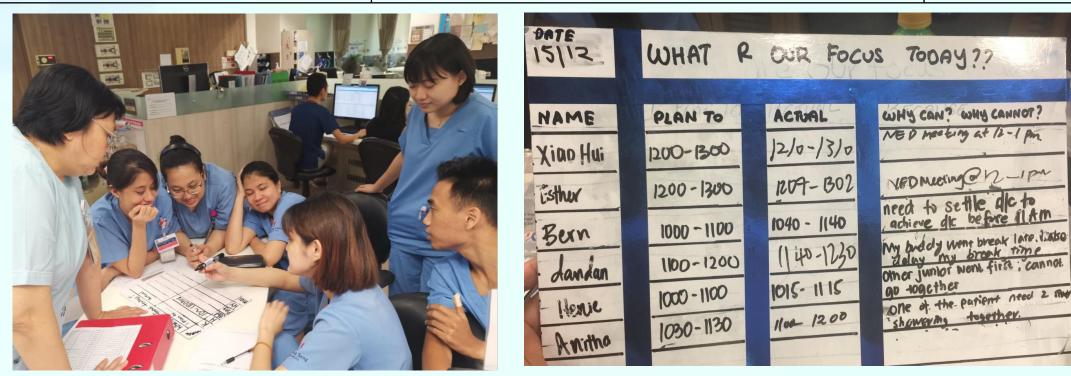
End of AM Shift Duty

330pm



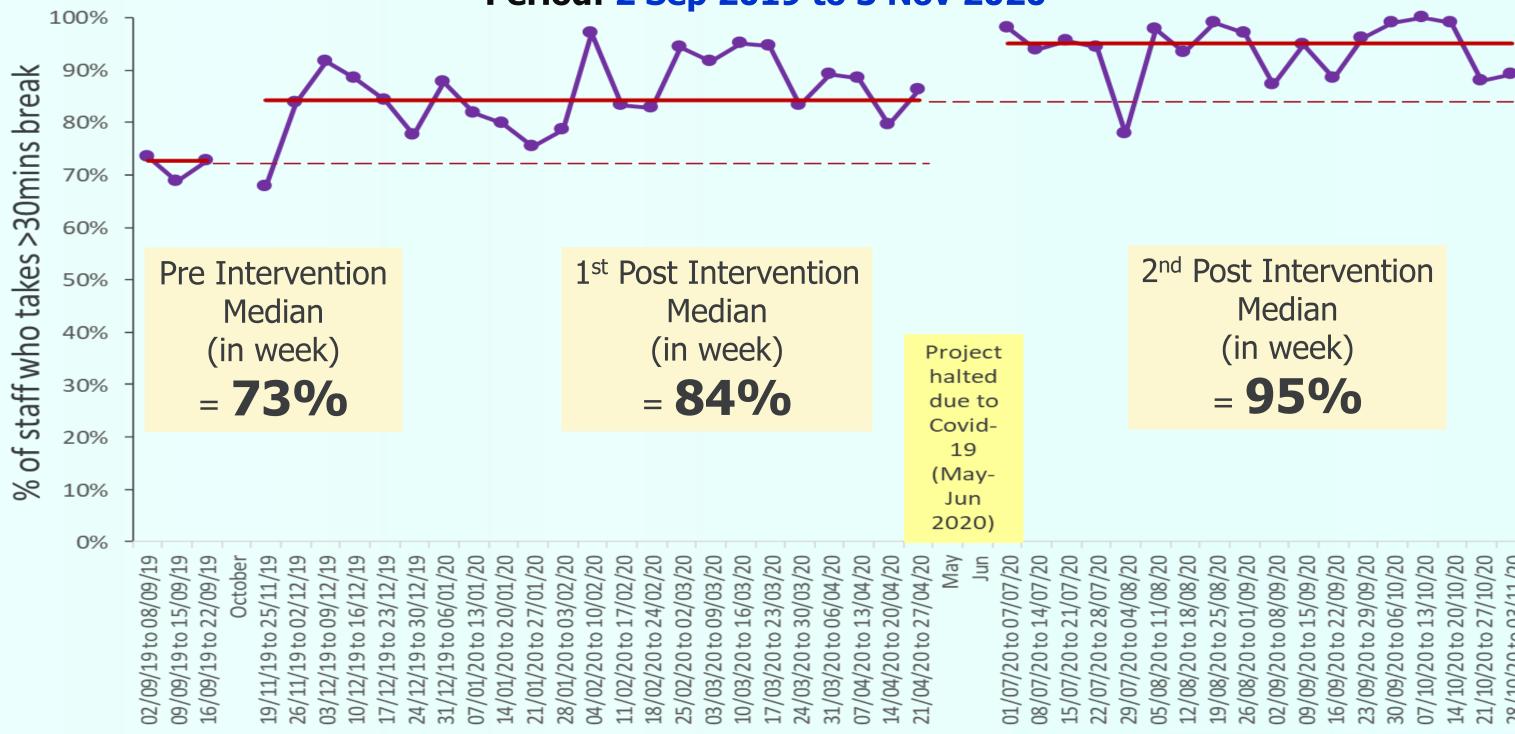
Pareto Chart Nurse is insecure that patient will be adequately **Causes of** Cause A covered by colleagues due to high workload **Nurses' Inadequate Self Care** Collaborative Model is ineffective to manage higher Cause B workload Doctors and nurses do not understand each other **Cause C** - 70 gg work routine More attention and care need to care for neuro bed മ് ഉ 50 -**Cause D** bound & high fall risk patients 40 Want to finish work and not stay back after my shift **Cause E** - 30 ರ Fear of blame caused by delayed treatment Cause F Spend unnecessary time to find supplies & Cause G Cause A Cause B Cause C Cause D Cause E Cause F Cause G equipment

Implementation							
Root Cause	Intervention	Implementation Date					
Cause A: Nurse is insecure that patient will be adequately	PDSA1A: Freeze Meal Break Time at Peak Period	19 Nov 2019					
covered by colleagues due to high workload	PDSA1B : Improve 'Team Situation Awareness'	20 Nov 2019					



Results

Weekly Runchart: Percentage of Staff taking >30mins break for AM Shift Period: 2 Sep 2019 to 3 Nov 2020



Sampling audit in Year 2021 (January to February 2021) showed that median is at 71% and in Year 2022 (January to February 2022) showed that median is at 85% (ie. still above baseline median (in day) of 67%).

	Cost Savings								
		During Meal Break Time		After Work					
		Pre-Intervention	Post-Intervention	Pre-Intervention	Post-Intervention				
	% of staff who work additional hours (median)	27% from Runchart 2 Sep to 22 Sep 2019	5% from Runchart 1 Jul 2020 to 3 Nov 2020	22% from Runchart 21 Oct to 1 Nov 2019	0% from Runchart 31 Oct to 4 Nov 2020				
	No. of staff who work additional hours (Per Month)	4	1	7	0				
	Assume staff do 30mins Overtime per day								
	Total Additional Manpower Cost Incurred (Per Month)	$(4-1) \times 30 \text{mins} \times \0.97 = $\$87.30$		$(7-0) \times 30 \text{mins} \times \0.97 = $\$203.70$					
3	Total Additional Manpower Cost Incurred (Annualized)	\$87.30 x 12 = \$1,047.60		\$203.70 x 12 = \$2,444.40					
	Potential Manpower Cost Savings due to Overtime Prevented (Annualized)	\$1,047.60 + \$2,444.40 = \$3,492.00							

Lessons Learnt

- 1. Power of surfacing tensions they held (clarity and best practices for mindset shift)
- 2. Power of simple ideas
- 3. Conditions for change
 - Low versus High stakes
 - Systems versus People
- 4. Empathy and agility for change5. Empowering the ground for sustainability

Strategies to Sustain

- 1. Continuous engagement with nurses to empower their ideas
- 2. Review and gradual reduction on monitoring details
- 3. Remove board when culture stabilized