

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

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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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

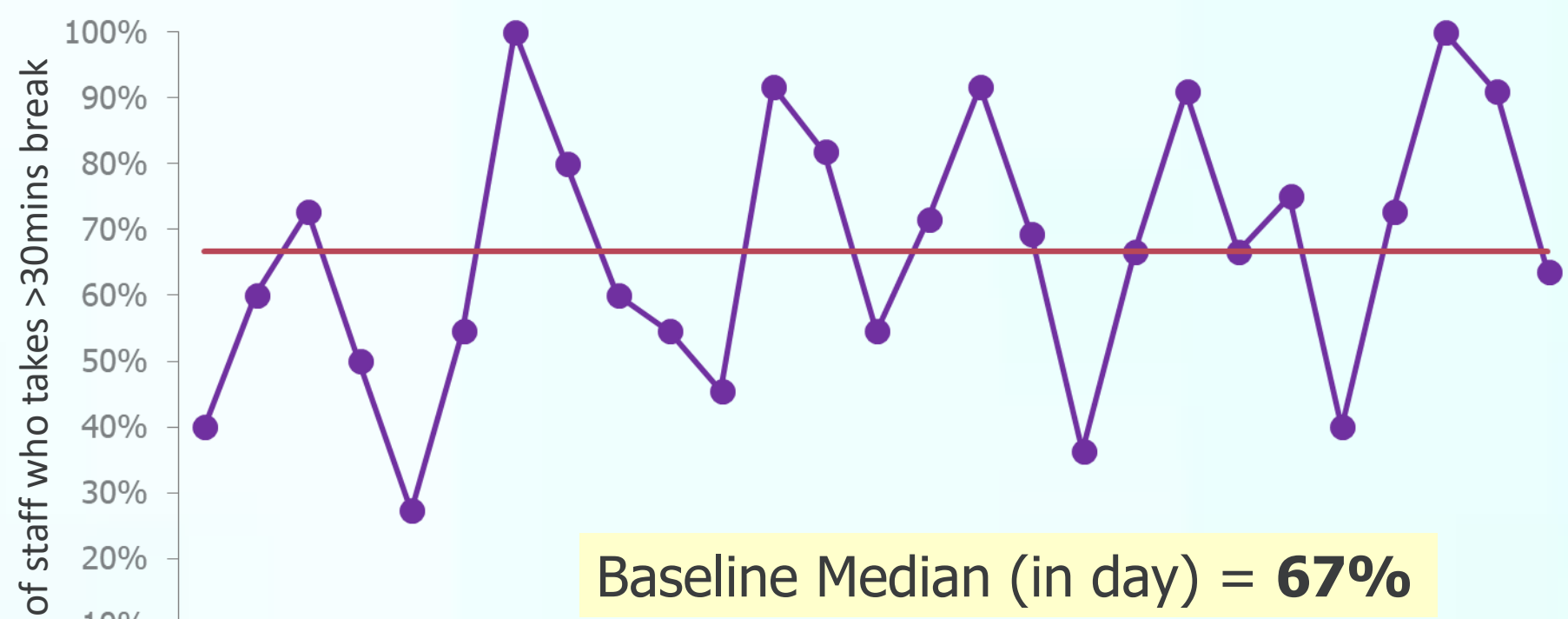
	Name	Designation	Department
Team Leader	James Ang Wei Kiat	Senior Nurse Manager	Nursing Service
Team Members	Chua Qing Wei	Executive	Nursing Service
	Susan Matthew	Assistant Nurse Clinician	Ward Z
	Pavalagaantham Rogawansamy	Senior Staff Nurse	Ward Z
	Tapican Frenzes Paneiro	Assistant Nurse	Ward Z
	Muhammad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

Mentor: 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

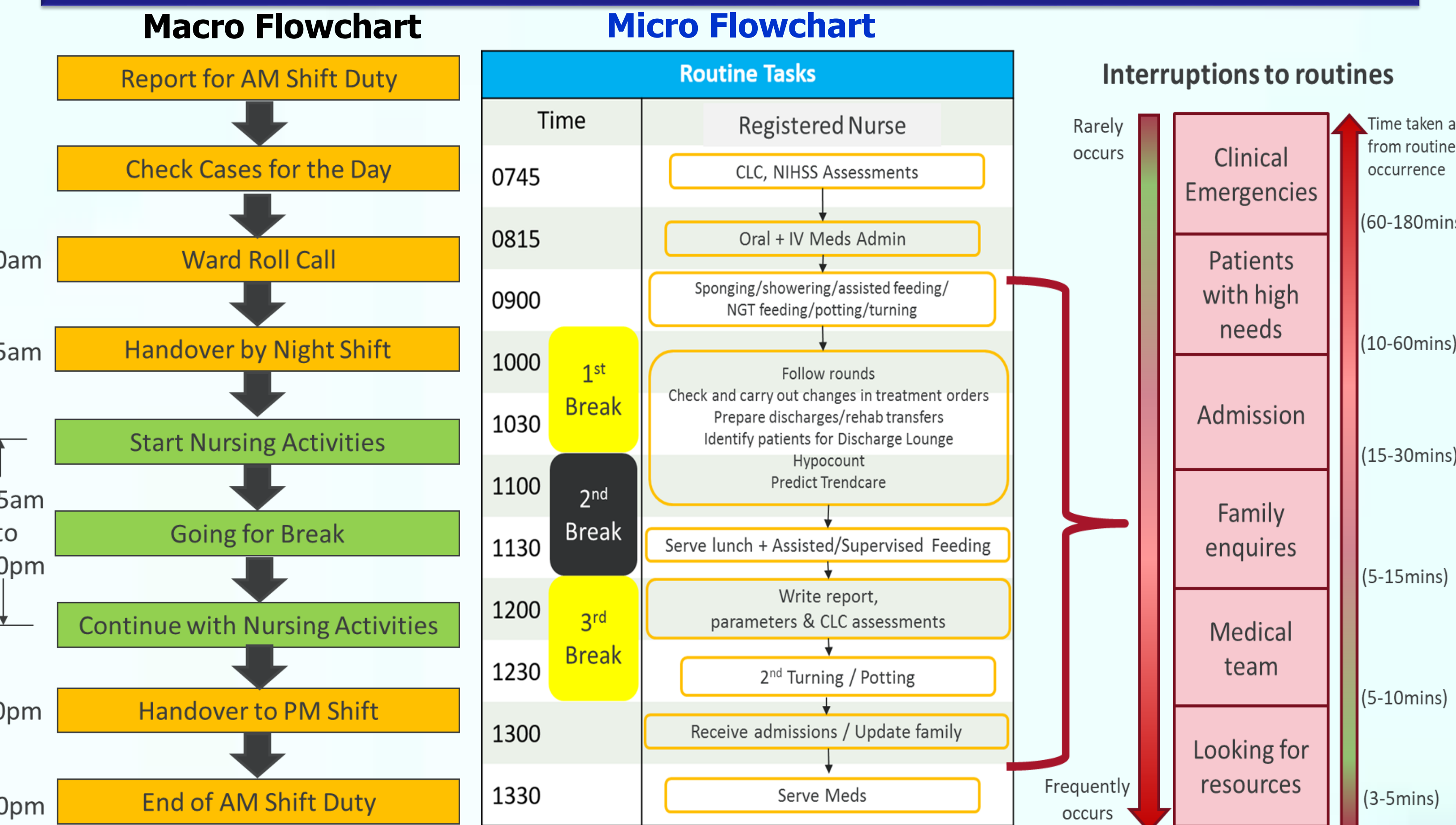


Staff Well-Being affects Patient Safety

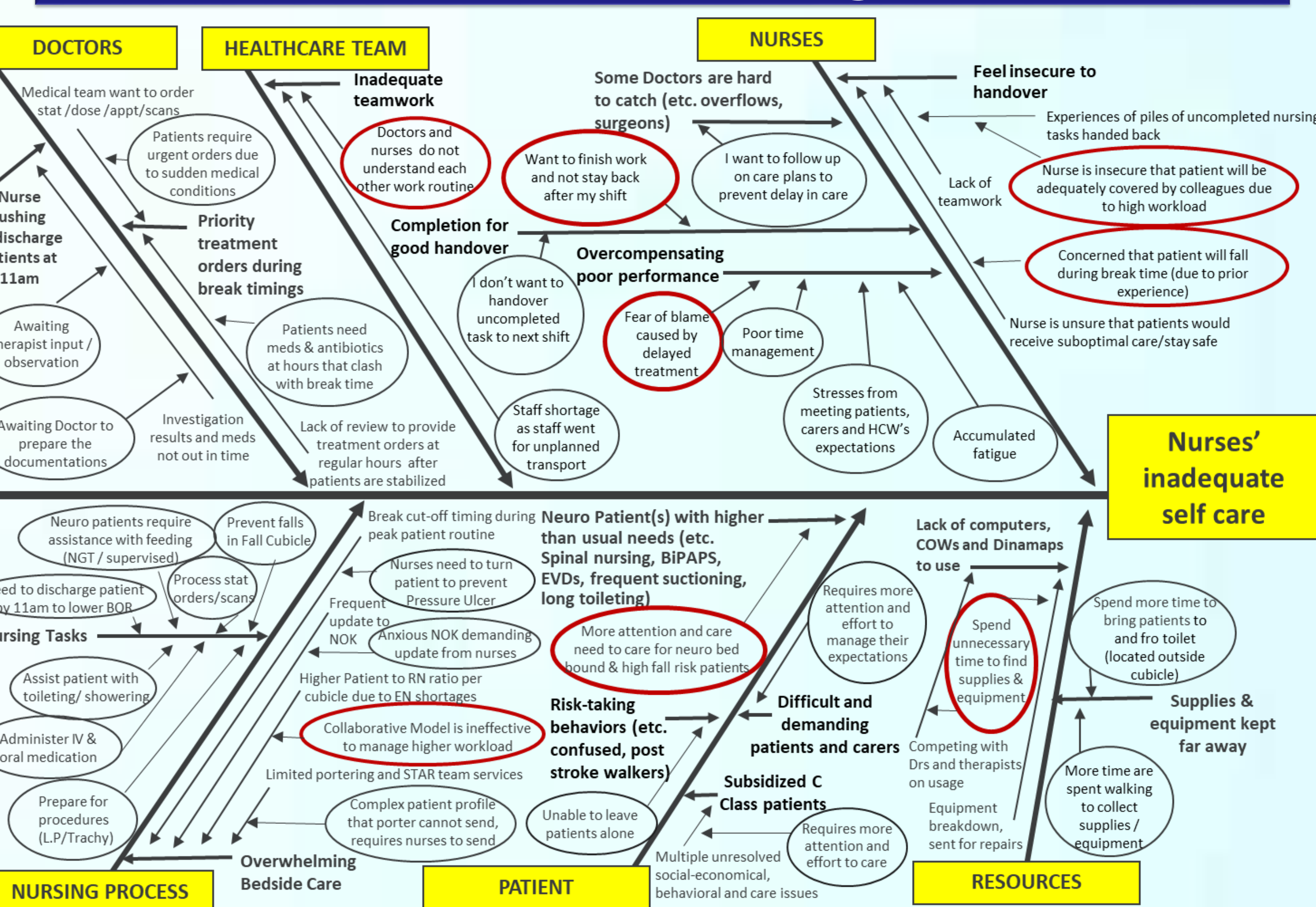
1. Patient safety is threatened by nurse dissatisfaction; many nurses report that their workload causes them to miss important changes in their patients' condition.
2. Poor well-being and high levels of burnout were found to be significantly associated with more self-reported errors. They also put pressure 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.

1. McHugh MD, Kutney-Lee A, Cimiotti JP, Sloane PM, Aiken LH. Nurses' widespread job dissatisfaction, 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, and Patient Safety: A Systematic Review. *PLoS ONE* 11(7): e0159015. doi:10.1371/journal.pone.0159015
3. Perlo J, Balk B, Swensen S, Kabcenell A, Landsman J, Feeley D. IHI Framework for Improving Joy in Work. IHI White paper. Cambridge, Massachusetts: Institute for Healthcare Improvement; 2017. (Available at ihi.org)

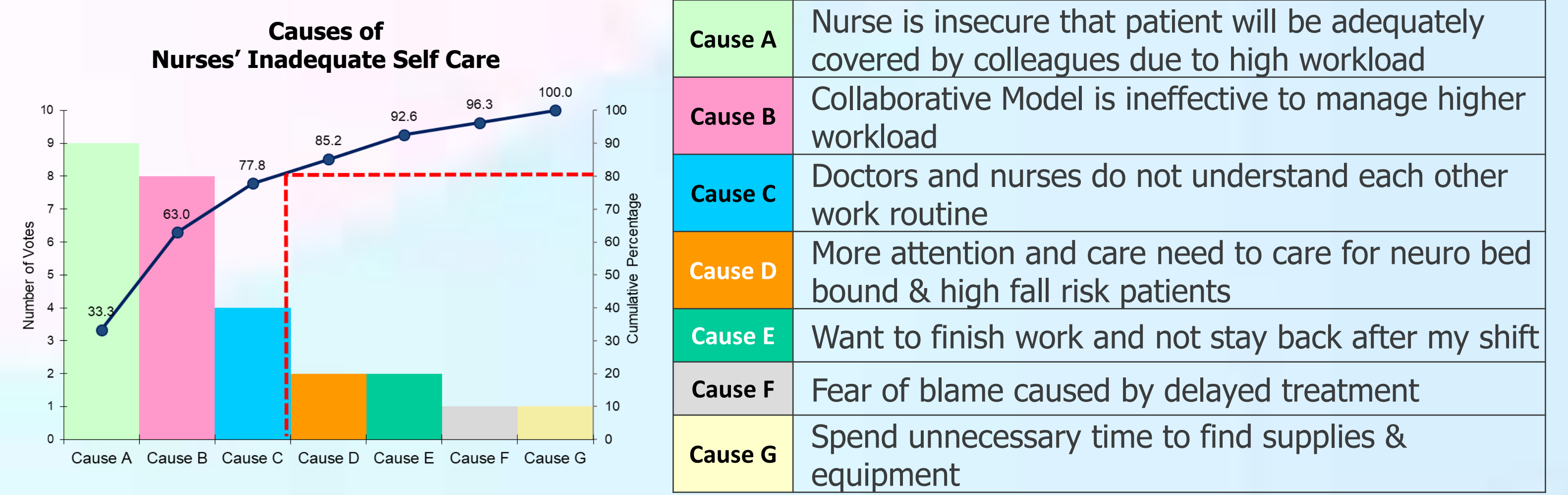
Flow Chart of Process



Cause and Effect Diagram

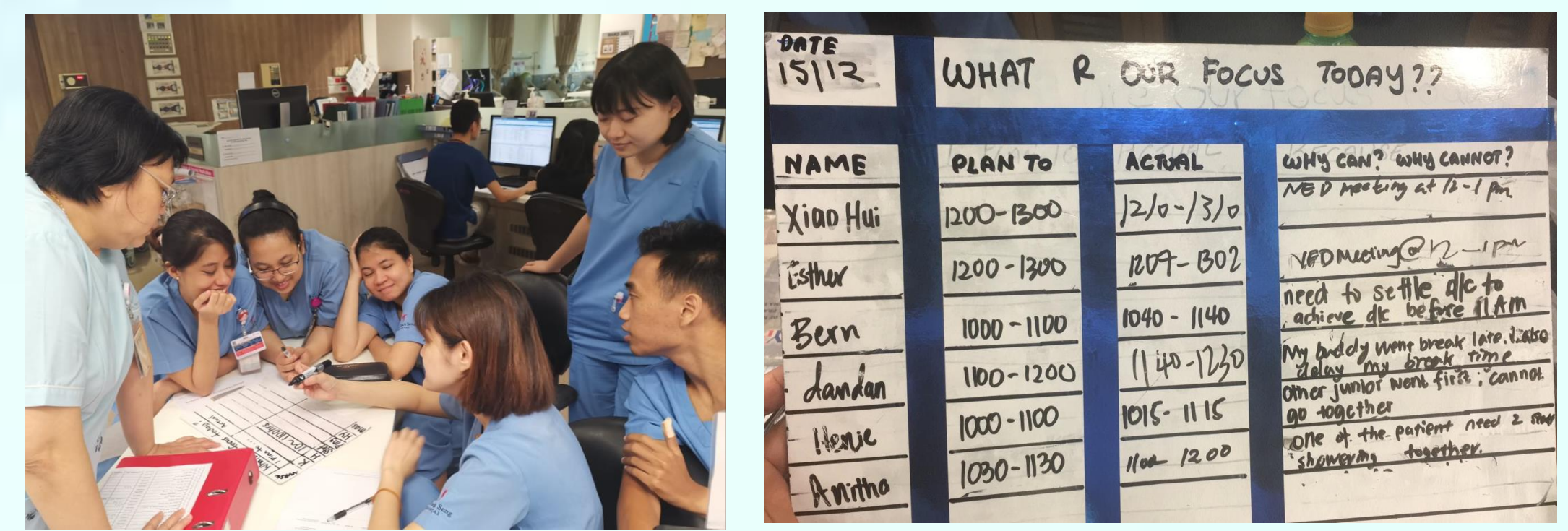


Pareto Chart



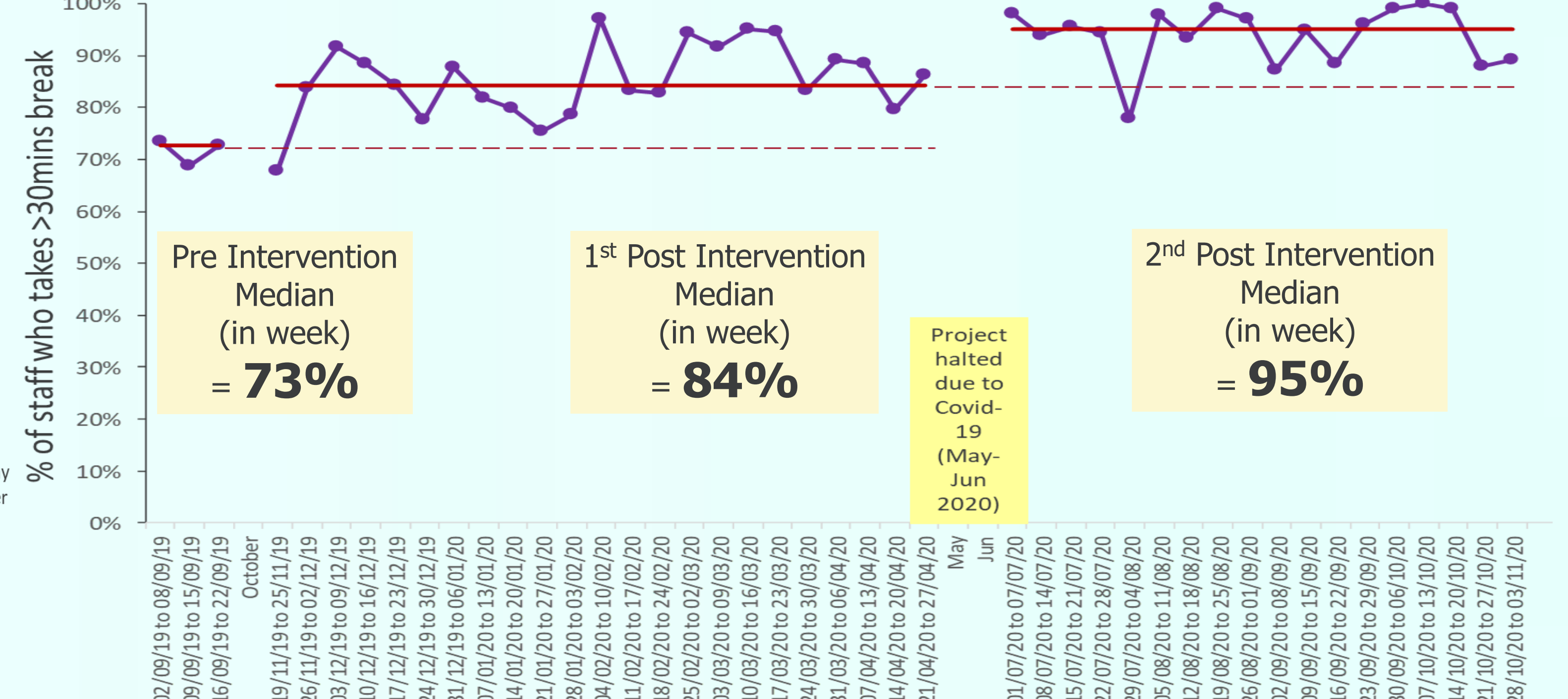
Implementation

Root Cause	Intervention	Implementation Date
Cause A: Nurse is insecure that patient will be adequately covered by colleagues due to high workload	PDSA1A: Freeze Meal Break Time at Peak Period PDSA1B: Improve 'Team Situation Awareness'	19 Nov 2019 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) x 30mins x \$0.97 = \$87.30		(7-0) x 30mins x \$0.97 = \$203.70	
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 change
5. 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