Project Title

Wrist Tag Cup Holder

Project Lead and Members

Project lead: Liu Jingmin

Project members: Cherwin Soo, Cui Nan, Melvin Khor, Adelina, Danica, Elimae, Jia Shin

Organisation(s) Involved

Ng Teng Fong General Hospital

Healthcare Family Group Involved in this Project

Nursing

Applicable Specialty or Discipline

Infectious Diseases

Project Period

Start date   :   28/2/2020

Completed date   :   9/3/2020

Aims

Increase Dr and staff work efficiency. Increase morale. Increase patient's satisfaction

Reduce cost as one staff can do the job instead of two staff to do the job.

Background

See poster appended/below

Methods

See poster appended/below

Results

See poster appended/below

Lessons Learnt

Simple changes are easiest to implement in a highly demanding environment that arises in the face of an ongoing pandemic. Such changes must uphold high standards of infection control and patient's safety without incurring high costs in implementation. To meet such requirements, simple and small changes are easily adopted as part of the daily workflow.

Conclusion

See poster appended/below

Project Category

Care & Process Redesign, Quality Improvement, Job Effectiveness

Keywords

Wrist Tag Scanning, Inpatient Pandemic Ward

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WRIST TAG CUP HOLDER

MEMBERS: LIU JINGMIN, CHERWIN SOO, CUI NAN, MELVIN KHOR, ADELINA, DANICA, ELIMAE, JIA SHIN,

- ✅ SAFETY
- ☐ QUALITY
- ☐ PATIENT EXPERIENCE
- ☐ PRODUCTIVITY
- ☐ COST
- ☐ TEAMWORK
- ☐ COMMUNICATION

Define Problem, Set Aim

Problem/Opportunity for Improvement
Since commitment of surveillance ward on 28/2/2020, nurses and doctors experienced inconvenience in bringing scanning devices into isolation room to scan patient's wrist tag due to Infection control purpose.

Quantify the problem:
Two staffs need to serve the medication for the patient, as one staff read the patient's and the other staff to verify the patient's 2 identifiers. Use the scanner to scan the wrist tag, need to disinfect the scanner after scan the patient's wrist band during taking COVID swab, blood sample and serving medications.

Define the scope of the problem: *Doctors and nurses, Ward B8P (pandemic ward) from 1/3/2020 to now.*

Explain the cost of the problem: *difficult to scan patient's wrist bands who is in COVID isolation room. The staff needs to don on full PPE to attend to the patient. Not allowed to push in the Med cart and Phlebotomy trolley to the isolation room due to infection control reason. Reduce man power during serving medication time.*

Aim
Increase Dr and staff work efficiency. Increase morale.
Reduce patient's satisfaction.
Reduce cost as one staff can do the job instead of two staff to do the job.

Establish Measures

Outcome measure
No. of incidences of mismatch sample and medication error related to 2 identifier from ward B8P, averaging 1 per quarter.

Process measure
Rate of nurses' compliance to verify 2 identifier upon medication administer, before and after specimen dispatching. Defined as the number of checks, divided by the total no. of patient in ward B8P. This remained at 100% throughout.
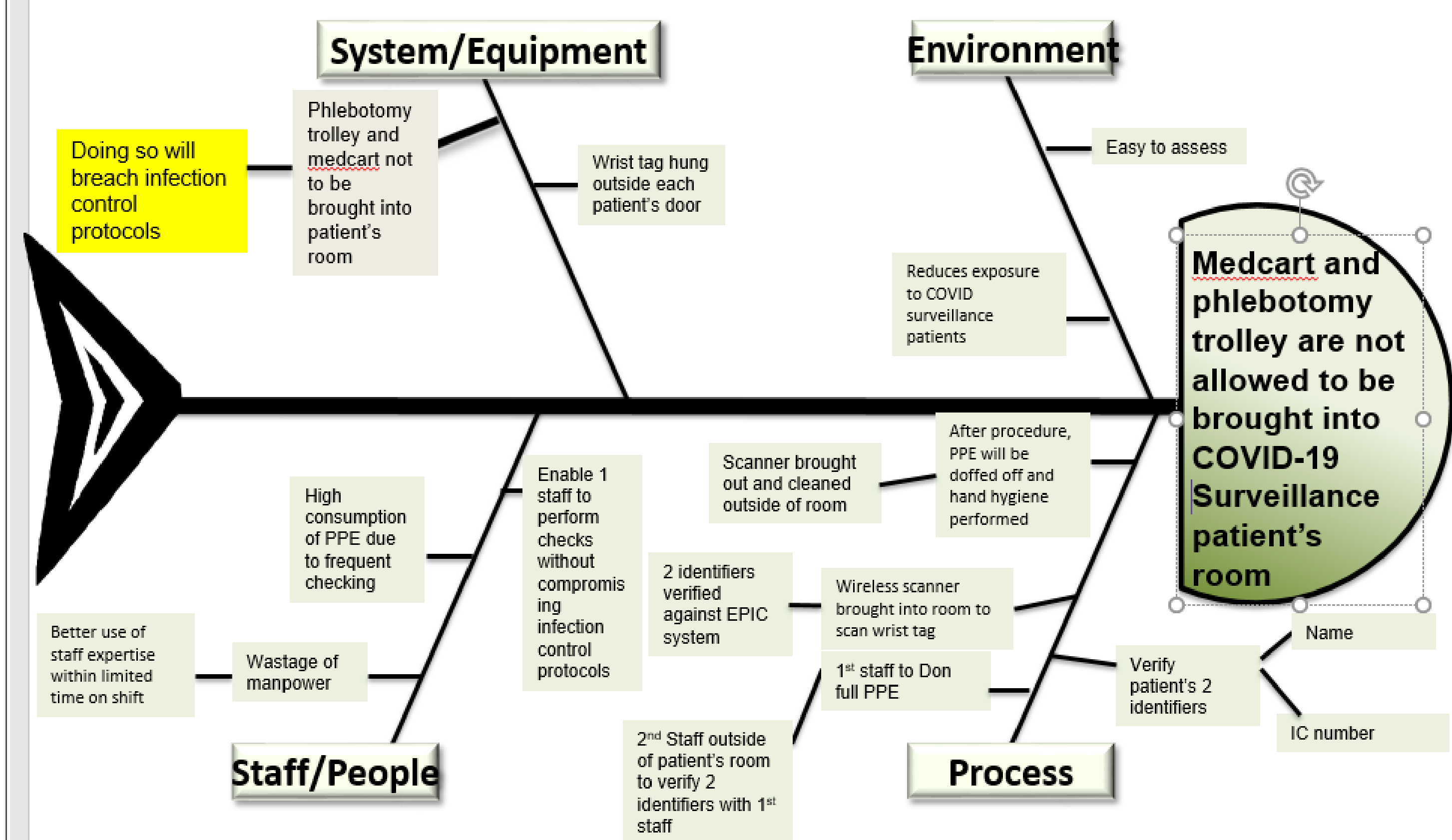
Balancing measure
No. of nurses in the ward- this remained at 20 nurses throughout the project.

Analyse Problem

What is your process _before interventions_?
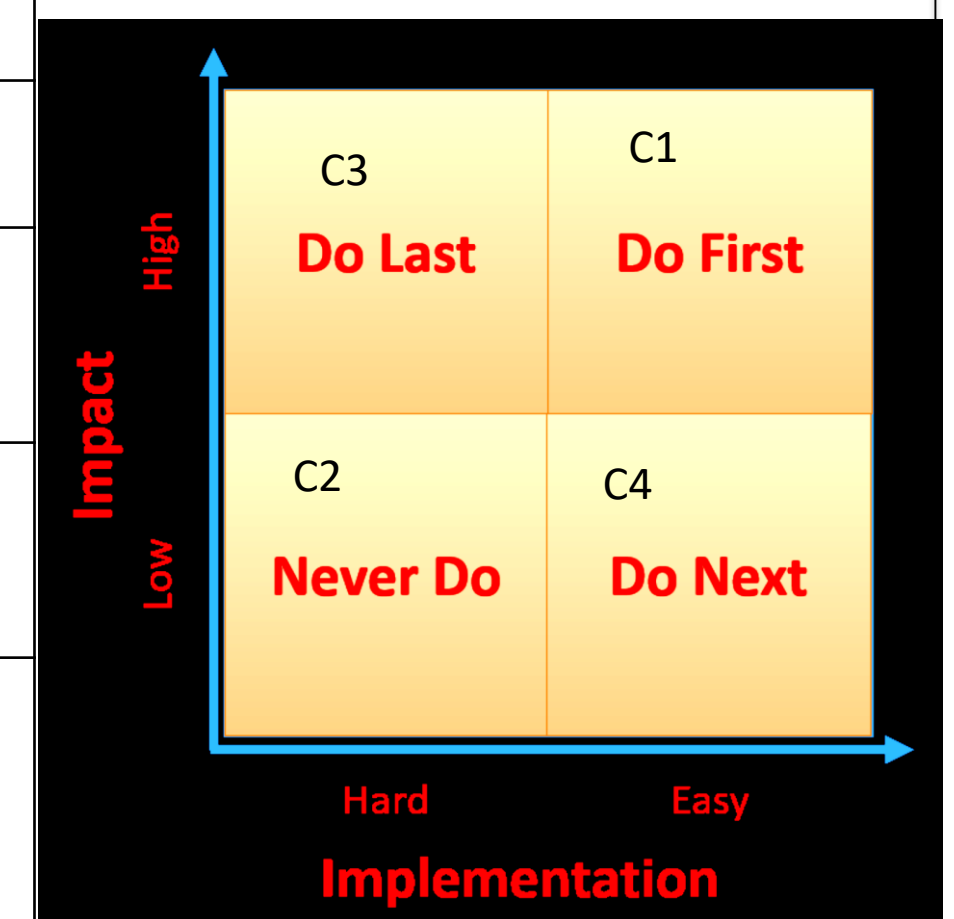*Draw the process steps in a flow chart*

Fishbone Diagram

Select Changes

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

Main cause		Possible Solutions
Patient's wrist tag worn by patient and located in room	C1	Place wrist tag outside patient's door
	C2	Increase Staffing
	C3	Patient's wrist tag to be placed in individualized patient's thin folder
	C4	Patient's wrist tag to be placed in individualized medcart drawers

Test & Implement Changes

CYCLE	PLAN	DO	STUDY	ACT
1	On 2nd March, 2020. The nursing team carried out changes C4 and C3.	Test change was carried out as planned. Negative feedback obtained included increased time in searching for patient's thin folder and misplacing wrist tags. Poor efficency noted when placing wrist tags in medcart drawers.	Ease of access if wrist tags can help with decreasing time spent in checking patient's 2 identifiers and affects staff morale.	Implementation not done due to negative feedback from staff.
2	On 9th March, 2020. The nursing team implemented change C1	Positive feedback received regarding implementation, such as easy access and does not breach infection control protocols.	Staff satisfaction increased after implementation due to ease of access and decreased consumption of resources.	Introduce to staff in roll call and attain approval for implementation in other surveillance wards.

Spread Changes, Learning Points

What are/were the strategies to spread change after implementation?
Implementation of the wrist tag cup holder will be applicable to surveillance wards. Management will be involved in disseminating information of the implementation to be adopted by other surveillance wards.

What are the key learnings from this project?
Simple changes are easiest to implement in a highly demanding environment that arises in the face of an ongoing pandemic.
Such changes must uphold high standards of infection control and patient's safety without incurring high costs in implementation.
To meet such requirements, simple and small changes are easily adopted as part of the daily workflow.

Ng Teng Fong General Hospital

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