

## 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

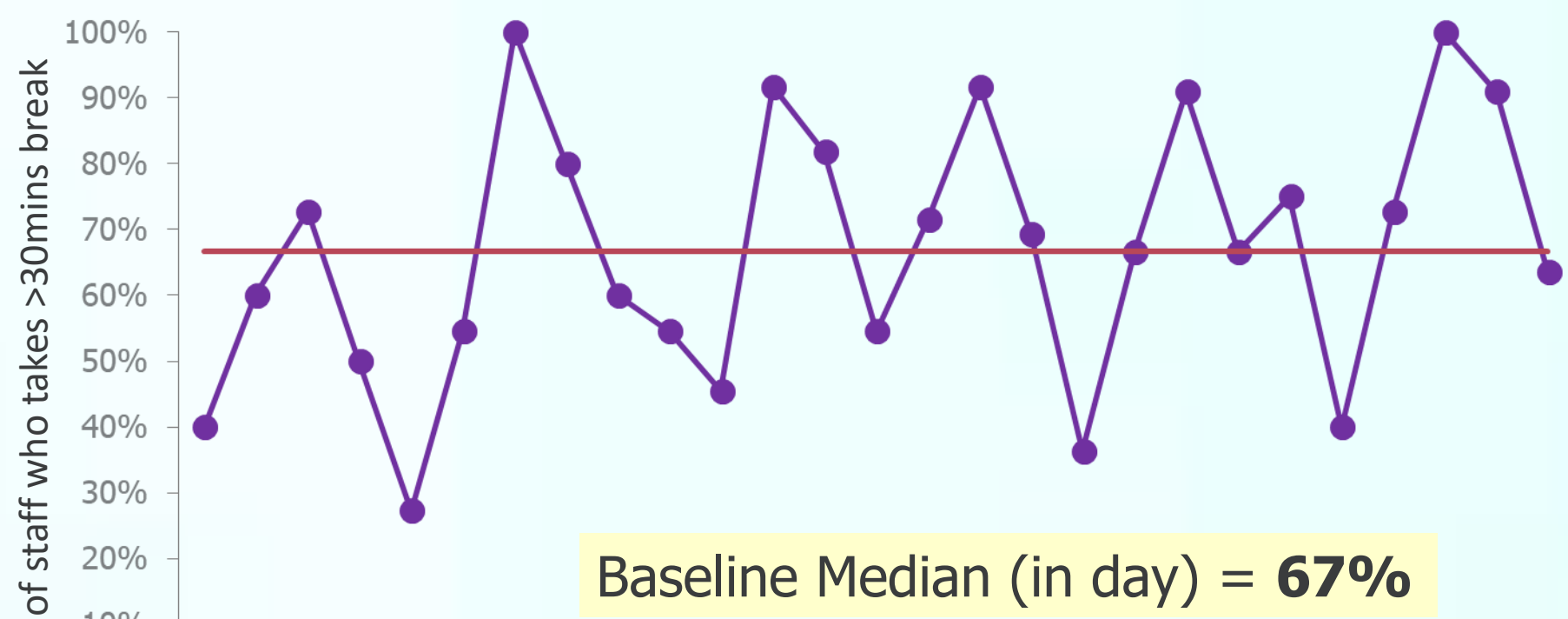
|                     | Name                                  | Designation               | Department      |
|---------------------|---------------------------------------|---------------------------|-----------------|
| <b>Team Leader</b>  | James Ang Wei Kiat                    | Senior Nurse Manager      | Nursing Service |
| <b>Team Members</b> | 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

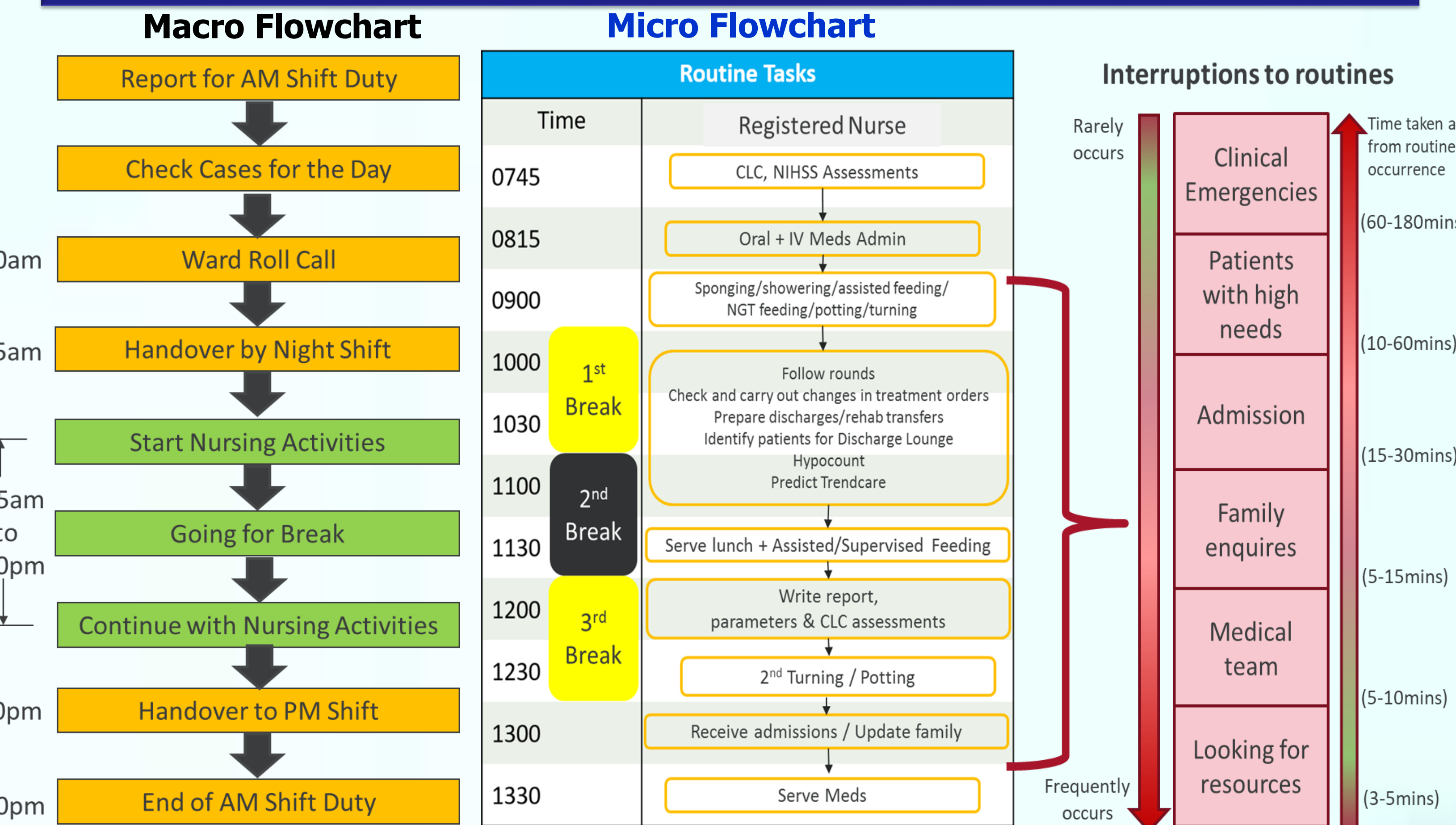


### Staff Well-Being affects Patient Safety

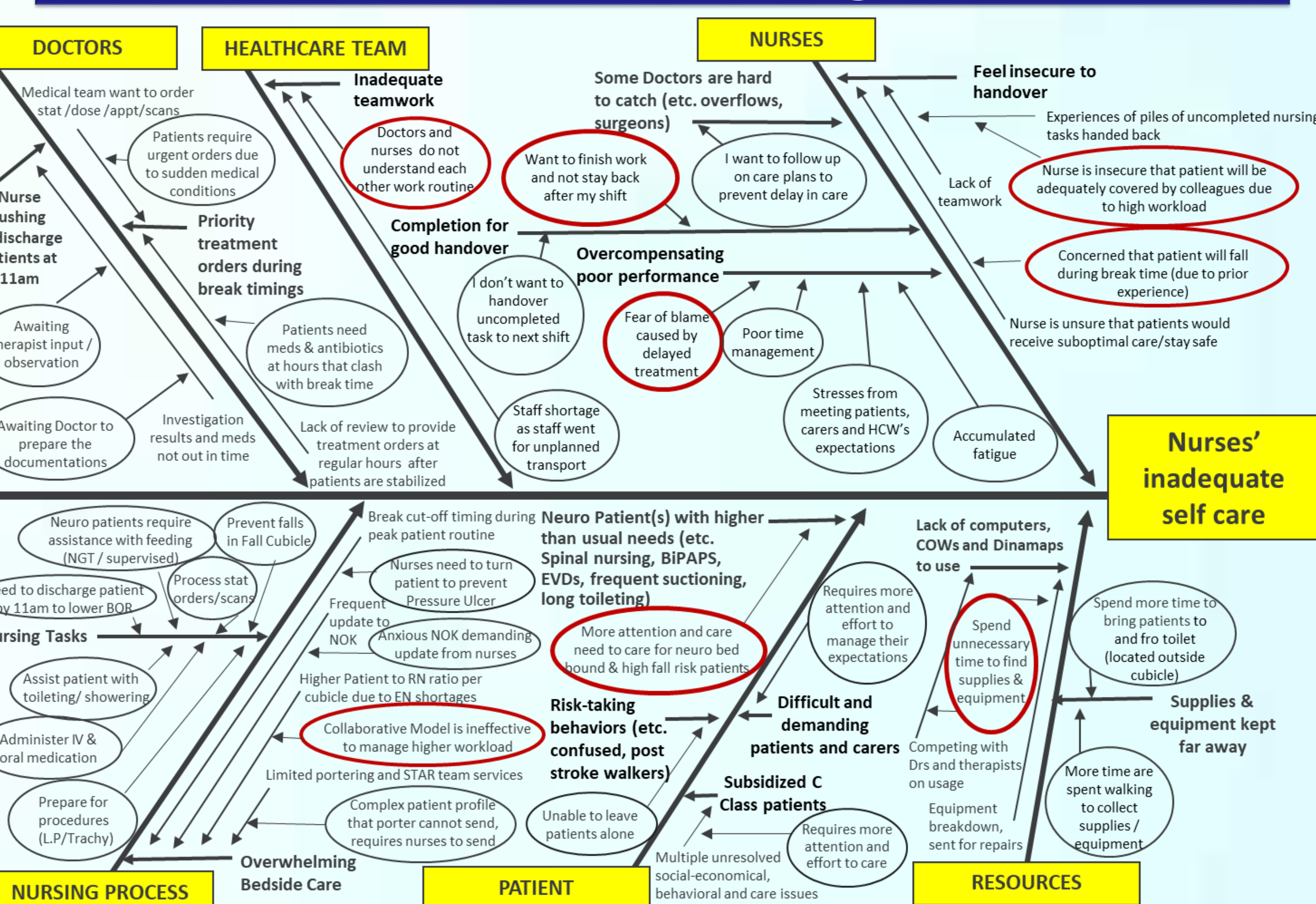
1. Patient safety is threatened by nurse dissatisfaction; many nurses report that their workload causes them to miss important changes in their patients' condition.
2. Poor well-being and high levels of burnout were found to be significantly associated with more self-reported errors. They also put pressure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

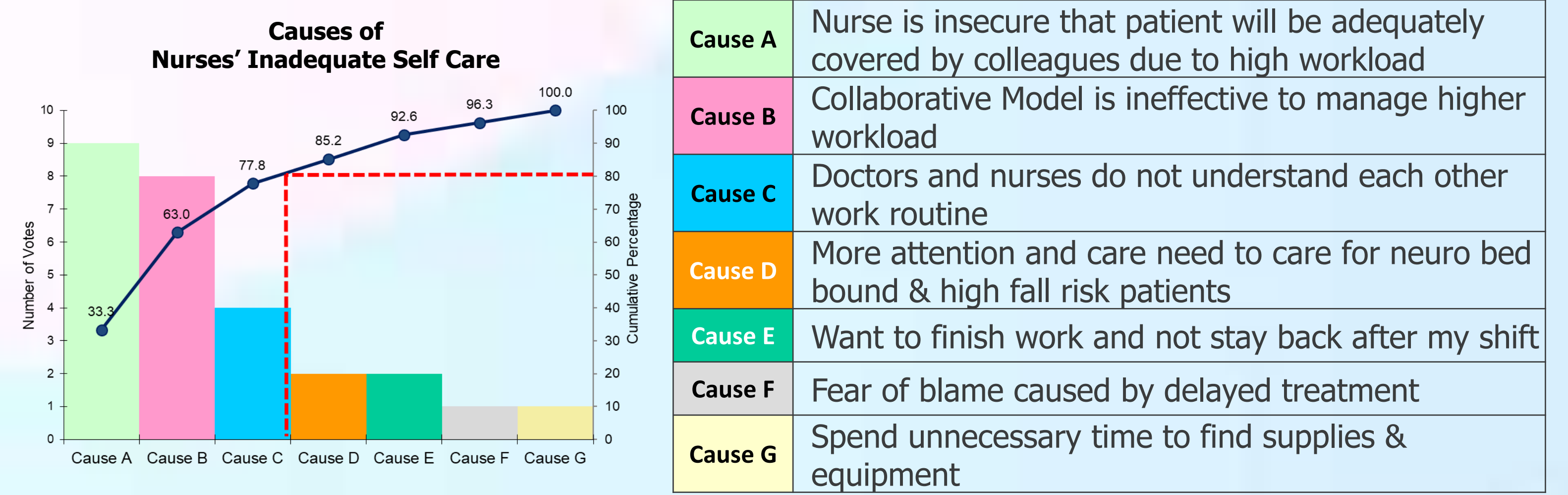
## Flow Chart of Process



## Cause and Effect Diagram

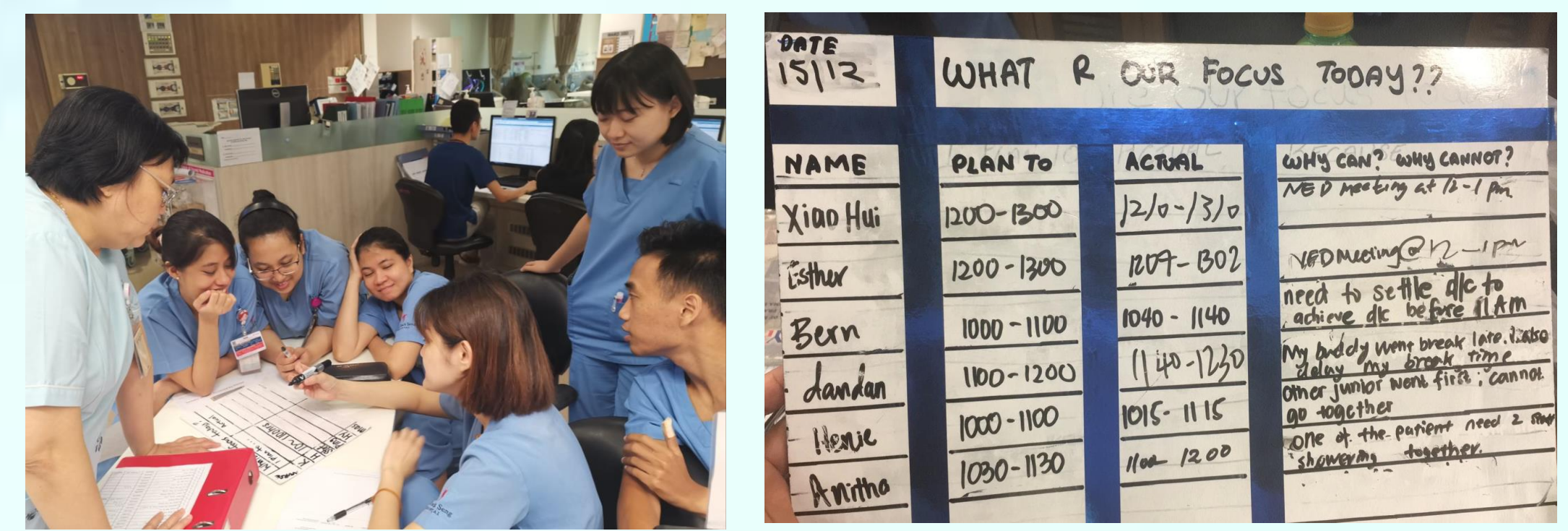


## Pareto Chart



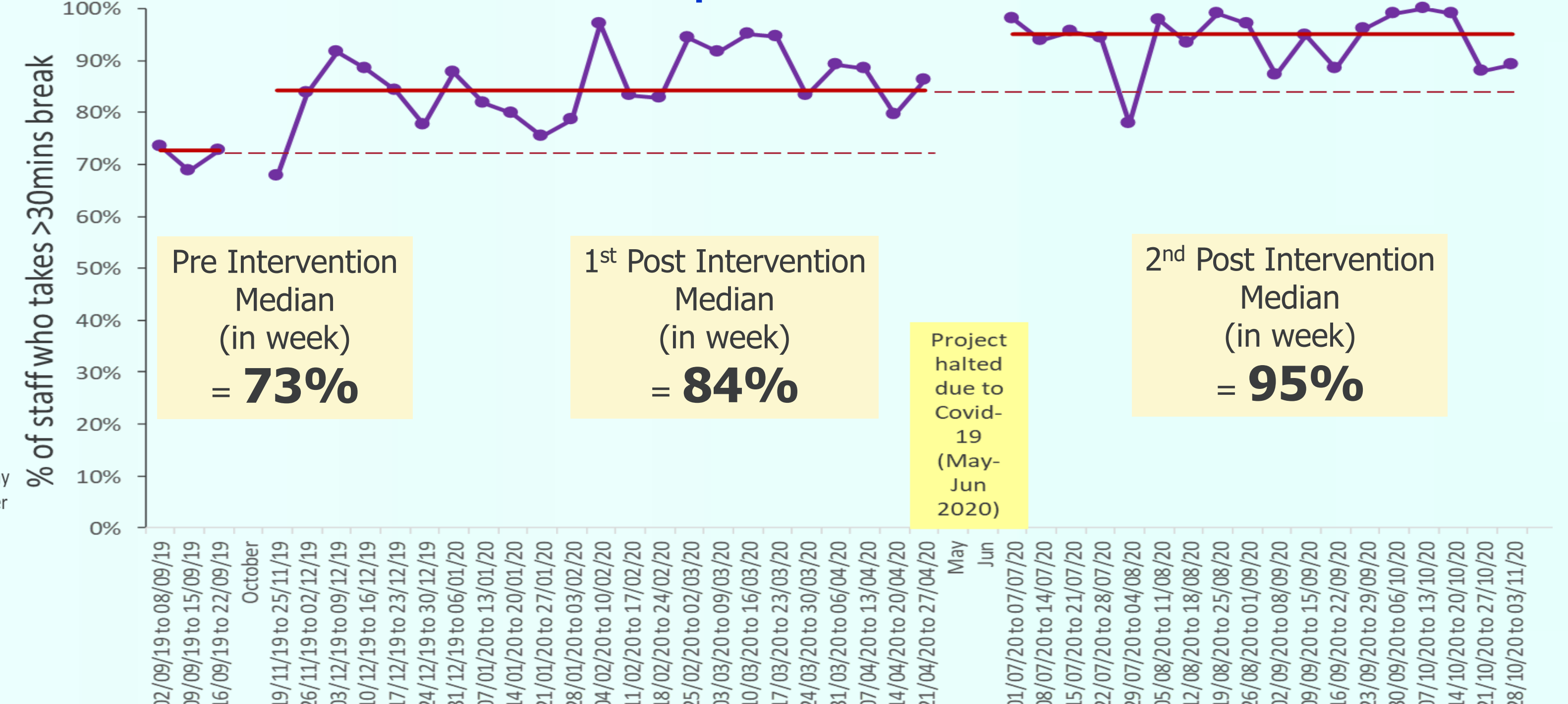
## Implementation

| Root Cause   | Intervention  | Implementation Date        |
|--|---|----------------------------|
| <b>Cause A:</b> Nurse is insecure that patient will be adequately covered by colleagues due to high workload | <b>PDSA1A:</b> Freeze Meal Break Time at Peak Period<br><b>PDSA1B:</b> Improve 'Team Situation Awareness' | 19 Nov 2019<br>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%<br>from Runchart<br>2 Sep to 22 Sep 2019 | 5%<br>from Runchart<br>1 Jul 2020 to 3 Nov 2020 | 22%<br>from Runchart<br>21 Oct to 1 Nov 2019 | 0%<br>from Runchart<br>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