



“JOY in Work (JIW) in NHG is a movement, to help colleagues find and increase joy in work; it’s about making connections with each other, and caring for each other”, explained Prof Chua Hong Choon, Deputy Group Chief Executive Officer (Clinical), National Healthcare Group (NHG).

Identifying disengagement and discontent as factors that would ultimately lead to higher staff turnover, poor patient experience and quality of healthcare<sup>1</sup>, the NHG JIW Workgroup set out to conceptualise a toolkit to help staff find joy and a renewed sense of sense of purpose in the work they do.

JIW is inspired by a paper published by IHI in 2017

called the “IHI Framework for Improving Joy in Work”, where the importance of addressing burnout is highlighted due to its costs to the healthcare industry, both in terms of talent drain, as well as reduced care for patients. The paper also takes us back to W. Edwards Deming’s work.

W. Edwards Deming was a well-known guru in quality management. His 14 points for management, first presented in his book *Out of the Crisis*, address joy, but use different terms which he called it as “*pride of workmanship*”. In Deming’s point 12 - remove barriers that rob the hourly worker of his right to pride of workmanship, he explained that the responsibility of the supervisors must be changed from sheer numbers to

quality. This allow everyone to take pride in their work without being compared with one another. Over time, the quality system will raise the level of everyone’s work to an equally high level.

For Deming, “*pride of workmanship*” and “joy” were highly related, if not interchangeable. Later in life, Deming increasingly emphasised the importance of joy in work. In his final lectures, he routinely stated that “*Management’s overall aim should be to create a system in which everybody may take joy in [their] work.*” Ensuring joy is a crucial component of the “*psychology of change*,” one of the cornerstones of Deming’s scientific approach to improvement.

<sup>1</sup> Perlo J, Balik 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. p.5

The JIW Workgroup, helmed by Prof Chua Hong Choon (DyGCEO (Clinical), NHG), is made up of a core workgroup or steering committee, secretariat and 7 pilot teams.

The journey kicked off with an environmental scan to identify initiatives and programmes already in place across all of NHG. After an extensive literature research, NHG Group Quality (GQ) then adapted the definitions in the self-assessment tool (refer to page 4) in the IHI framework so it resonates with the NHG staff. Ground-up small pilot teams were later invited to test tools and solutions from the toolkit over a period of 6-9 months. Through an iterative process of focused consultations and surveys, the JIW Workgroup continue to monitor, modify, and bridge the needs or gaps of the toolkit, further refining it.

The toolkit prototype, which contains self-assessment tools and organised into 4 steps (refer to page 3), was eventually launched on 25 July 2019.

## “At its core, the JIW is a bottom-up approach to creating joy in work, where teams decide together on what matters to them at work”

Prof Chua Hong Choon, DyGCEO (Clinical), NHG

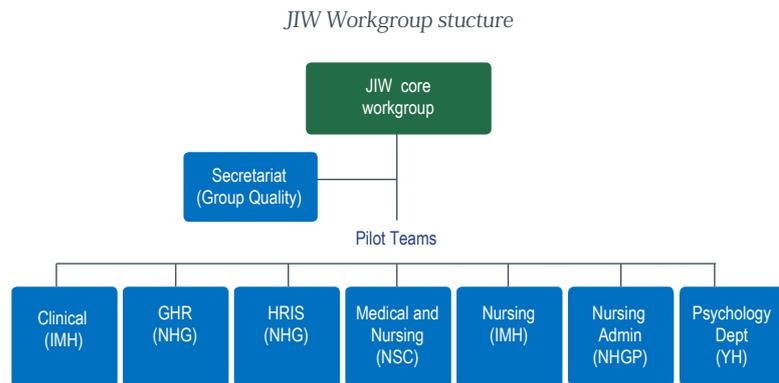


Prof Chua and attendees discussing about the toolkit.



Participants holding up prototype of the JIW toolkit, meant to facilitate the process.

While the pilot teams found it useful, the toolkit is not intended to be an end in itself, rather a means used to facilitate communication and encourage participation, in order to foster engagement and promote job satisfaction. This in turn will help promote individual resilience, improve team dynamics, and create a better work environment for everyone at NHG. 🌀



NHG Group Quality would like to extend our heartfelt appreciation to these pilot teams for their participation and feedback in the JIW workshops:

- Clinical (IMH) - led by Dr Pamela Ng
- GHR (NHG) - led by Ms Stephanie Chow
- HRIS (NHG) led by - Ms Monica Cheng and Mr Gary Chua
- Medical and Nursing (NSC) - led by Dr Pan Jiun Yit
- Nursing (IMH) - led by Ms Jancirani and Mr Panirselvam
- Nursing Admin (NHGP) - led by Mr Richard Low
- Psychology Dept (YH) - led by Ms Lisa Choo

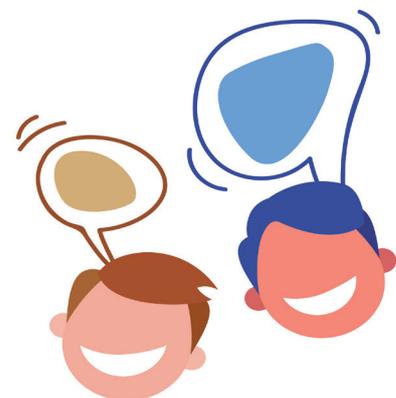
The core workgroup responsible for the overall planning and strategic direction of the project consists of:

- Prof Chua Hong Choon (DyGCEO (Clinical), NHG) (Chair and Facilitator)
- Adj A/Prof Tai Hwei Yee (GCQO, NHG)
- Mrs Olivia Tay (GCHRO, NHG)
- Ms Rosemary Soong (Director HR, NHG)
- A/Prof Daniel Fung (CMB, IMH)
- Prof Tan Suat Hoon (Director, NSC)
- Adj A/Prof Wong Moh Sim (Dy Chairman, Medical Board, KTPH)
- Ms Yong May Chin (Deputy Director, GQ, NHG)
- Dr Faith Chia (DIO, NHG)
- Ms Pamela Chew (Principal Psychologist, TTSH) rep. Dr Huang Wanping (Principal Psychologist, TTSH)
- A/Prof Wong Teck Yee (Family Physician, Senior Consultant, TTSH)
- Ms Chen Yee Chui (Chief Nurse, NHGP)

## The 4 steps to creating Joy in Work

### Step 1: Creating conversation about what matters

Prof Chua explained that Step 1 involved creating a climate for conversation and psychological safety. He encouraged that teams be set up on a voluntary basis, and that teams find time to talk about the issues that matter to them. Time could be set aside for this, perhaps an hour a week. The aim of this exercise is to get a sense of what our colleagues feel matters most to them in the



work setting. He explained that these conversations could take place in an informal manner,

## JOY IN WORK

### NHG Self-Assessment Tool

(Please tick the appropriate boxes)

HOW OFTEN DO YOU EXPERIENCE THE FOLLOWING IN YOUR WORK?	NEVER	RARELY	SOMETIMES	ALL THE TIME	N/A
<b>PHYSICAL SAFETY</b> <i>I am free from health hazards &amp; physical harm in my daily work</i>	<input type="checkbox"/>				
<b>PSYCHOLOGICAL SAFETY</b> <i>I am free from emotional harm in my daily work; There is Just Culture &amp; Second Victim support in my workplace</i>	<input type="checkbox"/>				
<b>MEANING &amp; PURPOSE</b> <i>Daily work is connected to why I am in healthcare; I am making a difference through my work; I understand how I am contributing to my organisation's goals</i>	<input type="checkbox"/>				
<b>CHOICE &amp; AUTONOMY</b> <i>My workplace supports flexibility &amp; choices that are within limits/boundaries; My workplace encourages shared responsibility</i>	<input type="checkbox"/>				
<b>RECOGNITION &amp; REWARDS</b> <i>My workplace celebrates daily achievements (both individual &amp; team level); My leaders show timely recognition</i>	<input type="checkbox"/>				
<b>PARTICIPATIVE MANAGEMENT</b> <i>My leaders create space to hear, listen, &amp; involve before taking actions; My leaders communicate clearly &amp; facilitates consensus building for shared decision making</i>	<input type="checkbox"/>				
<b>CAMARADERIE &amp; TEAMWORK</b> <i>I feel a sense of "Kampong spirit" that is developed through trust, respect &amp; friendship at work; There is an appreciation of generational &amp; cultural diversity</i>	<input type="checkbox"/>				
<b>DAILY IMPROVEMENT</b> <i>There is continuous improvement &amp; shared learning in my work; I am motivated to make everyday a better workday for myself &amp; my team</i>	<input type="checkbox"/>				
<b>WELLNESS &amp; RESILIENCE</b> <i>My workplace cultivates resilience &amp; promotes work-life harmony; There is availability of physical &amp; mental health support</i>	<input type="checkbox"/>				
<b>REAL-TIME MEASUREMENT</b> <i>There is regular feedback mechanism that encourages mutual, timely &amp; honest discussion for learning &amp; growth</i>	<input type="checkbox"/>				
<b>ANY COMMENTS</b> (e.g. specific areas done well / opportunities for improvements)					

The questionnaire contains the top 10 key areas that matter most to people in work.

with colleagues just chatting informally; or teams could utilise 'conversation cards' found in the toolkit to prompt conversation.

### Step 2: Measuring, and finding out the gaps that prevent us from creating joy in work

After teams have developed rapport with each other and created a climate of open sharing, it is time to measure. While Step 1 was more a free-flow conversation, Step 2 emphasises measurement in a more structured way, in that topics

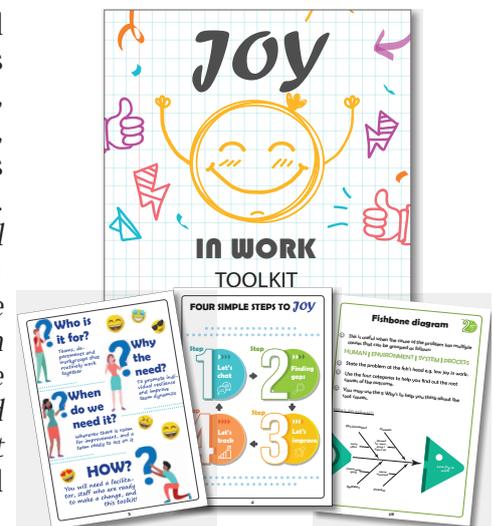
are specified and measured across teams. To start off, teams are given a list of 10 areas, adapted from IHI's framework, containing the top 10 key areas that matter to people in work. These areas are: 1) *physical safety* 2) *psychological safety* 3) *meaning and purpose* 4) *choice and autonomy* 5) *recognition and rewards* 6) *participative management* 7) *camaraderie and teamwork* 8) *daily improvement* 9) *wellness and resilience*, and 10) *real-time management*. These 10 categories are found

in a questionnaire sheet in the toolkit, and team members are asked to score these areas according to these categories 'never', 'rarely', 'sometimes', 'all the time', 'n/a'. After teams have added the scores up, they can input these scores into a spider diagram/radar chart. This shows them at a glance what their strongest areas are; and which areas need improvement. Prof Chua and the JIW team emphasised that teams can choose to work on either their weak areas, or strong ones.

### Step 3: Choosing one area to make an improvement on

The third step involves choosing one area to work, and an improvement or intervention is applied to this area, in the vein of a Plan Do Study Act (PDSA) cycle. At the end of the cycle, the chosen area is measured again, to see if any improvements have been made.

The practicalities of working through this are: the team chooses one area to work on, and analyses what are the possible factors that cause this area to be a problem. To aid them in their analysis, teams



Joy in Work Toolkit (prototype).

can use traditional improvement tools such as fishbone diagrams, an extremely useful tool for root cause analysis. Thereafter, teams can choose one intervention to apply to the problem area.

Other tools that teams can use would be the '5 Whys tool'- which involves teams working

backwards why things have occurred. Other interesting tools are 'rent-a-head' for example, teams could attempt to be Albert Einstein, or even Jackie Chan and brainstorm ideas of how either would solve the problem if faced with a similar situation. etc.

**Step 4: Measuring again**

Lastly, after the interventions has been applied to the problem area, the teams measure to see if any improvement has been made. ☞

# DAILY IMPROVEMENT TO CREATE JOY

The following is an interview with Mr Richard Low Sai Yin, Assistant Director in Nursing Services at National Healthcare Group Polyclinics (NHGP). He and his colleagues participated in a nursing led Joy in Work pilot. We caught up with him recently to ask him about his experiences participating in the movement.

**What were your reasons for joining the Joy in Work movement? What did you hope to achieve?**

I was nominated by my Chief Nurse to take part in the NHG Joy in Work pilot. At the end of the pilot, I hope to contribute some ideas to improve the NHG Joy in Work framework. On a personal level, I seek to better understand and build stronger working relationships with my colleagues.



Mr Richard Low and Ms Magdalene Tay Yu Mui, who are piloting the JIW initiative at Woodlands Polyclinic.

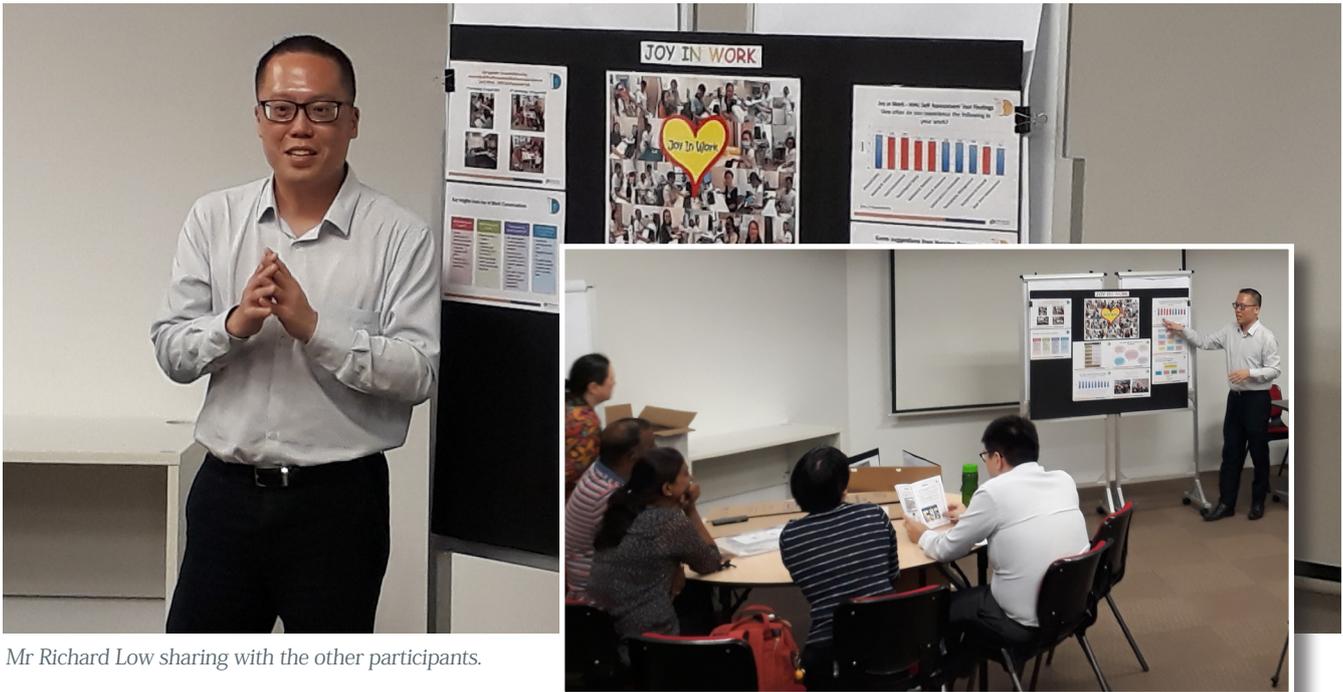
**How big is your team?**

There are 2 of us working on this pilot, with support from my nursing colleagues from other polyclinics.

**For Step 1, how often did you**

**and your colleagues meet to talk about the issues that mattered to all of you?**

We met our nurse managers over 2 half-day sessions to have face-to-face conversations. For other colleagues who



Mr Richard Low sharing with the other participants.

were unable to join in the conversations, we used electronic survey forms to gather feedback. We then discussed collectively the issues highlighted at a recent nursing retreat in Oct to jointly identify and work on areas for improvement.

**For Steps 2 and 3, do you have any advice for other teams?**

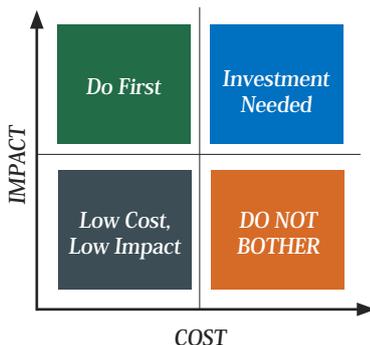
There will be many issues highlighted during the conversations. I will advise teams to work on areas that they can influence and have control over. It is very important to listen to all participants on what they feel is the best solution to resolve a problem.

A good approach will be to aim for low-input and high-impact solutions; that are meaningful and sustainable.

**Did you find it easy as a team, to decide on one area to work on to improve (i.e. Step 3)?**

No, actually there were many areas for improvement highlighted during the conversations and it was not easy to decide on one area to improve. For the Joy in Work pilot, we decided to focus on Daily Improvement; and formed a focus group to raise and solve work-related issues together. We are currently piloting this initiative at Woodlands Polyclinic.

regularly on any changes made as listening and communication is a very important process. Finally, please constantly explore ways on how to make work joyful for you, for me, and for us! ☺



Intervention-Impact Decisions box.

**What advice would you have for any team thinking about starting a Joy in Work group in their workplace?**

Joy in Work is a movement to create a safe and positive environment for everyone to find meaning and purpose in work. Do talk to your team

**EDITORIAL**

**TEAM**

Vivian Chua  
Manager

Sri Bayu  
Executive

**ADVISORS**

Adj A/Prof Tai Hwei Yee  
Group Chief Quality Officer

Yong May Chin  
Deputy Director