

#### CHI Learning & Development (CHILD) System

#### **Project Title**

Improving Staff Confidence and Communication with Family Members

#### **Project Lead and Members**

Project lead: SSN Lee Hong Wei

Project members: SSN Nuruljannah Binte Mohd Tahar, SSN Angelin Chin Chye Chien,

Ag ADON Ms Ng Wei Wei, NC Rajaletchumi D/O Raja Singam

#### **Organisation(s) Involved**

Ng Teng Fong General Hospital

#### **Healthcare Family Group Involved in this Project**

Nursing

#### **Applicable Specialty or Discipline**

Inpatient Ward B9 (Private)

#### **Project Period**

Start date: September 2021

Completed date: February 2022

#### Aims

To cultivate the habit of updating patient's family in the department, and in the process alleviating the anxiety which may be felt by family.

#### Background

See poster appended/ below

#### Methods

See poster appended/below



### CHI Learning & Development (CHILD) System

#### Results

See poster appended/ below

#### **Lessons Learnt**

In times of an ongoing pandemic where visitation policies are ever changing, regular updates from the ward nurse may be able to alleviate the anxiety felt by family.

#### Conclusion

See poster appended/ below

#### **Project Category**

Care Continuum

Inpatient care

Care & Process Redesign

Quality Improvement, Workflow Redesign

#### Keywords

Communication Update Template /Checklist

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# IMPROVING STAFF CONFIDENCE AND COMMUNICATION WITH FAMILY MEMBERS

Project leader: SSN Lee Hong Wei,

Project members: SSN Nuruljannah Binte Mohd Tahar

SSN Angelin Chin Chye Chien

Project Sponsors: Ag ADN Ms Ng Wei Wei, NC Rajaletchumi D/O Raja Singam

# J SAFETY □ PRODUCTIVITY J QUALITY □ COST PATIENT □ TEAMWORK EXPERIENCE □ COMMUNICATION

# Define Problem, Set Aim

## **Problem/Opportunity for Improvement**

Patient's family members express frustration as lack of updates and being unable to visit family due to extended Covid-19 pandemic restrictions.

# Quantify the problem:

Staff confidence in communicating or updating family on patient's condition was inadequate

# Define the scope of the problem:

Ward Nurses, Ward B9 private, period from September 2021 to February 2022

# Explain the cost of the problem:

Patient's family members verbally complaint during first call of updates saying they have been waiting since admission for an update. Patient's family write in to service quality to complaint that no updates on patient's condition were given.

## Aim

To cultivate the habit of updating patient's family in the department, and in the process alleviating the anxiety which may be felt by family.

# Establish Measures

## **Outcome measure**

Reduce number of complaints from family pertaining to not receiving updates after patient have arrived in ward 9 private.

# **Process measure**

Nurse in charge must update the patient family in a timely manner.

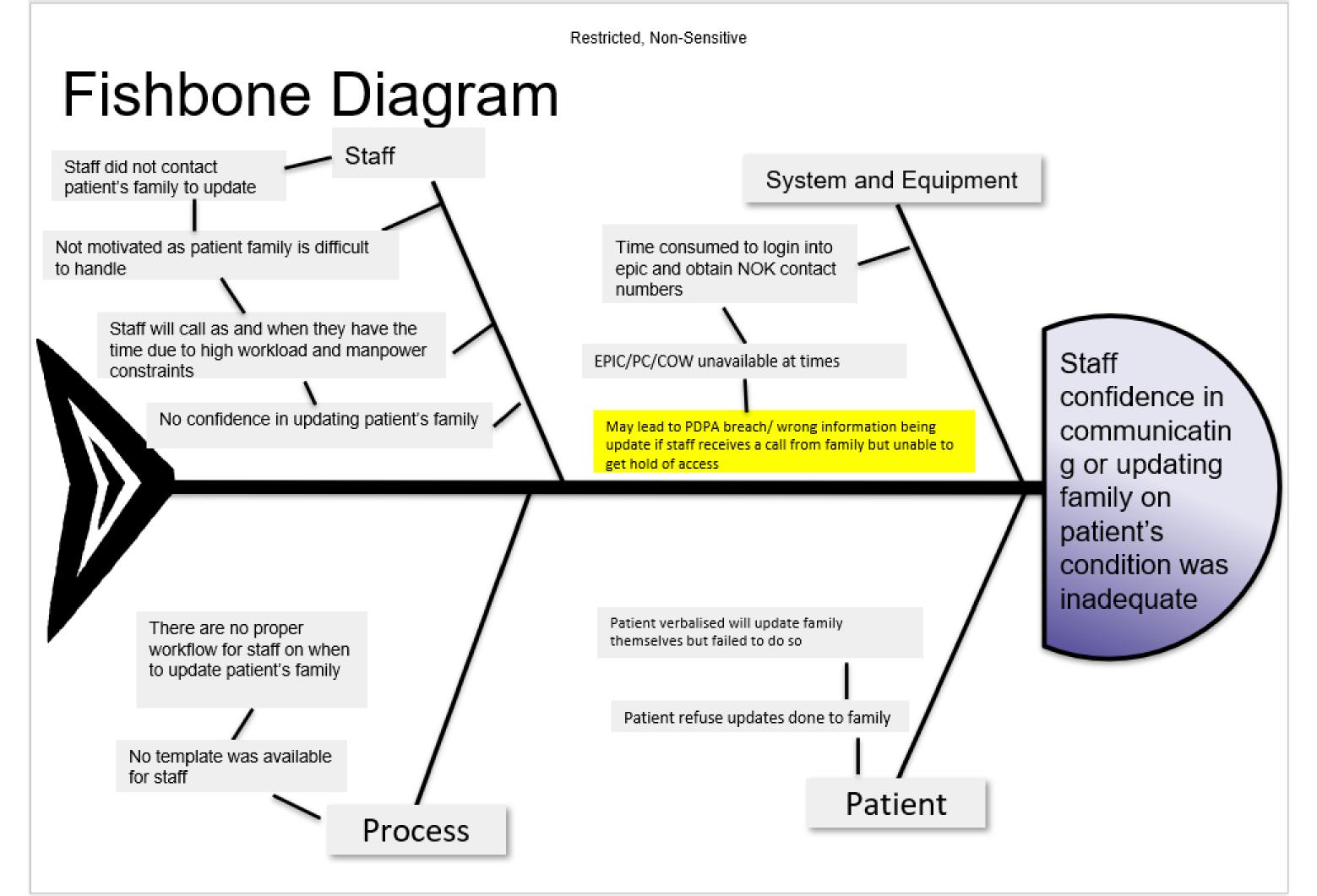
# **Balancing measure**

Staff nurse in charge to patient ratio did not change 1 RN: 7 patients

# **Analyse Problem**

# What is your process before interventions?

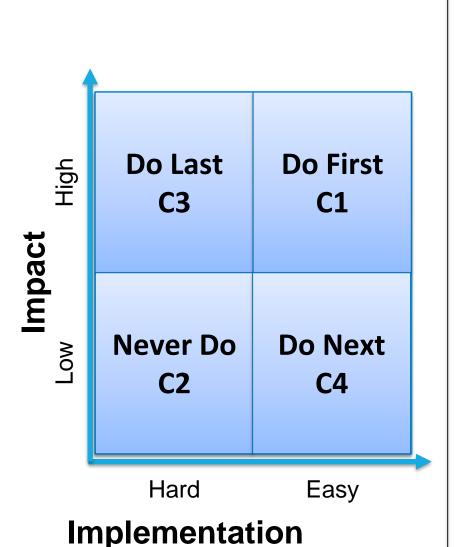
Draw the process steps in a flow chart



# Select Changes

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

Main cause	Possib	Possible Solutions		
Information	<b>C1</b>	Creating a common guided checklist on list of things to update family on		
	<b>C2</b>	Provide communication skills module to boost up staff confidence level		
	<b>C3</b>	Provide standard time frame to update family		
	<b>C4</b>	Daily check of patients notes to ensure family have been updated if not done so		



in for hyperglycaemia, to update on the BGM

# Test & Implement Changes

How do we pilot the changes? What are the initial results?						
CYCLE	PLAN	DO	STUDY	ACT		
	What is the aim of this cycle? What do you need to do before you execute the test change? (Who, What, Where, When)	Was the test change carried out as planned?  What are the feedback & observations from participants?	What are the results? Use run charts to illustrate.  What did you learn from this cycle?	What is the conclusion from "Study"?  What is your plan for the next cycle (adopt / adapt / abandon)?		
	On 3rd October 2021, the nursing team carried out changes C1 and C4 in Ward 9 Private.	Test change was carried out as planned.  Audits was carried out weekly by our team to check compliance rate.  Survey was also done to get feedback from our ward nurses.  Suggestion to include verification of 2 patient 's identifier and visitation policy into the checklist.  Positive feedback received regarding easy usage and standardized template for all nurses.	Over 90% of staff responded positively to the implementation and compliance to the use of the template to update family.  Providing RN an update using smart phrases; help nurses by reducing time spent to type out a long communication notes.  A standardized template makes the staff more confident to update family as they can easily refer to the points in the template to discuss with family.	Part of the ward nurse personal practices already included updating family but no standardized template available.		
2	On 10th October 2021, the nursing team carried out changes C3 in War 9 Private.	ed time frame to update	As standardized time frame was given to nurses to update family, The number of complaints from patient and family not getting timely update had reduced.	Introduced updated checklist to staff in roll call. And implement use of checklist in other wards    No.   Task   Completed   Remarks   Patient consented to contact children for update of location		

# Spread Changes, Learning Points

# What are/were the strategies to spread change after implementation?

Implementation of the template will be applicable to general wards. Management will be involved in disseminating information of the implementation to be adopted by other wards.

# What are the key learnings from this project?

In times of an ongoing pandemic where visitation policies are ever changing, regular updates from the ward nurse may be able to alleviate the anxiety felt by family.

A challenge faced is that the Nurse in charge will spend some time in ensuring the chart is updated timely and require some time to update patient's family.



