



In association with  
**AL TAREEQAH**  
Management Studies FZE

## **Project and Change Management**

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# “Minimizing the staff absenteeism and decreasing the floats”

## Executive summary

A number of factors are contributing to the shortage: an increase in the age of registered nurses, increased career opportunities for women, changes in the healthcare delivery system, and the public’s misunderstanding of what nurses do. So, healthcare organizations are trying new ways to attract and retain nurses, not only offering to pay their tuition, but also providing a good and healthy work environment. This staff turnover in the hospital I am working at, starts to increase. The costs have been increased associated with turnover. That was revealed in the exit interviews answer results that was done with nurses who were resigning or not willing to recontract with the hospital. An important approach was done by the nursing administration to treat the nurses’ absenteeism which was mainly caused by the nurses’ float among the unit. The main focus on discussing the implementation of the **“minimizing the absenteeism and decreasing the floats”**, its aims and nature, phases that were followed, people who were engaged and the closing results and implementation.

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## Introduction

Nurses' pull out within the hospital units is one of the most cited causes of nursing turnover. Improving the workplace environment positively affect staff satisfaction, burnout, and turnover. The "**Minimizing the staff absenteeism decreasing the floats**" is stopping of nurses' float throughout the hospital. The nurses were tired from the daily float to cover the other units, even by paying them extra money for overtime. All the nurses who were absent or on sick leave, were suffering from working extra shifts as overtime. The number of absenteeism and sick leaves have been increased and the obligatory overtime was difficult for being cancelled due to the ongoing shortage of nursing staff in each hospital units.

- Reduce the amount of absenteeism among the nurses: which was causing the shortage to get more worse, since the nurses were tired and frustrated.
- Reduce the number of the sick leaves and sick call: as a result of avoiding coming to work for the reason that they were tired and sick, or sometimes pretending sickness was preferred on coming to work and being floated.
- Eliminate the float of the staff: which was considered as the main nurses' problem that resulted in the turnover of big number of nurses.

## Nature of the case study project

A root cause analysis was done. Frequent meetings with the staff were done including: The Nursing Director and the Head Nurses. The first meeting included the introduction of the project through the Nursing Director. The meeting included a lot of resistance and arguments, since the change was set. As soon as the absenteeism issue was identified, plans were done to resolve the issue. Different ideas were discussed. The tasks performed were clearly described. The tasks were distributed accordingly as per each nursing position. The Nursing Director assigned the Head Nurses to properly audit the schedules. All newly recruited staff were assigned by the Nursing Director to the areas with shortage. The Head Nurses were assigned to cover their own units with their own staffing as per occupancy rate and their patients' acuities. Extra nurses were provided for each unit through reallocating the staff to their home units and new hires.

## Nature of projects, programs and portfolios and their management

When you divide the project into manageable stages, each with its own goals and deliverables, it's easier to control the project and the quality of the output.

- The **project initiation** phase: Is the first stage of turning an abstract idea into a meaningful goal. In this stage the need for the project is created. Once we had the project goals and project scope, we identified key project stakeholders—the people who are to be involved in the project and created a stakeholder register with the roles, designation and communication tools.
- The **project planning** phase: The primary tasks are identifying technical requirements, developing a schedule, creating a communication plan, and setting up goals. This was started and followed up by meeting with all the Head Nurses. It was important to explain for them clearly the staff complaints about floats and shortage and set the goals for solving this problem. After frequent meeting and discussions, the resistance to change was decreasing.
- The **project execution** phase: Another responsibility of the project manager during this phase was to consistently maintain effective collaboration between project stakeholders. This ensures that everyone stays on the same pathway and the project runs smoothly. There was a daily monitoring of the unit coverage with staff, number of sick leaves and absenteeism. The Nurses were feeling good at this phase since they were not floated out of their units which allow them to have more rest with less stress. **Less sick leaves and absent staff were observed.**
- The **project monitoring and controlling** phase: Ensuring that objectives and project deliverables are met. During the monitoring phase of project management, the project manager was also responsible for quantitatively tracking the effort and cost during the process. This tracking not only ensured that the project remained within the budget but also is important for future projects.
- The **project closure** stage: indicated the end of the project after the final delivery. Terminating the project and completing the necessary paperwork is also the responsibility of the project manager. The final task of this phase was to review the entire project complete a detailed report that covers every aspect.

## Governance

- Nursing Director responsibility is to delegate the tasks and monitor the work flow as planned to fulfill the goals and reach positive results. He also monitored the main factors the project was based on decreasing the sick leaves and absenteeism and providing extra staff to cover the unit and decrease shortage, decreasing by that the staff exhaustion and sick leaves
- Head Nurses: responsible for frequent changes in the staff schedule which is done to cover for daily basis to cover the shortage. If changes in the schedule were not possible, it is the responsibility of the Head Nurse to cover as a team leader and have the team leader handling patients to achieve full unit coverage.

## Engaging the stakeholders and teams

Engaging the stakeholders is an important step to do. Since the Head Nurses are the involved persons in covering the units' schedule upon any sick leave or absenteeism, their role is valuable in determining the cause and setting the solutions. A proper plan was discussed to decrease the nurses' float by providing additional staff to each unit to cover the shortage. Thus, each unit had no need for another staff from another unit to cover for shortage. Also, a plan was done recruit additional staff frequently specialized to cover the units in demand. The followings are important aspects that made the stakeholders involved and better understand the plan and its implementations:

- **Communications plan:** Communications breakdown was minimized by communicating through a variety of channels.
- **Stakeholders talking to one another:** Frequent meetings to resolve the conflicts and attract new ideas.
- **Listening to each other:** Part of understanding was making time to sit face-to-face, when possible, and truly listen. Ask probing questions. Managing expectations through each of the stakeholders who had different expectations.
- **Work as a team with your team and engage your stakeholders:** Furthermore, stakeholders more likely supported the plan that they helped creating it.

## Monitoring and closing

The following table shows the decrease in the number of sick leaves and the absenteeism after decreasing the staff float and managing the shortage, after a 4 months period.

<b>Time frame</b>	<b>Absenteeism</b>	<b>Sick Leaves</b>	<b>Staff floated</b>
<b>Jan-2022</b>	<b>35</b>	<b>40</b>	<b>27</b>
<b>Feb-2022</b>	<b>17</b>	<b>23</b>	<b>8</b>
<b>Mar-2022</b>	<b>2</b>	<b>5</b>	<b>0</b>

The Monitoring and closing plan, elements such as theory of change, and monitoring indicators may have already been developed with input from key stakeholders. It was important to develop an M&E plan before beginning any monitoring activities so that there was a clear plan for what questions about the program need to be answered. This will ensure there is a system in place to monitor the program and evaluate success. At the end of the project of 3 months. The plan and goals that were set earlier and clearly at the beginning of the project, were all achieved.

## Conclusion

PI projects are an important module that helps identifying the issues and work in a systematic way to overcome these issues and enhance the quality of practice and care at the workplace. It will always be important in some of the most fundamental applications of nursing development and improvement resulting into safe practice and positive outcomes. The well-developed health care institutions are always looking for the best quality of care and trying to identify their gaps in patients' care, and address those gaps as a serious alarm. Efforts are continuously being focused on the gaps in practice and trials and processes are followed to achieve perfect satisfaction.

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