

# National Quality Improvement Conference

## Reducing Nursing Non-clinical Documentation

Joyce Er, Pauline Chong, Adelyne Ang, Teh Chin Shim, Aishah Bte Ahmad, Jaslyn Li, Durga Devi, Derrick Yeo

er\_joycebt@nuhs.edu.sg



### Problem Statement

As at Jun 2022, Alexandra Hospital (AH) nurses have to fill a total of **110 non-clinical documents**. Some of these documentation are **non-essential, duplicating or overlapping with one another, and frequent or time consuming**. As a result, nurses tend to spend a lot of time in non-value adding documentation and even have to work overtime. This also sometimes affect nurses' morale and patients' satisfaction. Therefore there is a need to reduce the time spent on such documentation to allow nurses to **spend more time on more meaningful activities** such as direct patient care and patient and family education.

### Project Aim

To reduce (eliminate or streamline) 45 non-clinical documentation by nurses, from 110 to 65, by 31 Mar 2023.

### Lessons Learnt

Many nurses were initially apprehensive when told to stop or cut down on regular tasks they have been doing all the while, e.g. daily inventory checks, weekly equipment checks, monthly audits. With the help of the first few nurses who overcame that fear to challenge the status quo and bring about changes, more nurses who witnessed the changes which led to improvement were convinced that the changes were effective and necessary, and thereafter adopted the new improved practices.

#### Next Steps (FY23):

1. Continue to reduce more documents
2. Sustain the improvement for reduced documents
3. Spread the improvement to remaining departments

### Potential Solutions

A two-step approach was taken to reduce the number of documents:




#### Step 1. Eliminate documents which:

- Are of no/little value, e.g. "just in case" documents
- Can be merged with other documents

#### Guiding Questions:

- Who (stakeholder) is the information on the document meant for?
- Is the stakeholder using the information at all?
- Why does the stakeholder need this information?
- What is the consequence if this information is not available?
- How big is the consequence, if any?
- Is there another document that captures similar information?
- Is there another document that captures related (but different) information?

#### Step 2. Reduce one or more of these factors:

- No. of nurses involved for each documentation 
- Duration of each documentation 
- Frequency of documentation 

### Outcomes & Impacts

Result: 54 out of 110 documents reduced

No. Document Title	No. Document Title
1 CSSD Form (send to CSSD)	28 Daily Equipment checklist
2 CSSD Form (return by CSSD)	29 Automated Endoscopic Reprocessor log
3 Count Loose ENT Instruments and Sets Checklist	30 Consumables Expiry Check
4 Count Loose Eye Instruments and Sets Checklist	31 CSSD Instruments Inventory Checklist (Weekly)
5 Count Loose Orthopaedic Instruments and Sets Checklist	32 Chemical Waste Disposal Form
6 Count Loose GS, Urology, Vascular Instruments and Sets Checklist	33 Daily accessories checklist
7 Inventory of Equipment	34 Triage Inventory Daily checklist
8 Assignment Board	35 P3 consultation rooms inventory checklist
9 Medication Fridge Temperature Log	36 P1 Fridge medication checklist / Defrost
10 Claim time record form	37 Equipment Cleaning Audit Tool
11 Daily Safekeeping Logsheets	38 Weekly Eyewash station
12 Property Form	39 Airway bag checklist
13 Property Safekeeping Record	40 Inventory count in ICU2 form
14 Housekeeping checklist	41 Difficult intubation box checklist
15 HIV form	42 Check fridge items
16 IT equipment	43 Visitation memo (DIL patients)
17 Loaning Equipment form	44 Police Form
18 Equipment Form Fault Tag	45 Versaflo PAPR function check form
19 CleanSpace PAPR Battery Check	46 PAPR Function Test and Inventory Checklist - CleanSpace HALO
20 Microscope	47 PAPR Instruments Inventory Checklist
21 Stelaris Machine	48 AOR Form
22 Procedure trolley form	49 Checking of Oxygen flowmeter and suction machine
23 Infection Control Audit (Donning & doffing of PPE)	50 Injection trolley checklist
24 Control drugs and omnicell keys checklist (inventory check)	51 Chest Tube Box Checklist
25 Control drugs and omnicell keys checklist (discrepancy check)	52 E-trolley check (Sunday)
26 Weekly Check of Resuscitation Items & Emergency Trolley (Adult)	53 Environmental Cleaning Audit (iso room)
27 IV Trolley Daily checklist	54 Environmental Cleaning Audit (For cubicle beds & shared room) - trolleys in P1/P2/P3

