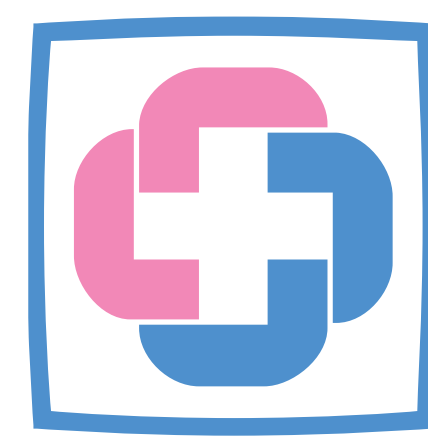




Singapore Healthcare
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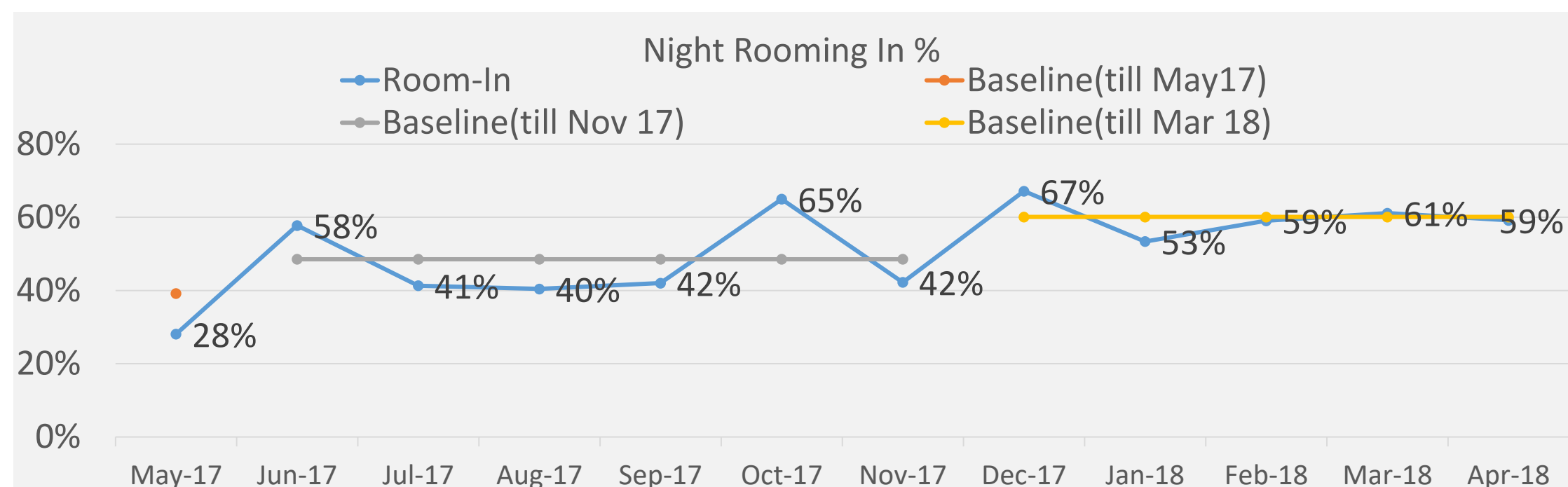
KK Women's and
Children's Hospital
SingHealth

Accentuating Patient Experience by Improving Night Rooming-In Rate

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BACKGROUND

KK Hospital was accredited the Baby Friendly Hospital Initiative (BFHI) since 2014 and re-accredited in 2017. In the BFHI's 10 steps to successful breastfeeding, Rooming in – allowing mothers and infants to remain together for 24 hours a day was Step 7. It is an evidence based post-partum practice whereby mothers and infants roomed-in together for easy initiation of breastfeeding.



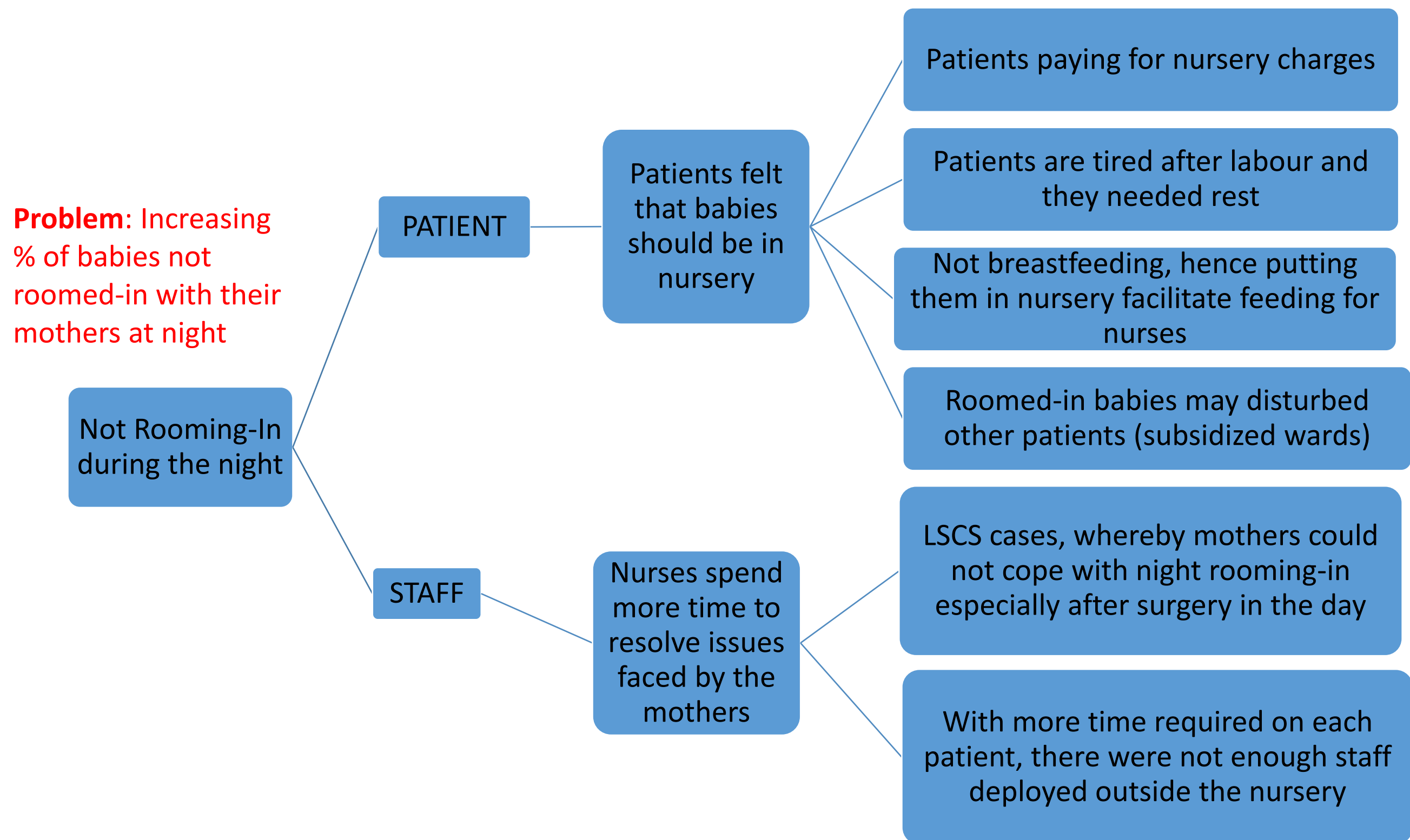
This practice is consistent in the day but inconsistent at night, whereby the night rooming-in rate went below the baselines, averaging at **51.4%** over the past 12 months (May-17 to Apr-18).

Description	No. of Babies	%
Babies not Room-in (Medically Indicated Reasons)	498	19.4%
Babies not Room-in (Non-Medically Indicated)	751	29.2%
Babies Roomed in (Night)	1323	51.4%
Total Number of Babies	2572	

29.2% of the babies not roomed-in were due to Non-Medically Indicated reasons – Mother request. This % is higher than babies not roomed-in due to Medically Indicated reasons, which makes up to **19.4%**.

AIM & METHODOLOGY

The team conducted focus groups for nurses to collect feedback and the following tree-diagram illustrated the root causes of babies not roomed-in (Non-Medically Indicated).



With the root causes identified, the objectives of this project was to improve night rooming-in rate and reduce babies not roomed-in due to non-medically indicated reasons. The team also highlighted the controllable issues and proposed the solutions tabled as below:

Controllable Issues Identified	Solutions
Three nurses were assigned to nursery and four nurses to care for mothers. With this ratio of nurses 3:4, nurses caring for mother tend to push babies to nursery for nursery staff to manage.	Nursing assignment was changed - From 3 nurses in nursery to 1 nurse; from 1 SN In-charge of 10 mothers to 1 SN in charge of 5 mothers and babies.
Nursery was visible as it had full glass panel to view babies in the nursery, giving parents/relatives the perception that their newborn can be placed in the nursery especially during the night.	Viewing panel was frosted and the nursery was called as observation area instead of nursery
Newborn procedures like injections, blood taking were carried out in the nursery.	All procedures are now carried out at the bedside including neonatal doctors' rounds.

INTERVENTION

1 Re-naming of the Nursery Service Code

Before

Service	Svce Short Txt	D Valid From	Valid To
NPTD	NURSERY CHARGE - BB1 (PTE) CLASS FOR DISC	20.05.2002	09.11.2018
NSUD	NURSERY CHARGE - BB2(SUB)FOR DISCHARGE	20.05.2002	09.11.2018

After

Service	Svce Short Txt
NE0A	NEONATAL BABY COT CHARGE - A CLASS
NE0B1	NEONATAL BABY COT CHARGE - B1 CLASS
NE0B2	NEONATAL BABY COT CHARGE - B2 CLASS
NE0B2P	NEONATAL BABY COT CHARGE - B2+ CLASS
NE0C	NEONATAL BABY COT CHARGE - C CLASS

2 Frosting of the Nursery Window Panel

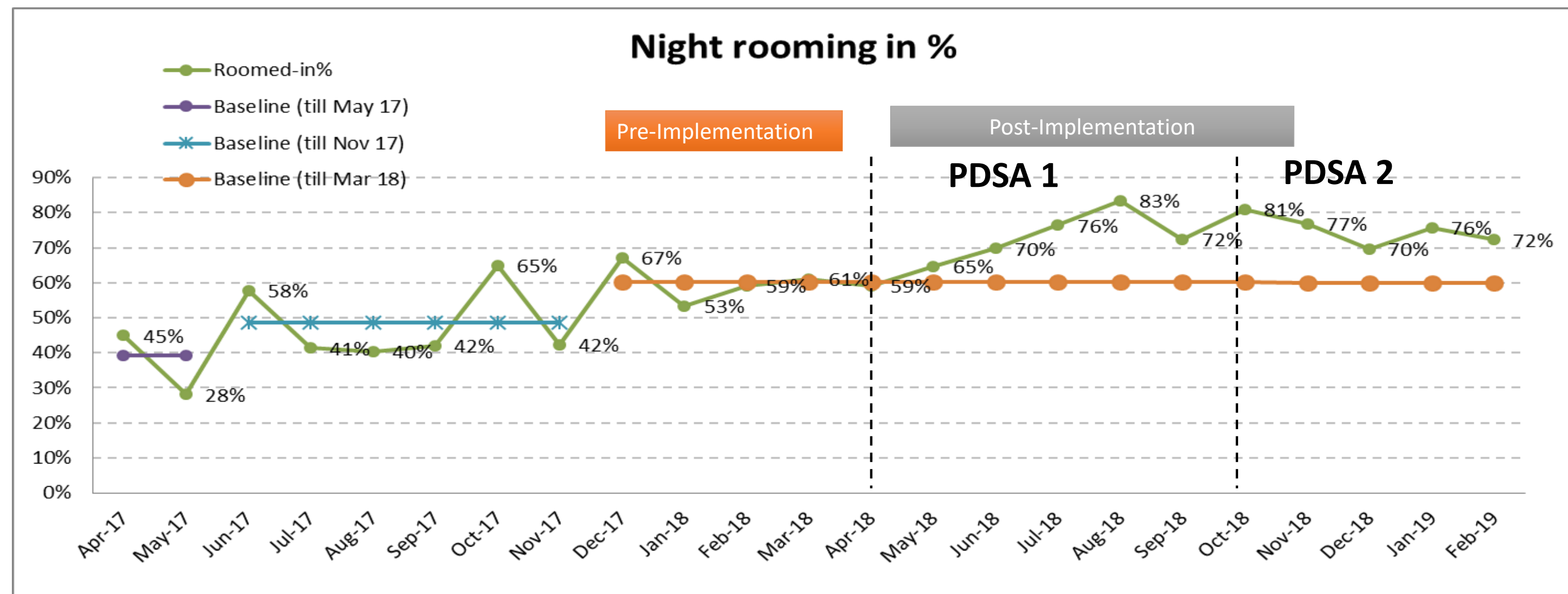


3 Changing Nursing Assignments

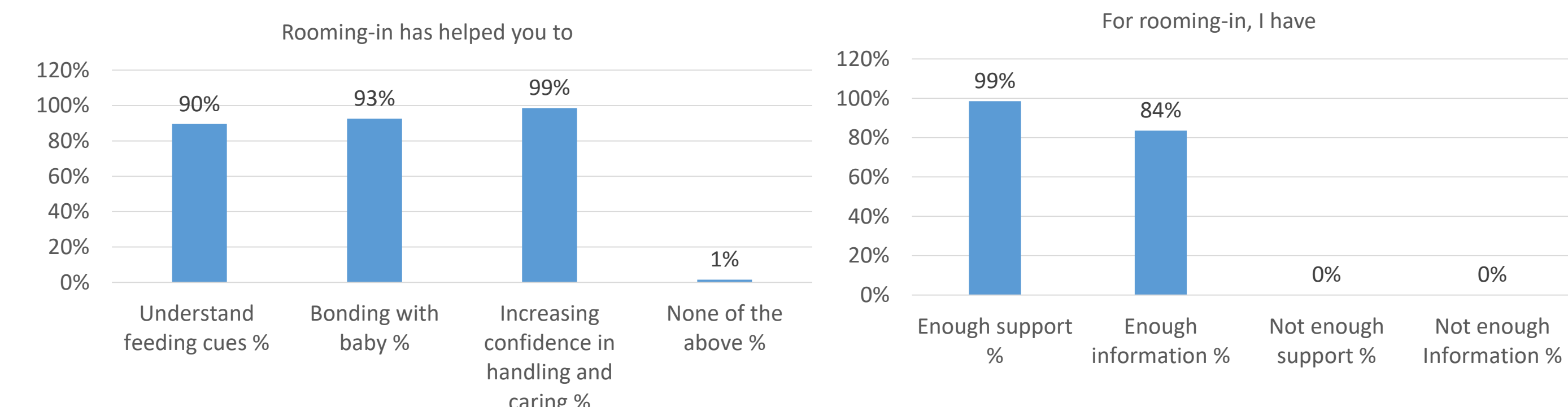
Nursery Assignment(Before change)	Nursery Assignment(After April change)
3 Nurses – 2 SNs & 1 EN	1 SN/MW – in-charge of lodger cases
Ward Assignment (Before change)	Ward assignment(after April)
1 SN In-charge – 10 patients 1 SN/EN in charge of 10 babies	1 SN in-charge of 5 patients and their babies

RESULTS

Since implementation in April 2019, the night rooming-in rate showed improvement of an average of **51.4%** to **73%**, which is above the baseline (60%). Babies not roomed-in due to non medically indicated reasons also saw a drastic dip from **29.2%** to **7%**



The team collected patients feedback (n=67) on their views on rooming-in. Over **90%** of the patients have benefitted from this initiative. This may be due to the support and information provided by our nurses because of the changed assignment.



CONCLUSION

The team was encouraged that they could journey together with postnatal patients in providing the best for their newborns through the little changes.

1. Nurse Manager (Ward 34), 2.Nurse Manager(ward 81),3. Snr. Staff Nurse (Ward 34), 4. Snr. Staff Nurse (Ward 81), 5. Snr. Staff Nurse(82), 6. Snr. Staff Nurse & 7. Nurse Clinician & Assistant Director Nursing (Lactation Services), 9. Deputy Director Nursing, 10. Assistant Director Nursing, 11. Snr. Executive (Div. of Nursing), 12. Asst. Manager & 13. Snr. Executive (QSRM), 14. Consultant & 15.Consultant(Neonatal)