TeamSTEPPS® 2.0

DEPARTMENTAL QUALITY IMPROVEMENT MEETING

I am...

August 22, 2017

Team Strategies & Tools to Enhance Performance & Patient Safety

PDSA: Hourly Rounding

Aim:

Beat our record of 50 days without a patient fall;

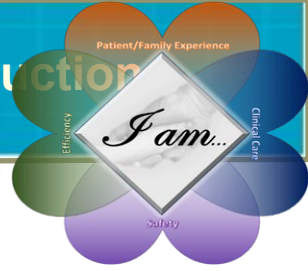Reduce call bell usage to *1/day/patient (?trying to determine the measurable data)*

Specific   **M**easurable   **A**chievable   **R**elevant/Results   **T**imely

Team Strategies & Tools to Enhance Performance & Patient Safety

PLAN

I plan to:

Round on patients every hour to address the "4Ps":

1. Potty
2. Position
3. Pain
4. Placement

I hope this produces:

- Less need for call bell usage, as needs are met proactively with patients
- Greater care of patients by supporting their non-clinical needs, reducing their anxiety
- Increased patient engagement
- Reducing patient falls w/harm

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PLAN (CONT.)
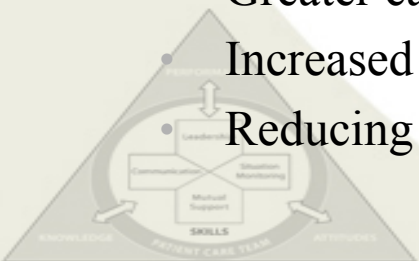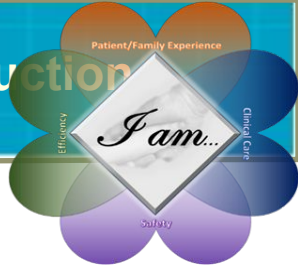
Steps to execute :

1. Create hourly rounding documentation tool in Meditech

2. Educate/train all staff on:

    a) Meditech tool

    b) Hourly rounding process for consistency

    c) Expectation of each hourly rounding

    d) Desired outcome of hourly rounding

3. Educate and communicate with patients about hourly rounding and follow through

4. Audit the process and provide feedback

5. Collect data and celebrate our successes

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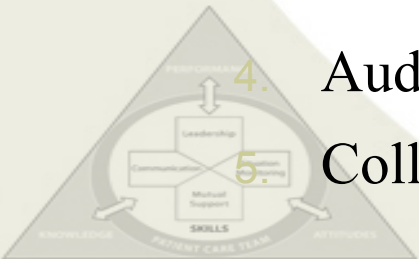
DO: WHAT DID YOU OBSERVE?

- 4P's need to be consistently addressed and adhered to by each caregiver (patients know what to expect)

- Need to review the documentation process in Meditech; process is cumbersome and redundant

- Add whiteboard review to rounding – make sure it is updated for important information that could help any staff responding to a call bell.

- Sunshine Committee auditing whiteboards for maintenance and sustainability of the safety-minded environment of care
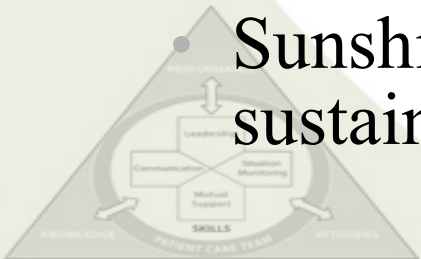
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STUDY:
WHAT DID YOU LEARN? DID YOU MEET YOUR MEASUREMENT GOAL?
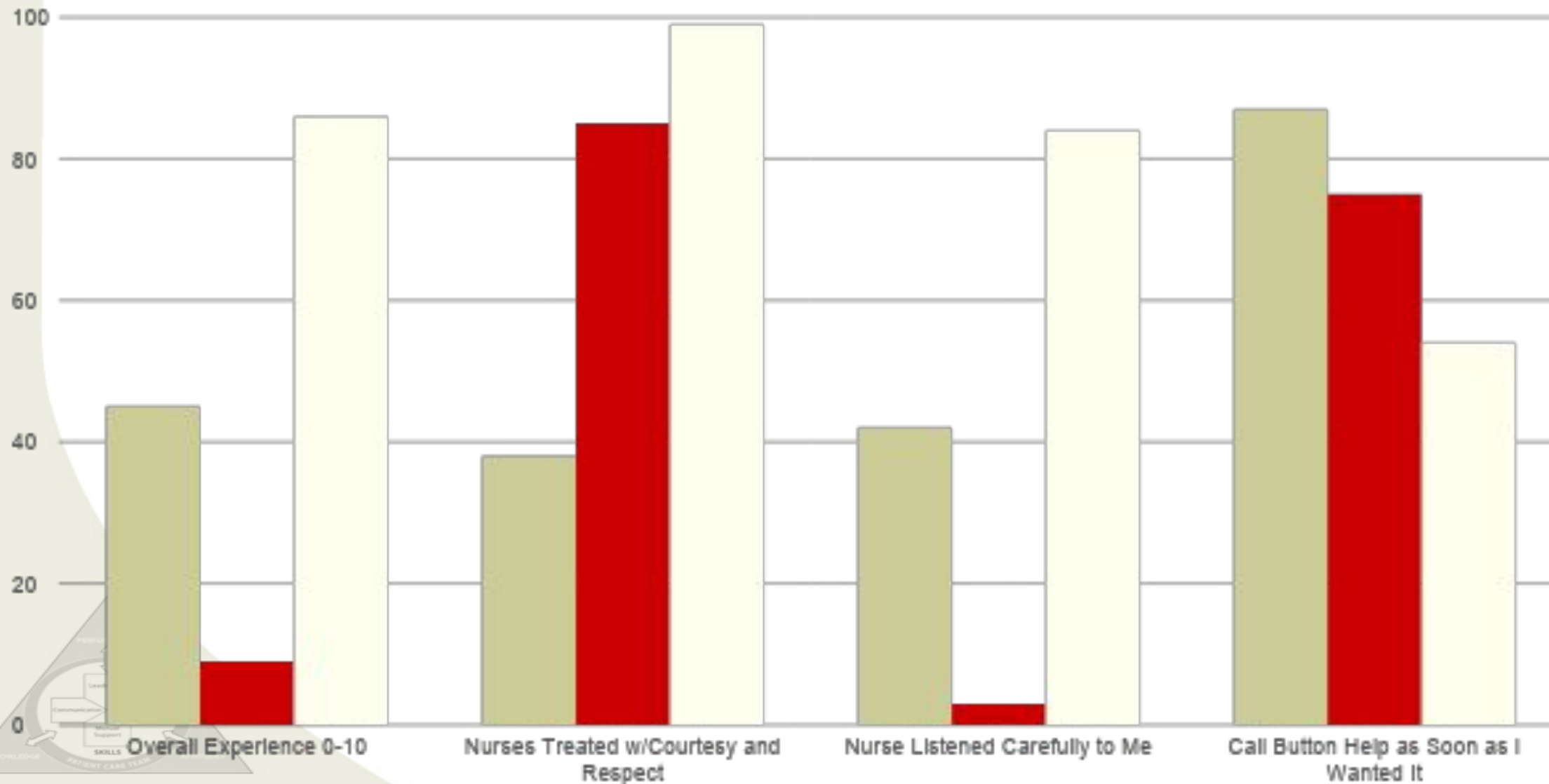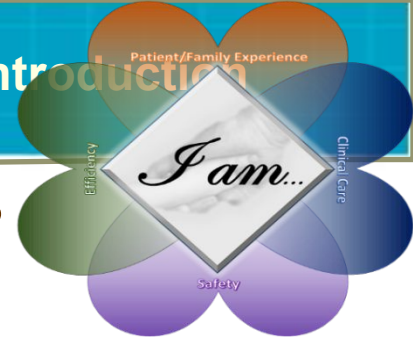
ACT:
WHAT DID YOU CONCLUDE FROM THIS CYCLE?

- Hourly rounding has improved our patient care and efficiency

- Hourly rounding has added value to the our patient rounds

- Patients have been more engaged; appreciated; and participatory in their care

- Call bells are not used as much (anecdotally); we need help to respond timely due to priorities when call bells are on

- Patient is more educated and asks more questions

TeamSTEPPS Concept: Team Structure, Situational Monitoring

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DEPARTMENT – ACUTE CARE

PDSA: Staff Resiliency

Aim:

Reduce turnover in acute care by 10% (Preventable turnover to 0).

Specific   **M**easurable   **A**chievable   **R**elavant/Results   **T**imely

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*TeamSTEPPS® 2.0*
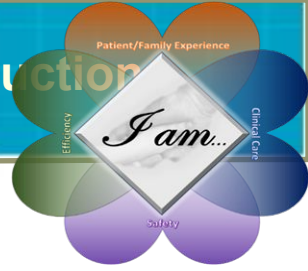
I plan to:

Use the Sunshine Committee to identify, create, support, and implement opportunities to support and engage staff to create an environment of care;
cultivate joy.

I hope this produces:

…an environment in which staff enjoy coming to work; a place that fosters, promotes, and strengthens a family atmosphere.

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PLAN (CONT.)
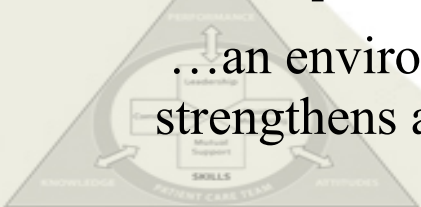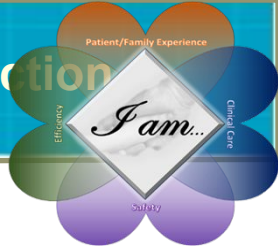
Steps to execute:

1. **Establish a committee of at least 3 employees**
2. **Develop/build a petty cash fund to sustain initiatives/projects**
   a) **$2/person**
   b) **Not mandatory to participate**
3. **Committee meets monthly (or more if needed for specific event/holiday)**
4. **Identify activities:**
   a) **Birthday cards**
   b) **Secret Pals**
   c) **Anniversary cards**
   d) **Holiday events**
   e) **Special gifts (Nursing Week)**
   f) **Baby "showers"**
5. **White board in break room used for positive, motivating, "happy" comments**
6. **Create a new employee "welcome" experience**

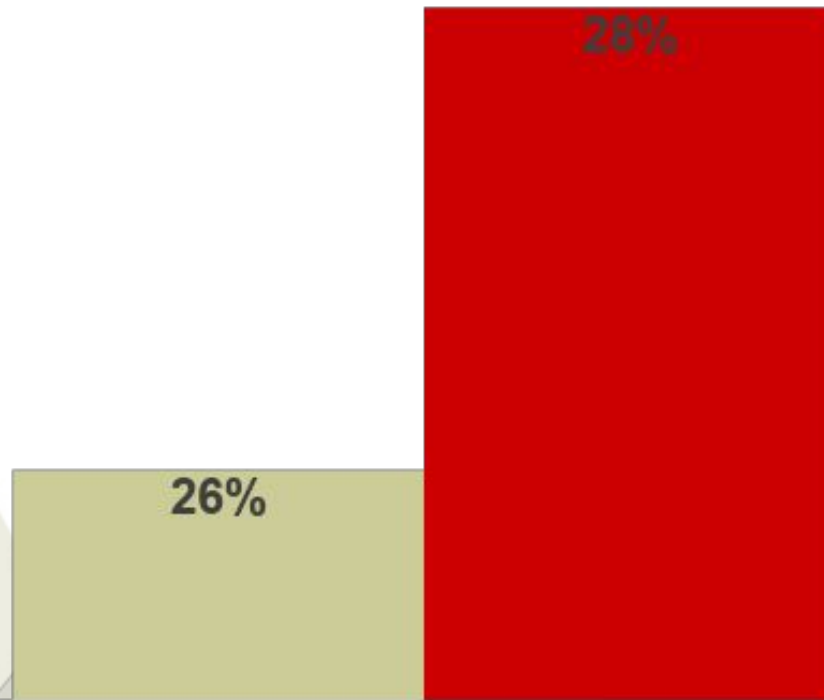*Team Strategies & Tools to Enhance Performance & Patient Safety*

Do: What did you observe?
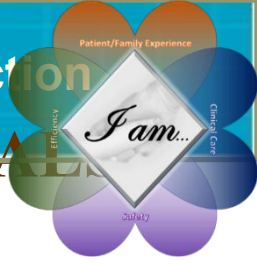
- Environment feels happier

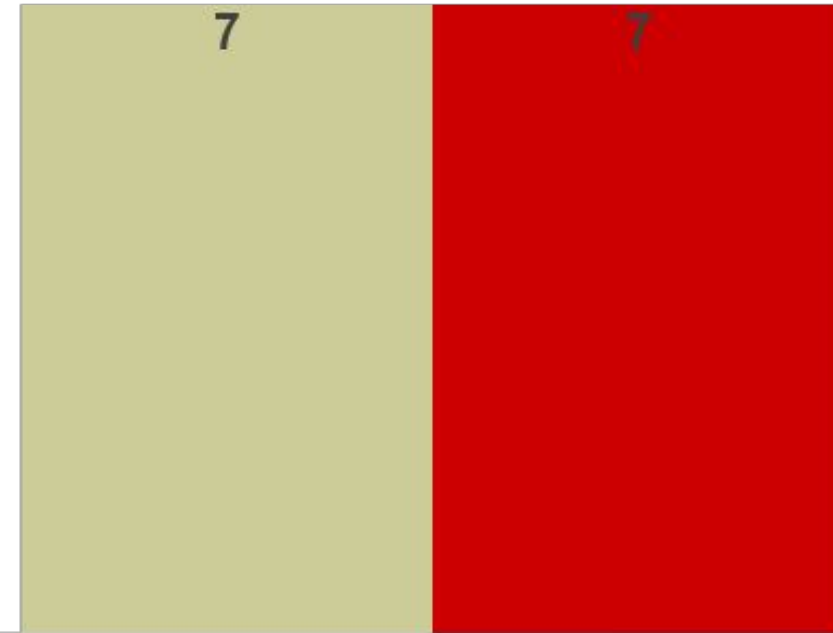- Acute care is a welcoming setting for internal/external staff

- More work to do

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Team Strategies & Tools to Enhance Performance & Patient Safety
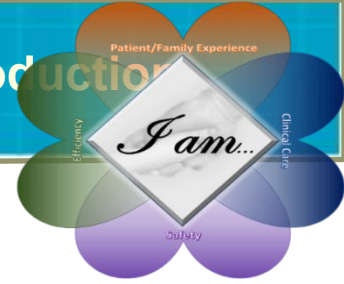
ACT:
WHAT DID YOU CONCLUDE FROM THIS CYCLE?

- It is an enjoyable experience for the committee and the staff.
- It feels good to do nice things for other people.
- It is important to keep moving and sustain the environment desired.

TeamSTEPPS Concept:

- **Task assistance is an active part of the work environment**
- **A culture where staff support and ask for assistance when needed has been created**

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DEPARTMENT – ACUTE CARE

PDSA: Wound Care

Aim:

Eliminate hospital acquired pressure injuries to zero; eliminate events of harm due to improper wound care.

Specific   **M**easurable   **A**chievable   **R**elavant/Results   **T**imely

Team Strategies & Tools to Enhance Performance & Patient Safety
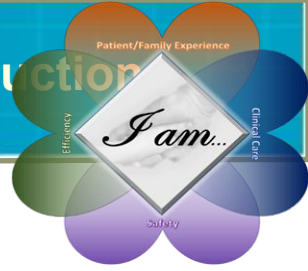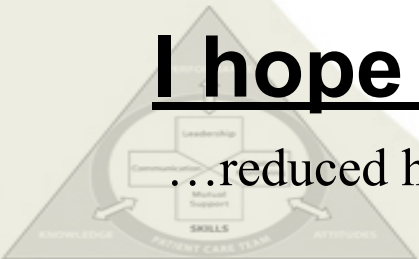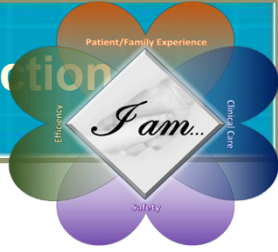
PLAN

I plan to:

Create a best-practice wound care process and protocol that is used consistently by all clinicians.

I hope this produces:

…reduced harm to patients and high quality of care.

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Steps to execute:

1. **Review the current process to identify gaps in care**

2. **Develop a best practice protocol to prevent pressure injury**

   a) **Turn and reposition every 2 hours**

   b) **Daily head-to-toe assessments**

   c) **Skin assessment upon admission (goal for 2 nurses present)**

   d) **Look at alternative methods for skin care when equipment is used (barrier creams)**

3. **Develop procedures for treatment of pressure injuries**

   a) **Consultation with Wound Clinic**

   b) **Create special plan of care**

4. **Document Consistently**

5. **Discuss details at bedside shift report; education to patient**

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Do: What did you observe?

- Each nurse has a unique/different perspective of skin care; consistent training and revisiting is important

- There was not a full comprehensive understanding of the importance of skin care/assessments by all nurses

- Training will be beneficial to extend to the ED and LTC

- CONSISTENCY

- Wound Clinic allowing nurses to complete the dressing changes while monitoring and recommending has been beneficial.
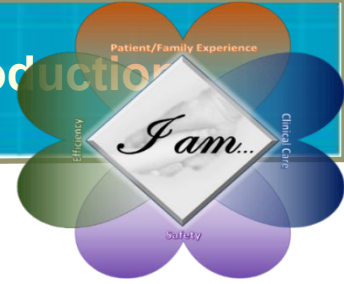
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Study:

What did you learn? Did you meet your measurement goals?

■ In process of collecting and interpreting the data…. STAY TUNED IN

ACT:
WHAT DID YOU CONCLUDE FROM THIS CYCLE?

- In process….

TeamSTEPPS Concept:

- **Task assistance and mutual support is an active part of the work environment (involving each other and Wound Clinic)**

- **Shared governance where staff hold each other accountable and have a voice in the creation of the process**

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PDSA REPORT

Rehab Services

WHAT IS THE TEACH BACK METHOD

After you leave this visit, I know your wife's going to ask you what happened today.

PDSA – EFFECTIVE COMMUNICATION

- **Step:** Provide mandatory rehab staff training on the teach back method.

    Gather baseline data.

    We hope this produces:

    Improve communication with patients resulting in improve value of rehab services. Measureable results will include:

    Improve rehab outcomes (improved patient perception)

    Decrease now show and cancellations

     Steps to execute:

    1. Provide staffing education regarding teach back and medical literacy.

    2. Set up tracking mechanisms in daily documentation to gather patient's perception of function.

    3. Begin entering patient perception at each eval and discharge to determine their perception of function.

    4. Run report with no show/cancellation numbers.

- **Do: What did you observe?**

     -Average increase in patient perception of progress for Q2 of 2017 was **1.25 (18% of patients reported)**

     -Average no show rate for Q2 of 2017 was 3.3%

    -Average cancellation rate for Q2 of 2017 was 18%

- **Study: What did you learn?**

    Therapists aren't consistently reporting patient perception of function.

    Staff feel that the 3% NO SHOW rate is lower than octual.

- **Act: What did you conclude from this cycle?**

    We need to reemphasize the need to track patient perception and get staff more actively involved in data collection process.

PDSA – EFFECTIVE COMMUNICATION

- ***Step:*** Continue with staff education ad emphasize data collection
- ***Plan:***

  We plan to:

  Continue to educate staff to benefit of effective communication.

  Create mechanism to determine effectiveness of communication

  Improve data reporting and collection processes

  We hope this produces:

  Improve communication with patients

  > Improve rehab outcomes (improved patient perception)

  > Decrease now show and cancellations

  Improve documentation of reportable data

  Improve tracking of no show appointments.

  Steps to execute:

  1. Continue with staff education
     a. Teach back
     b. Professional and engaging conversations.
  2. Monitor effectiveness of communication
     a. teach back audits
     b. continue to track patient perception
  3. Improve staff involvement
     a. Involve staff in data collection process

PDSA – EFFECTIVE COMMUNICATION

Do: What did you observe?

-In progress

Study: What did you learn?

-In progress

• *Act: What did you conclude from this cycle?*

-In progress

Teach Back Audits

Patient name	Date	IP/OP	Answer Score
Have you been working with PT, OT or ST?			
Which therapists have you worked with?			
Did your therapist give you exercises/strategies to complete at home/room? Can you tell/show me what they want you to do?			
Are you doing these exercises? (Yes 5 No 1)			
Do you find it hard to understand what the therapists are saying because they use technical terms? (Yes 1 No 5)			
		Total Score	

To maximize validity of this tool, audits will be conducted with patients who do not have identified cognitive deficits

5 Easy and accurate response
4 Responds correctly but not in full detail or after some thought
3 Gives a partial correct answer
2 Answer is mostly incorrect but has parts of accuracy
1 Does not answer question or answers incorrectly

Please Use CUS Words
but *only* when appropriate!

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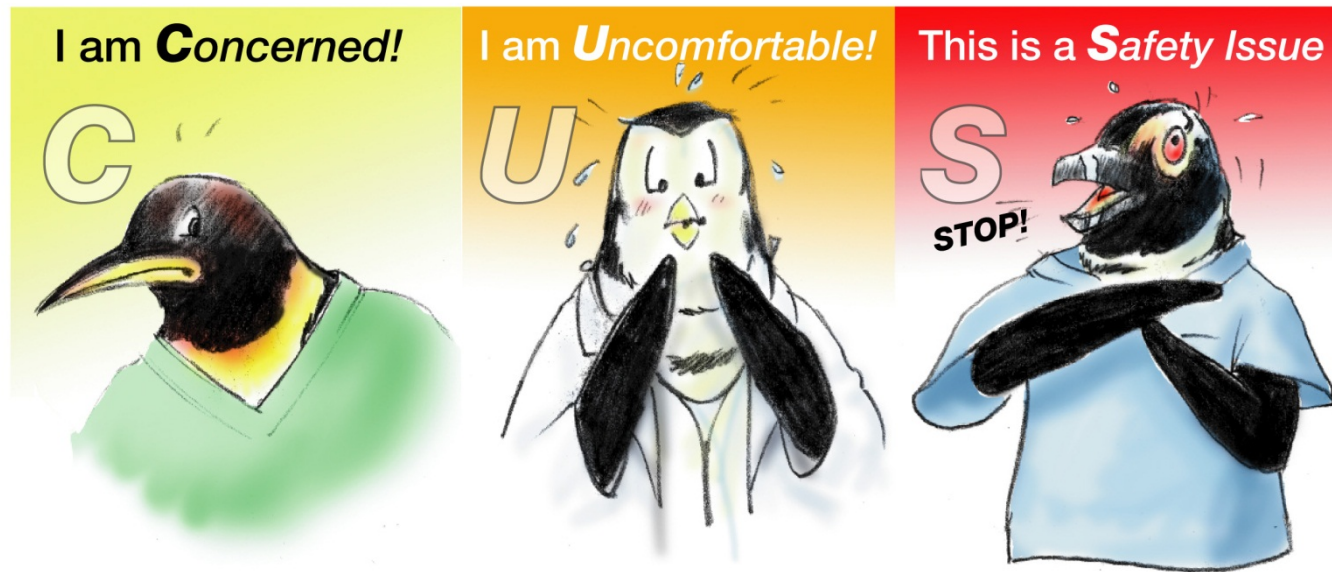
Team Events

Sharing the Plan

- **Brief** - Short session prior to start to share the plan, discuss team formation, assign roles and responsibilities, establish expectations and climate, anticipate outcomes and likely contingencies

Monitoring and Modifying the Plan

- **Huddle** - Ad hoc meeting to re-establish situational awareness, reinforce plans already in place, and assess the need to adjust the plan

Reviewing the Team's Performance

- **Debrief** - Informal information exchange session designed to improve team performance and effectiveness through lessons learned and reinforcement of positive behaviors
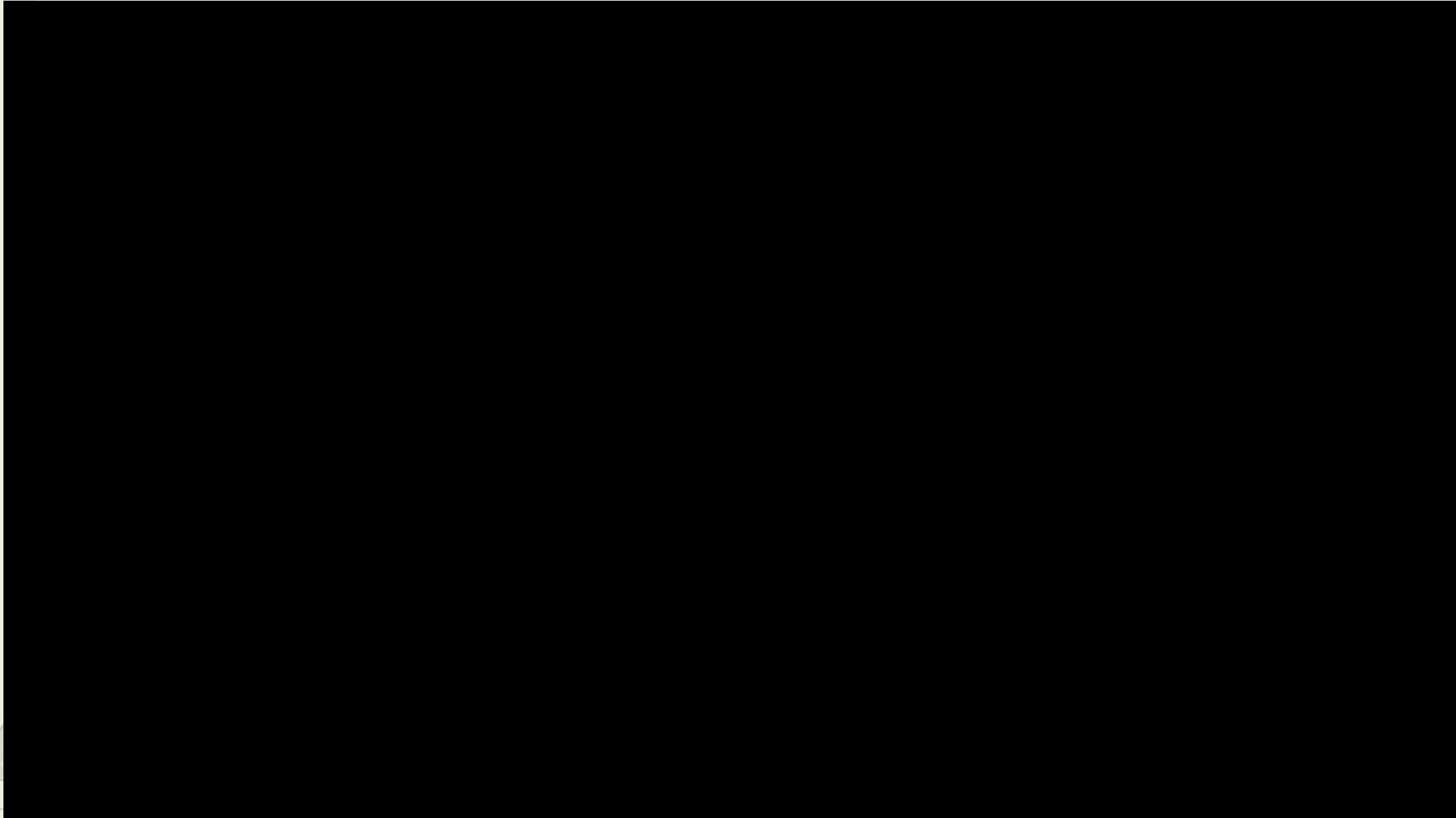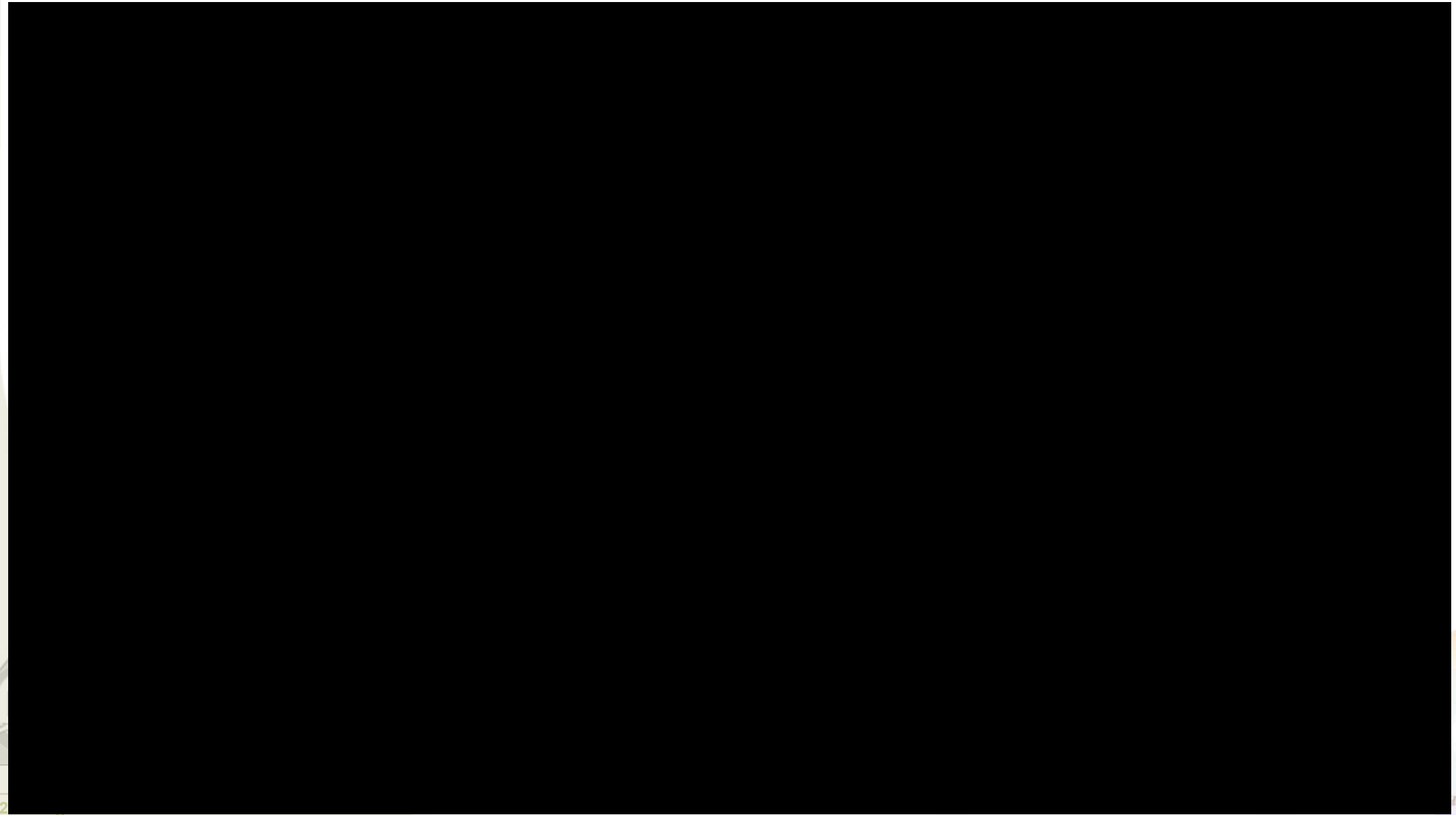
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CUS...

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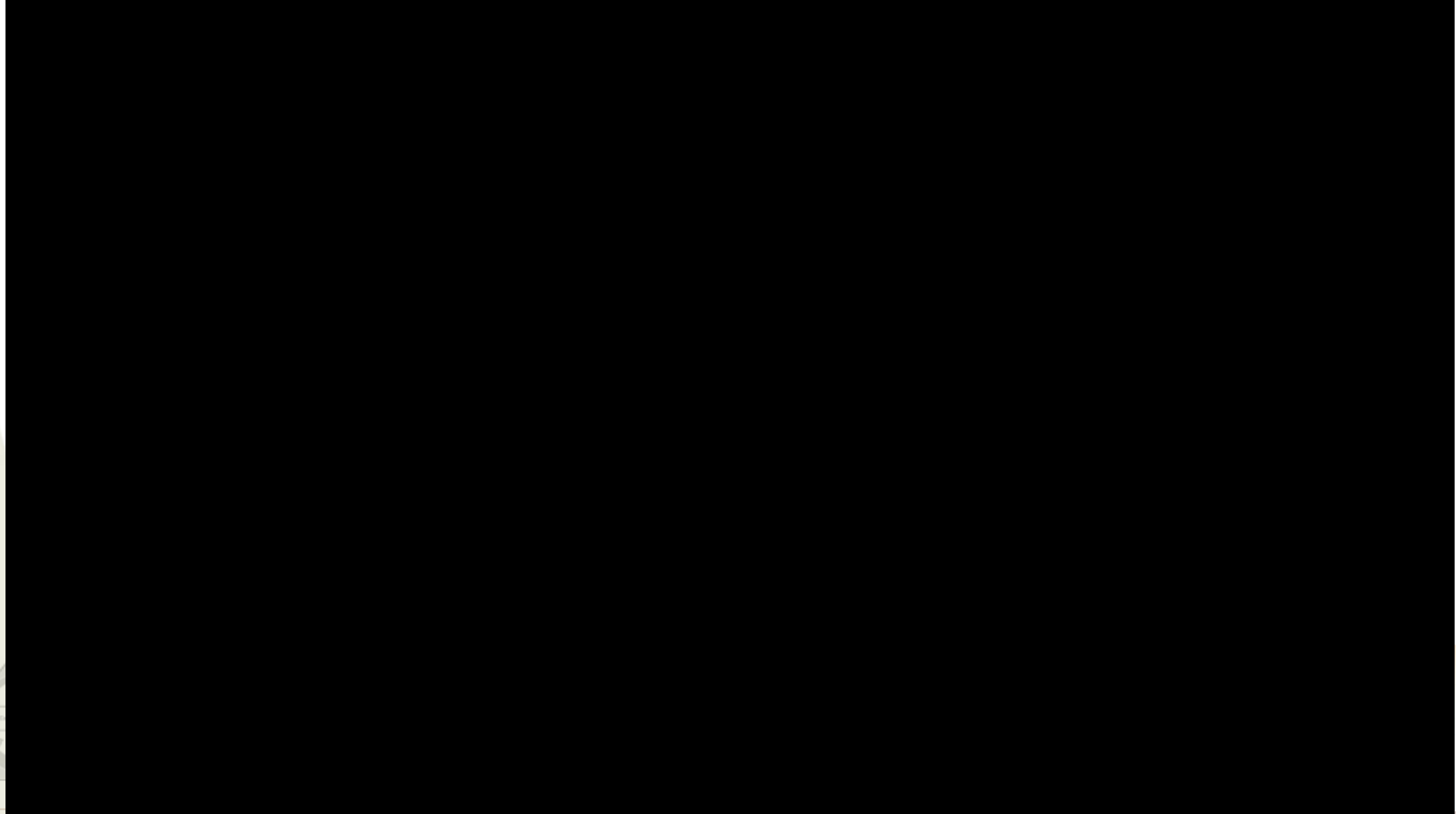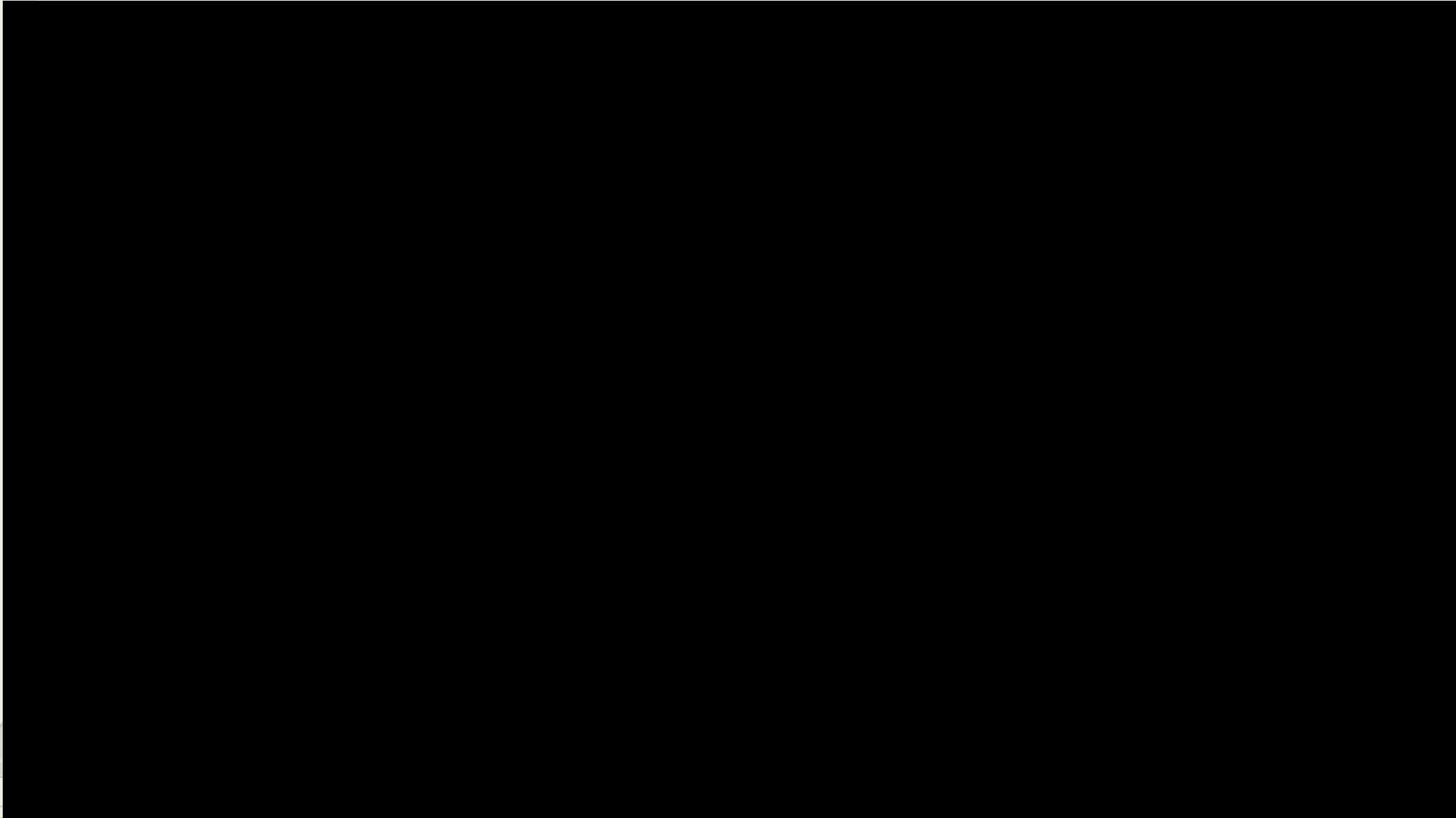
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Brief…

TeamSTEPPS® 2.0

Huddle…

Debrief…

NEXT DEPARTMENTAL QUALITY IMPROVEMENT MEETING

September 26, 2017

Reporting Department

CardioPulmonary Laboratory

Team Strategies & Tools to Enhance Performance & Patient Safety