

Patient Centered Care: Patients Speak, Nurses Listen - Empowering Nurses to Innovate Change Within Their Own Unit

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ABSTRACT

The strength of our nurses is that change doesn't scare them away. It unites, inspires, and empowers in such a way that the synergistic outcome impacts not only the individual nurse but also the facility. The Nurses on Hamon 4 North, the neurosurgical department, commonly review their HCAHPS scores to identify areas of weakness so that they are consistently fine tuning their processes to meet patient expectations. After their assessment, it was determined that there were 6 distinct areas of weakness that needed attention. These areas included Communication, Loss Prevention, Pain Management, Bedside Reporting, Post-Op Ambulation, and the Volume of the Environment

PURPOSE

- To improve areas of weakness in Patient Satisfaction Scores
- To promote teamwork and engagement amongst the Hamon 4 North Team
- To encourage effective communication
- To inspire Leadership by allowing self identified team leads direct Task Force Teams
- To innovate and implement new processes in delivering high quality patient centered care

Task Force Teams

- Nursing Communication
- Pain Management
- Bedside Reporting
- Quiet Environment
- Loss Prevention
- Post-Op Ambulation

Task Force Team Interventions

Nursing Communication

- Daily audits of completion of patient CareBoards
- "No Pass Zone" Any team member that's within 5 feet of call light is responsible for answering
- Increase assignment and utilization of MyCare and EMMI

Pain Management

- Identify factors resulting in low patient satisfaction scores by evaluating patient survey responses
- Implement specific action items related to each identified factor
- Track patient satisfaction scores and survey responses

Bedside Reporting

- Daily audits by unit leadership to track nursing practice
- Question patients during Leadership Rounds on their involvement in bedside reporting
- Standardize reporting techniques to reduce variation in shift to shift report

Quiet Environment

- Implement quiet time from 1pm-3pm daily
- Dim lights and close low-risk patient doors
- Provide ear-plugs to patients on admission

Loss Prevention

- Develop and enforce patient belongings release form (requiring signature)
- Report on all high value belongings that remain at bedside (examples – dentures, hearing aids)
- · Label and lock all patient belongings in bedside lockbox

Post-Op Ambulation

- · Ambulate patients 3 times, every day
- Initiate initial patient ambulation on day of surgery (unless contraindicated)
- Encourage patient involvement and monitor progress by using the patient Care Board to track each round of ambulation

