BACKGROUND
Tower 1 is a 48 bed acute care renal medical-surgical unit. One year ago the unit experienced a change in the leadership team who was presented with a number of challenges including five CLABSIs (Central Line Associated Blood Stream Infections) in one month, highest fall rate, highest c-difficile rate in the organization, two failure to rescues, communication concerns, infrequent reporting of safety events, low staff engagement, punitive environment and low staff morale.

METHODS
Engage & motivate the TEAM
- Show appreciation
- Engage TOP Performers
- Provide Opportunities
  - Professional development
  - Certification
  - Clinical Ladder
  - Personal mentoring and coaching
- Let your top performers help to recruit your middle performers
- Create Transformational Leaders at the bedside

Hear their voice
- Open forum time at staff meetings
  - “Your voice is heard” bulletin board
- Open door policy
- Being accessible and approachable
- Giving the team an opportunity to have their opinions heard when changes are made in the unit through voting and survey monkeys
- Shared Governance unit based councils

Manage out poor performers
- Who is unsafe?
  - Creating a positive culture will make them feel uncomfortable
- Spend a majority of your time on your top/middle performers
  - Actively manage poor performers UP or OUT

Recognition
- Bulletin board with Daisy nominees and Great Safety Catches
- Kudos Board in Lounge
- How & Wow Cards are a way that patients can recognize staff and provide suggestions for improvement
- Letters to Staff from unit leadership

Change the culture
- Eliminate a culture of blame & shame
- Create a culture of HIGH Reliability (HiRO)
- Make mistakes a learning experience and see failure as an opportunity to improve
- Daily and as needed (PRN) safety and informational huddles
- Encourage patient safety event reporting & reporting of near misses
- Geographic Hospitalists and daily multi-disciplinary Rounding
- Newsletter to streamline communications and reduce emails
  - It’s all about the PEOPLE! Creating a culture of friends at work and after work
  - Make a culture that would make YOU want to come to work everyday
    - What are they PROUD OF?
    - What is a small way YOU can show appreciation
    - Take a personal interest in making each and every person a success
    - Give the TEAM the credit for their successes
    - Be Transparent
    - Be Honest
    - Be FAIR
  - Be transparent, help the TEAM to articulate data and their strengths, weaknesses, and what you are doing to improve
  - Establishment of a highly visible unit based leadership team (NM, ANM, Educators)

SWOT—STRENGTHS • WEAKNESS • OPPORTUNITIES • THREATS

Strengths
- Great People
  - The team had the desire to be a success
Weaknesses
- Novice Staff
- Novice Manager

Opportunities
- Improvement in quality metrics
- Staff Morale
- Staff engagement

Threats
- Judgment & Pre-conceptions
  - Nothing will change
- Perception of Unstability
  - New NM & ANM
  - Multiple resignations

RESULTS
If you can dream it, you can do it! Creating a positive culture and engagement
- Improved Staff Morale
- Improved Staff Engagement
- Mock Code Program
- NICHE Unit Designation
- Zero CAUTI since Jan 2013
- No Failure to Rescue cases in 17 months
- 10 Nurse of the Year
- 11 Tech/PsA of the year nominations
- 3 Innovation Award
- 2 Nominated to Baltimore Magazine – 1 winner - Ashley Wells, RN
- 2 Nominations to Nurse.com Gem Awards

Tower 1 Central Line Associated Blood Stream Infections (CLABSI)

Barriers
- Communication
- Morale
- Lack of resources

Facilitators
- Staff welcomed change as a low performing unit

Conclusions
- Establishment of a highly visible leadership team provides clear direction to staff
- Changing a unit culture is achievable resulting in improved safety outcomes

References

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