



Bridging the Practice/Research Chasm

Carol Boswell, Ed.D., RN, CNE, ANEF, FAAN

Texas Tech University Health Sciences Center SON

Rebekah Powers, DNP, RN-BC, CMSRN, CSPHA

Midland Memorial Hospital

Ausrice Buzick, RN

Estella Contreras, LVN

Stephanie Llanes, RN

Susan Dominguez, BSN, RN

Arculana Robles, BSN, RN

Andreanna Sookhi, RN

Deborah D'Agostino, BSN, RN

Sharon McGowen, BSN, RN, CMSRN

Midland Memorial Hospital



43rd Biennial Convention

November 7-11, 2015

Las Vegas, Nevada

Aria Resort and Casino

The learner will be able to:

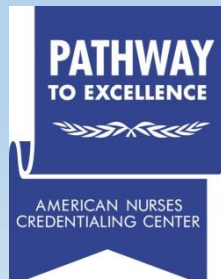
- Discuss the CIT process and engagement of frontline nurses.
- Identify strategies for incorporating changes into a workplace.
- Identify steps to use when working within a team to advance patient safety.
- Discuss methods for improving communication on a busy health care unit.
- Identify potential interruptions to nursing work flow.
- Discuss the steps to be taken when making a change within nursing units based on successful decision making processes.
- Identify a process for clarifying potential challenges and solutions to be used to improve patient care.
- Discuss a problem solving process when patient issues are identified.

EFFECTIVE COMMUNICATION USING HUDDLES

Deborah D'Agostino BSN, RN

Andreanna Sookhi RN

Sharon McGowen BSN, RN



Background:

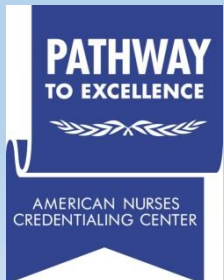


- Information not being shared throughout team
- Knowing how the unit is doing as a whole or expected trends

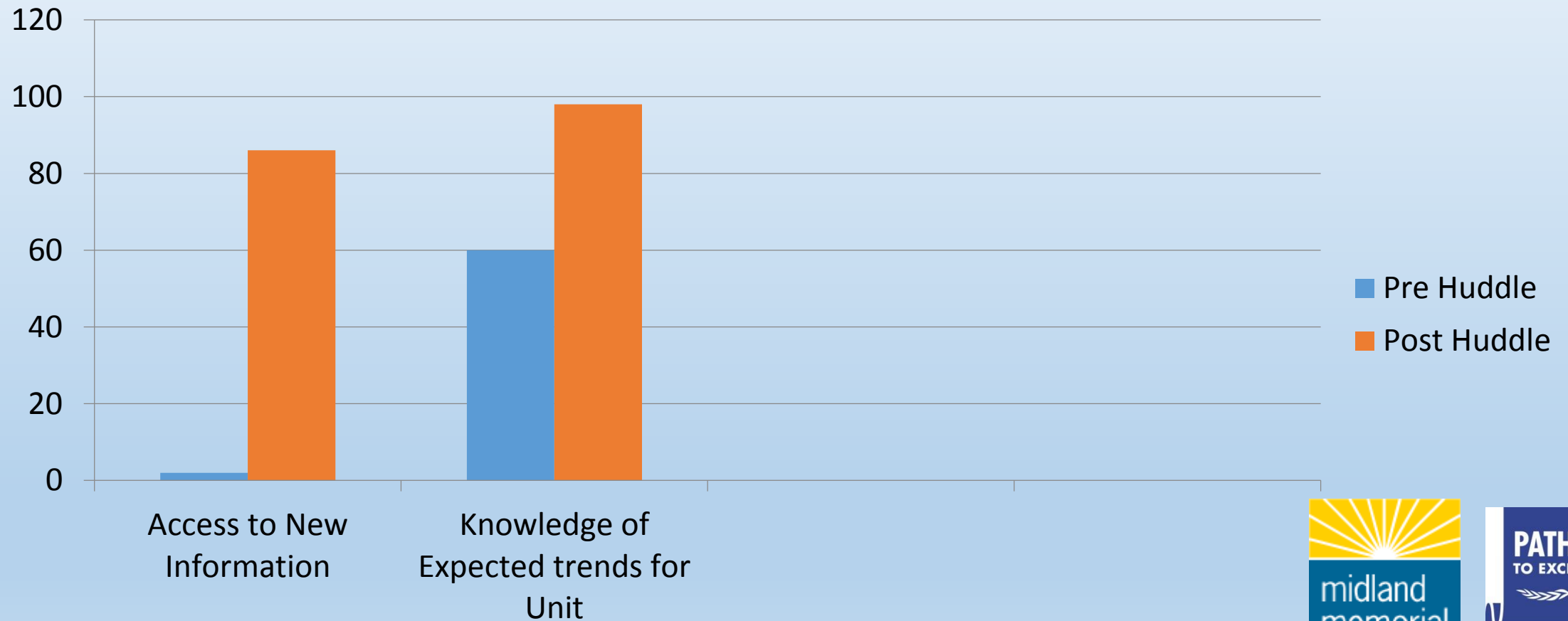


AIM:

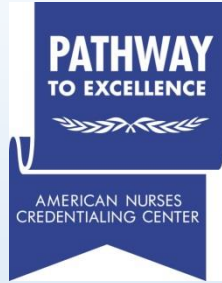
- Disseminate unit information
- Effective method of communication
- Best time of day
- Minimize interruption of workflow



Data & Results:



Conclusion:



- Huddles at 1030 and 2230
- Huddle information is best repeated for different shifts over several days
- Staff receive text messages on their Cisco phones when a huddle is scheduled
- Huddles are no longer than 5-10 minutes.

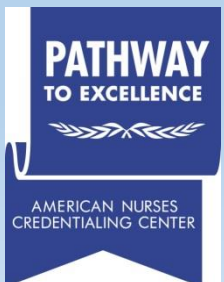
References

ACKNOWLEDGEMENTS:

Rebekah Powers, DNP, RN-BC, CMSRN, CSP^{HA}

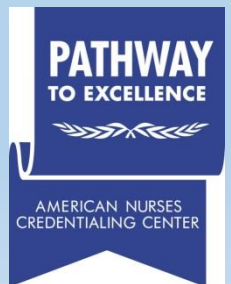
REFERENCES:

<http://www..merriam-webster.com/dictionary/huddle>



Lack of Physician Orders for Pre Operative Appointment and Day of Surgery

Ellie Dominguez BSN RN & Arculana Robles BSN RN



PROBLEM

No physician pre-operative orders and day of surgery orders



AIM

For all patients to have pre operative and day of surgery orders at time of their pre-operative visit.

METHOD

Data was collected to determine how many patients from doctor office presented to pre-operative center without orders and still went to surgery. Collaborated with Same Day Surgery department and doctor to find a solution.



DATA RESULTS



	# OF PATIENTS SEEN	# OF PATIENTS WITH NO ORDERS	PERCENTAGE
1 ST AUDIT	247	60	24%
2 ND AUDIT	198	24	12%

CONCLUSION/RECOMMENDATIONS

Since collaborating with the physician, the intervention has proven effective and a decrease in patients arriving with no orders has been noticed.



**“It’s a bird...it’s a
plane...no IT’S A SLING!”**

MEDICAL UNIT C.I.T.

By:

Ausrine Buzick, RN

Stephanie Llanes, RN &

Estela Contreras, LVN



INTRODUCTION

- Problems:
 - Patient safety via transfers and/or repositioning
 - Equipment location and access
 - Time management



DID YOU KNOW?

- Rana et al. (2012), found evidence to support:
 - On average, an RN gets interrupted 8 times per hour
 - 13 location changes per hour



HOW MUCH DOES THIS COST US?



\$13.20 per hour wasted
per employee



EVIDENCE-BASED PRACTICE (cont.)

- 2008 study found three most important areas for organizational improvement:
 1. Administration of medication
 2. Documentation and care coordination
 3. Location of supplies, equipment and medications close to patient rooms



LET'S RE-FOCUS

- 3rd area for organizational improvement:
 - **Location of supplies, equipment and medications** close to patient rooms



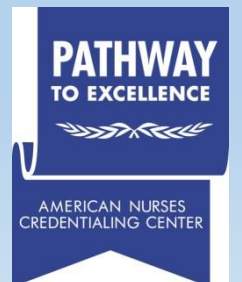
METHODS

- Criteria to determine “fall risk” patients:
 - Mobility test ≥ 4 and/or Hendrich II scale of ≥ 5
 - Neurovascular/musculoskeletal status
 - Bariatric patients
 - Total care patients

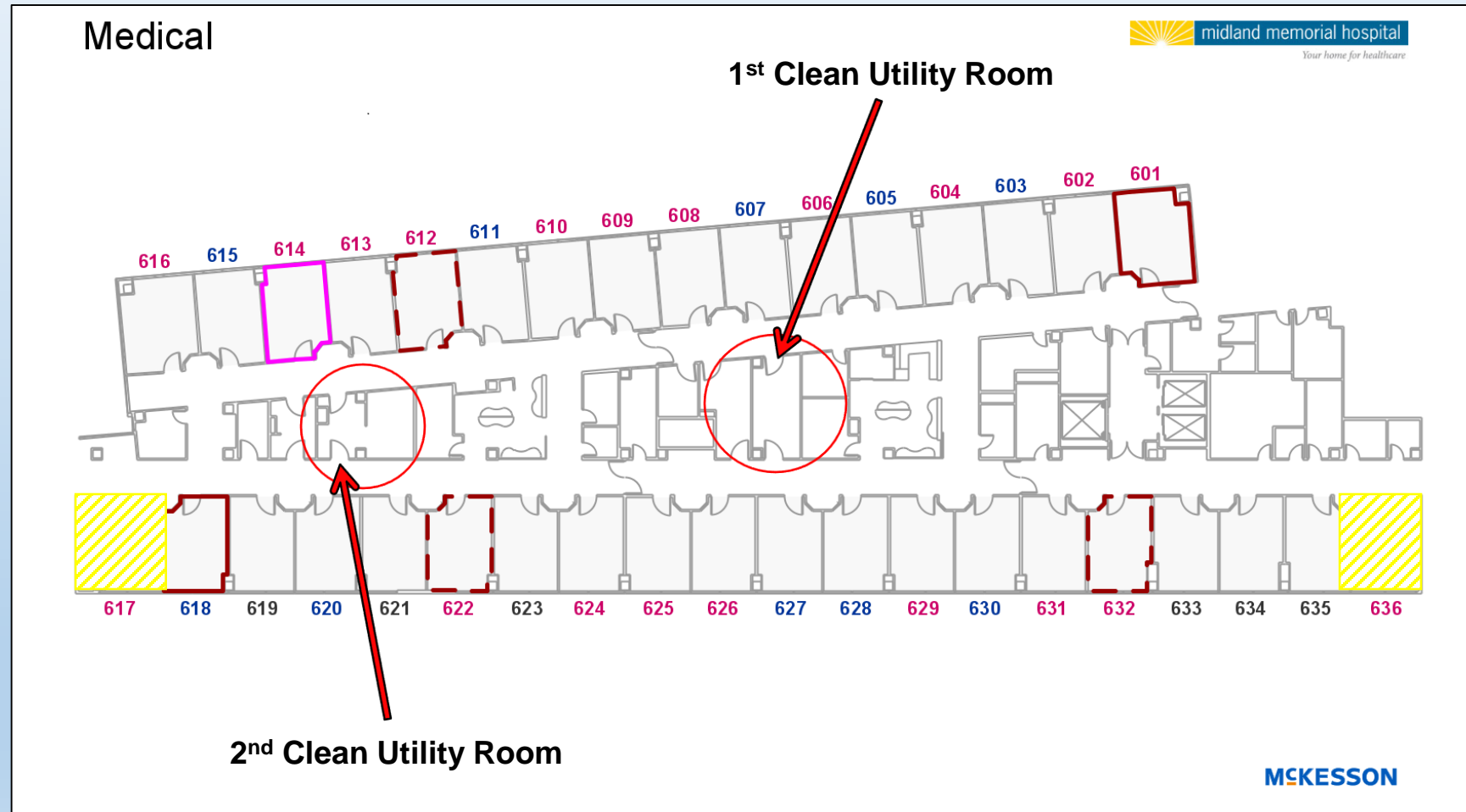


METHODS (cont.)

- Trials done on the medical floor:
 - 2013
 - Slings in clean utility rooms on top of linen carts



METHODS (cont.)

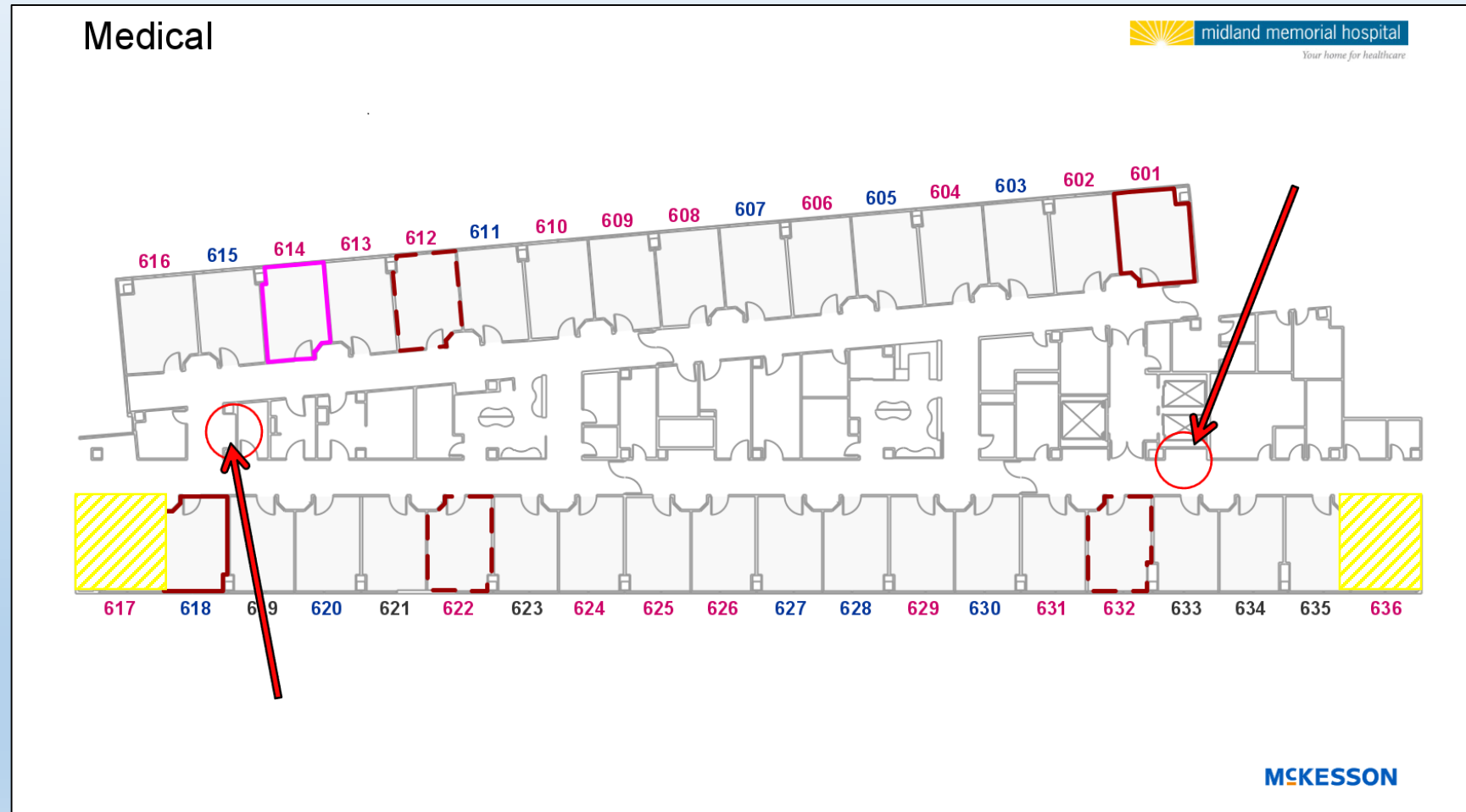


METHODS (cont.)

- Trials done on the medical floor:
 - 2014
 - Slings on shelves in hallways
 - Divided by size, color-coded
 - Hooks behind patient doors



METHODS (cont.)



METHODS (cont.)

Midland Memorial Hospital, Midland, TX 79701
SPH-Sling Mesh Bag Color

SLING TYPES	MESH BAG COLOR
Repositioning/Full Body	RED
Chair (Medium)	GREEN
Chair (Large)	BLUE
Bariatric Chair (XL)	PURPLE
Bariatric Chair (XXL)	BROWN
Bariatric Chair (3XL)	WHITE **(Call x5386)
Limb and Turner	YELLOW
Pediatric Chair	HOT PINK
Horizontal Lifter	BLACK

7046 Page 1 of 1 Date Approved: 09/10/2013 Last Review Date: 09/10/2013

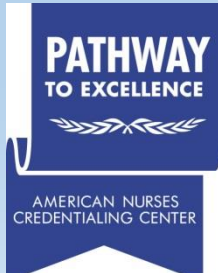


METHODS (cont.)

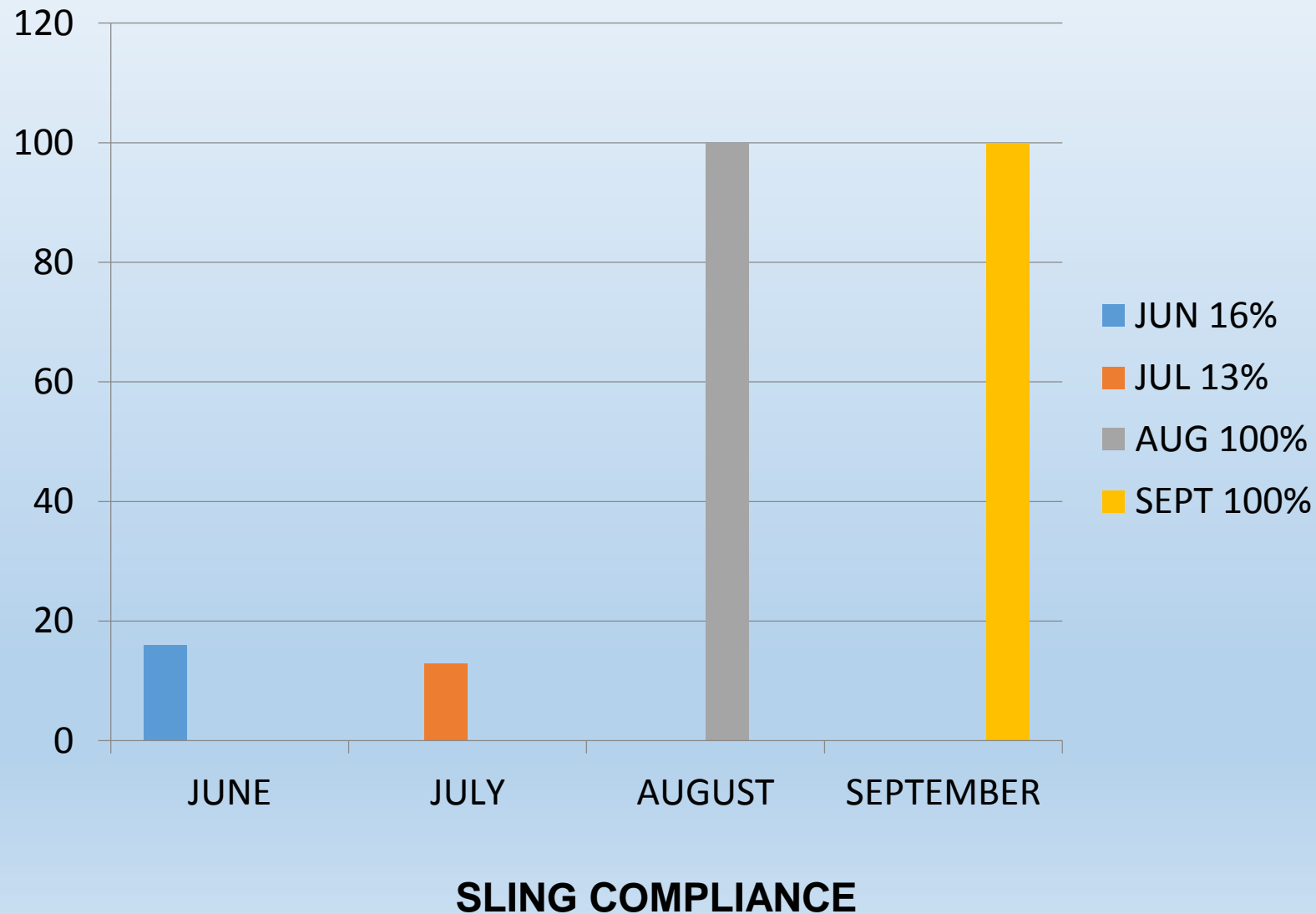


DATA & RESULTS

- Safe Patient Handling team do monthly audits on all floors
- Medical floor had the highest performing results



DATA & RESULTS (cont.)



DATA & RESULTS (cont.)

- End of July/beginning of August 2014,
 - Slings hooks were placed behind doors
 - Increased utilization of slings in rooms
- As of September, Medical was 100% on having slings readily available for use on patients that required them.



CONCLUSION

- Purpose/benefits of easy access to slings:
 - Decrease search time
 - Increase nurse-to-patient face time
 - Increase utilization (in patient rooms)
 - Decrease # of falls, skin tears, injuries, etc.



LAST WORDS

- Ann et al. (2009) concluded that...



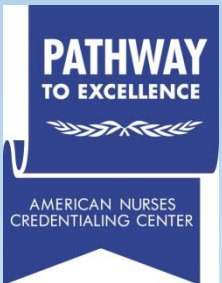
Redesign the units



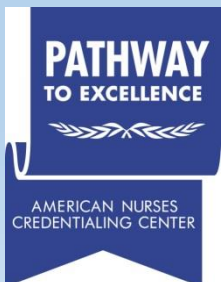
Maximize nurse time with patients



Improvement in patient safety and outcome



The End



REFERENCES

Consulting Betsy Repman, BSN RN, Education Coordinator, Medical/Oncology Services

Consulting Jessica Tully, BSN, RN-BC, CMSRN, CNML, Director of Medical and Oncology Services

Hendrich, A., Chow, M. P., Bafna, S., Choudhary, R., Yeonsook, H., & Skierczynski, A. A. (2009). Unit-Related Factors That Affect Nursing Time With Patients: Spatial Analysis of the Time and Motion Study. *Health Environments Research & Design Journal (HERD)*, 2(2), 5-20.

Zadeh, R. et al . Rethinking efficiency in acute care nursing units: analyzing nursing unit layouts for improved spatial flow, 39-62 Health Environments Research & Design Journal 2012; 6 (1): 39-64

