## Regan 3 North TCAB Journey

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Inspired care.





## Background

- Regan 3 North TCAB Pilot Unit
  - 33 Bed Medical Surgical unit
  - Opened approximately 2 years ago in response to increased census
  - Opened with 90% new graduates
  - Started TCAB November 2009
  - New manager at time of TCAB implementation



# 

## Quick Wins...Huge Impact

- Maintenance Log
- Simple Idea
- Small Goal
- Staff molded environment to fit their needs
- Adopted System Wide





## **Bedside Report**

#### Goals:

- •Streamline report
- •Improve quality of report
- •Reduce report time



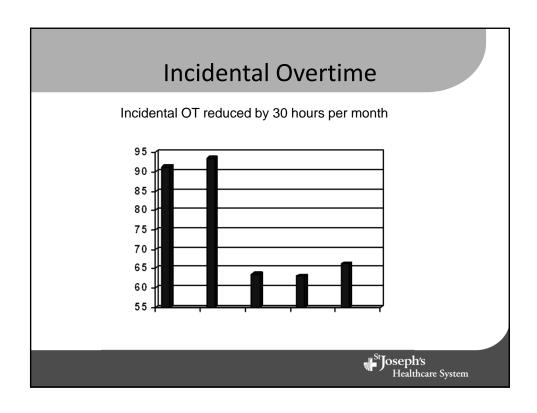


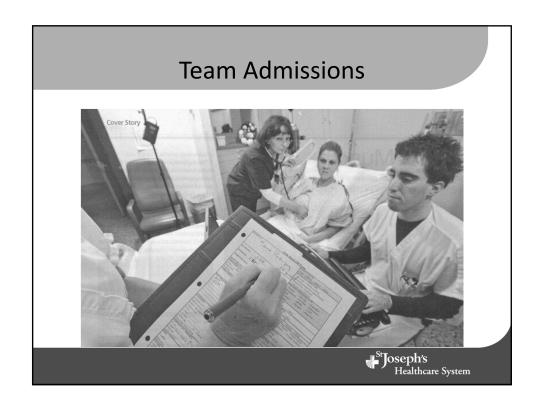
## Adapting

- Tests of Change evolve
- Hand Off tool created to facilitate Bedside Report
- Standardized report
- Eliminated privacy concerns
- Adopted system wide

PATIENT ID:	CODE STATUS:
TANAN IS.	o Full o DNR A o DNR B o Other:
	ADVANCED DIRECTIVE:
	o On Chart o Family to Bring
	None Discussed with patient family
	Patient Rep. Contacted
	Pastoral Care Referral
ALLERGIES:	PRECAUTIONS/SOCATION
	□ Seizure □ Suicide □ Aspiration
DIAGNOSIS:	: Elopement :: Fall Risk :: Restraints
ADMISSION DATE:	OVRÉ OMRSA OC-DIF Confact Opropiet Airborne
ADMINISTRATE:	Other:
ADMITTING PHYSICIAN:	VITALS:
EMERGENCY CONTACT:	Routine o Other:
	ACCUCHECK:
Name:	ACCUCHECK:
Relationship:	o AC and HS to Other
Phone #: FAME VIES IFSICIE TURAL RELIFES AFFECTING CARE:	I & O: Yes No
FAMILY ISSUES/CULTURAL BELIEFS AFFECTING CARE:	WEIGHTS: a Daily a Weekly a Other
	DIET: a NPO a Regular a Clear Liquid
	o 1800 Calorie Diabetic o 2 Gram Sodium
PAST MEDICAL HISTORY:	o Other:
	ACTIVITY MOBILITY:
	a fied rest or first
	Ampulates: o with assist in without assist
	o Other
	COMMUNICATION:
	Deaf OHOH Right Left OHearing Ald
	Bind Glasses/Cortact Lenses
	Destures a Primary Lagrance
	Dentures o Primary Language     Language Line Used
IV ACCIESS:	FALL RISK/SAFETY INTERVENTIONS:
o Perspheral IV:gauge	Current fall risk score
o Peripriera IV:gauge	- Current fall risk level
Date of Insertion Location	Recent history of fails
PICC MUsingle/double/triple/Power	∴ Necest risitory of rails ∴ Moved closed to Nursing Station ⇒ 1:1 sitter
o Central Line	o Family Sitler o Patient Sitter
o Port	Restraints - Order expires atam/pm
Other	o Other Interventions
o IV fulds:	RECENT LABSRESULTS:
o infuse @/hr o Saline Lock	RECENT LADSINESULTS:
a server 65 The service COOK	
Date of last suring change	
02 via	- Countries success
02 Via	□ Specimens needed:
02 Va	
02 via Organ Tration Protocol: Y N   N   N   N   N   N   N   N   N   N	.: Specimens needed:
02 vs	
OC VIA  Original Traition Protococ Y  Notes para  Outfield = Fenestrated  Country  C	
02 Va	
OQ VIA Organ Tiration Protocol: Y N Notice but State of the County of th	







### How it Happened

- During a complaint session nurses identify the following:
  - Admissions cannot be staggered
  - Process takes up to 90 minutes
  - Effect overall unit activity when staff unavailable to each other
  - Identified that they are able to help each other on weekends
  - Decided to mimic what is done on weekends during the week
  - Implemented TCAB PDSA



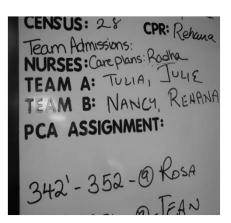
## Challenges

- · Portions of admission negotiated at time of patient arrival
- Team admissions worked better among "friends"
- Staff would not run "Test of Change" when unit was busy
- Even with the need to "Adapt" the process admission time had reduced to an average of 20-40 minutes



#### **Team Admission Process**

- Identification of Admission
   Team at start of shift
  - Team A & B
- Roles Identified
  - 2 RN's per team
  - 1 RN does assessment, documents electronically
  - 1 RN does paperwork
  - Charge Nurse completes care plan





### The Results



- Time spent on admission
   10-15 minutes per nurse
- Increased documentation compliance
- Increased patient satisfaction
- Increased staff satisfaction
- Published for Team Admissions



# Transforming the Environment











## **Appreciation Board**







## **Equipment Parking Spots**





### **IV Medication Rack**



- I.V.'s routinely delivered to "In Bin"
- Staff had rack organized by room number installed
- IV medication delivered placed by pharmacy tech
- RN saves 30 minutes per shift by not searching for I.V. medications in a bin



### Advice...Just Do It!

- Go back to work and initiate TCAB right away
- Don't worry about perfection
- Learning process for all
- Empower staff to lead the way





## **Promote Staff Engagement**



Join your team to take part of a Deep Dive with Pharmacy. Friday March 12th 8A 3 South Conf. Room





#### Celebrate!

#### **TCAB Anniversary**



On November 18th the staff of Regan 3 North celebrated the 1-year anniversary of the implementation of Transforming Care at the Bedside (TCAB). As the pilot unit, Regan 3 North at St. Joseph's Regional Medical Center joined 50 other New Jersey hospitals to implement TCAB in collaboration with the New Jersey Hospital Association through a grant from the Robert Wood Johnson Foundation. TCAB is a non-traditional quality improvement program where staff members are empowered to identify where change is needed. They initiate changes, do rapid evaluations, and implement processes that lead to a workplace that works for them. Ultimately the new processes lead to the delivery of more efficient care, improved staff satisfaction, and more time at the patient bedside.

Some of the "Tests of Change" that have been adopted on Regan 3 North include:



- Bedside Reporting
- Table Administration
- Maintenance Logs
- Staff Appreciation Board
- 'Hand Off' Tool
- Reorganization of Omni Cell
- 'Parking Spots' for Equipment
   Phone Installation in Med Room
- Work Space Installation in Med Room
- Installation of Additional Hand Sanitizers
- Physician Phone Book
- Pharmacy Delivery Bin for Physician Order Clarification Forms

The overall goal is to spread TCAB throughout SJHS. Training sessions have begun. Watch for details.



## Transforming the Organization



- Regan 3 North staff conducting organizational TCAB training
- TCAB infused into Relationship Based Care Model
- Including interdisciplinary teams
- Currently 18 teams trained with 83 Tests of Change ongoing



## Thank You

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