### **TCAB**

Jacquelyn Nefstead RN, ONC Good Samaritan Hospital

## **Ministry Good Samaritan**

- Ministry Good Samaritan is a 25 bed Critical Access Hospital located in Merrill, Wisconsin
- Sponsored by the Sisters of the Sorrowful Mother
- Offer a range of primary and specialty services
- Unit consists of Medical Surgical/SCU/Swingbed patients

## Change can be difficult

- New manager in December 2010 who had been trained by many of the nurses still working here
- Many long term employees
- Much resistance to being open to changing "the way things have always been done"

#### Here we come TCAB!

- We joined TCAB in March 2011 with a team to include a representative from all disciplines. The team included:
  - Night shift RN
  - Day shift RN
  - CNA/HUC
  - Inpatient Manager
  - Director of Patient Care
  - President

#### **Team Members**

- Important to include team members that are positive leaders amongst their peers
- Make sure their schedule is able to accommodate the time needed for active involvement
- Involve management to show support of the project

## How we started after the Kickoff event

Needed to bring our excitement for TCAB back to the Unit.

- TCAB was discussed at our Staff meeting the following week. Shared the slide from TCAB with comparisons about 99.9%
- Staff recognized the significance that 99.9% is not good enough and made that our Team motto

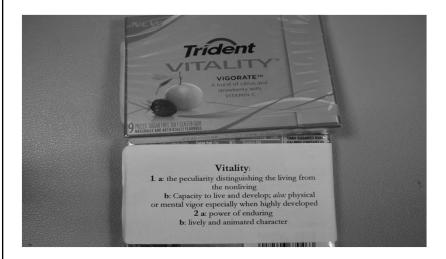
# **Because 99.9% Is Not Good Enough**



## **Share the Excitement**

 Made it fun. Handed out Trident Vitality gum that was labeled with the definition of vitality to our staff

## **Vitality**



## **Educate to Spread the Word**

- Elevator speech was shared with all staff to educate and prepare them for questions
- Word spread, and other departments began asking about TCAB

## The Next Step

- Developed a TCAB bulletin board located in the staff lounge
- Aim statements are posted for all to review and vote to Adopt, Adapt, or Abandon
- Blank forms are located on the board for staff to initiate their own small tests of change

## **TCAB Headquarters**



### Marketing

- Actively working with our Marketing Department for Internal & External communication.
- Key to show staff the support from the organization
- Continue to spread the word about TCAB throughout the hospital and organization
- Inform patients, visitors, physicians and staff our dedication to improvement through TCAB

#### **Internal TCAB communication**

- Internal TCAB communication:
  - Article in hospital weekly newsletter from the president
  - Article on the System wide intranet site
  - Article in Hospital and Foundation Board Member Monthly updates
  - Facility signage to make visitors and staff aware of our TCAB involvement
  - Planning a "TCAB social" for physicians, staff and visitors to learn more

## **External TCAB** communication

- External TCAB communication:
  - Media release to 30 Central Wisconsin Media outlets
  - Follow up interviews with Hospital President as requested
  - Placement on external internet link for Ministry health care
  - Ministry Health Care Social Media Sources (Facebook, Twitter)

## **External TCAB** communication

- External TCAB Communication:
  - Chamber of Commerce Newsletter and web site
  - Wisconsin Hospital Association Newsletter

## **Sharing with other Leaders**

- Discussed TCAB at our Leadership meetings to inform all departments of our involvement, and ask for their support as their assistance may be needed in our initiatives
- Held a Snorkel session for the Directors so they could actually participate & learn the process of TCAB, recognizing the benefits

### **Quick Wins**

- Small, simple changes with immediate impact were key to keeping the excitement of TCAB going
- Low cost, high yield in staff satisfaction
- Allowed staff to recognize that the Inpatient Manager was in support of change to improve their job satisfaction as well as patient satisfaction

## Seriously??



## YEAH!!!



## Repair orders

- No organization of work orders being placed for repairs needed on the unit
- Resulted in duplicate work orders, frustrating EVS
- No work orders placed at all as staff thought someone else must have already notified EVS of repair need, delaying repairs on the unit

## **Maintenance Log**



## Walk, Walk, Walk

- Lack of organization of location for updated medication stickers for patient MAR's
- Nurse needed to leave the chart at the nurses station, walk to the Pixys room for sticker, return to the nurses station
- Could occur many times throughout the day

## There has to be a better way!!



### I TCAB'd it!!



### **Nurse Servers**

- Great addition to the patient rooms
- Need stocking on a regular basis due to frequent admissions and discharges
- Cart needed to be loaded with supplies to push room to room
- This created more work to prepare the cart, noise going down the hall which could affect patient rest

## Is this everything?



## Make sure you cram it all in!!



## I will TCAB my brilliant idea!



## So much easier!!



## A thing of beauty



## **Quick Wins**

- · Quick Wins included:
  - Another garbage can in the patient room
  - Maintenance Log with central location
  - Location of updated stickers for patient MAR's closer to Nurses' station
  - Interchangeable supply buckets in the Nurse server to decrease stocking time and noise interruptions

#### **Fall Prevention and Huddles**

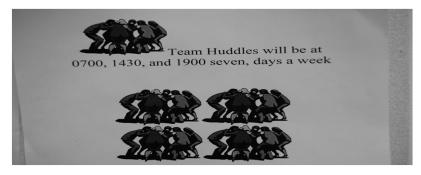
- Felt that communication would be key in protecting our patients from falls
- Initiated "Huddles" that included the Night shift RN's and CNA and oncoming Day shift RN's and CNA's.
- These were scheduled to occur at 7:00 AM,
  2:30 PM when change of CNA shift, and
  7:00 PM for Day/Night RN change of shift
- Last approximately 5 minutes

### **Huddles**

- Clarify those patients that are a fall risk with a different color on the whiteboard for easy identification
- Whiteboard is updated as a group to ensure that activity level is posted, and everyone is clear on fall precautions in place for all patients

## **Huddles**

 Emails were sent out, along with posters in the Unit stating that "Huddles" were occurring



## Started with a bang, then ...

- Were consistently done for a week, then attendance decreased as many staff began bedside report prior to the huddle
- Reinforced the benefits using word of mouth by staff- peer support is key

## **Huddles**

- To ensure compliance initially, we sent a page out to staff that the Huddle is taking place and their attendance is required.
- Charge Nurse decided to create a sign off sheet to document the huddle occurred.
- Inpatient Manager attended Huddles to show support and identify those not compliant with participation

### **Huddles**

- The benefits have been shared amongst staff and other departments, and have added information such as potential discharges
- Have now expanded to include:
  - Unit Clerks
  - Housekeeping
  - Respiratory Therapy
  - Discharge Planning
  - Pharmacy

## **Multidiscipline Huddles**



## **Multidiscipline Huddles**



## **Huddles**

- Continue to work on improving the Huddles by:
  - Physicians participating on a regular basis
  - Streamlining the report
  - Consistently occur at 2:30 PM
  - Consistently occur on the weekends

#### **Patient Satisfaction**

- Focused on improving patient satisfaction scores
- Reviewed our scores and reports from rounding that patients found it difficult to get any rest in the hospital
- Decided as a unit that getting more details about the interruptions would help to understand the areas of improvements

# TCAB Data Gathering in Process



## **TCAB** data gathering

Time Entered	Activity	Time Exited	Discipline
1456	V'd Beeping W		-RI
1510	vitalostaken	1513	cha
1535	Medication	1540	RN
lew	Vapt and dinner	1512	CNA
1740	med Adm	1246	BN
1800	Vonpt-inbed	1805	ena
1815	Med adn	1860	RN
850	HIS cares	1900	CNA
1950	assisted pt	1953	cra
1955	Bostoll report	2000	RN

#### No rest

- Found that in a 24 hour period, hospital staff entered the patient room 56 times.
- This included nursing, physicians, houskeeping, lab, etc
- Patient was not receiving any PT/OT or respiratory services

#### **Patient Involvement**

- Patient loved being involved
- Tracked his visitors and our staff.
- Patient shared with them that they visited 3 times in 24 hours and limited their visits
- He came back to the hospital 3 weeks later and requested to be involved again and "was telling everyone"

## Peaceful, Healing environment needed

- Decided as a team that patient interruptions were too high
- Discussed coordination of cares would benefit the patient
- Nurses and CNA's coordinate schedule for each patient daily, such as bathing and dressing changes
- Working with pharmacy to coordinate medication dispensing times

### **Patient Satisfaction**

- Through TCAB, our communication on patient issues, especially falls or plan for the day has improved
- Patients are asked for their involvement in the plan of care, such as preferred times for meals, showering, etc.

## Recommendations to keep TCAB moving ahead

- Coordinate team members schedules to allow for active involvement.
- Vacations of members that overlap can decrease the enthusiasm
- Weekly meetings of the Core team to plan
- Unit snorkel to share the process

# Recommendations to keep TCAB moving ahead

- Education of staff on use of elevator speeches to share throughout the organization
- Recognition on the Unit with banners, posters, bulletin boards, designated work area for TCAB
- Actively working with marketing
- Sharing with other Directors for support of TCAB initiatives

## **Management Support**

- Management to show involvement and support by:
  - Attending meetings
  - Ensure that needed supplies are available to team
  - Consistently rounding on staff asking about TCAB

## **Management Support**

- Management to show involvement and support by:
  - Use of the elevator speech at with physicians/other departments at every opportunity
  - Sharing with patients and visitors the commitment we have to continuously improve and support our staff

# Recommendations to keep TCAB moving ahead

- Management to show involvement and support by:
  - Support and guide staff that struggle with change
  - Hold staff accountable for being actively involved by making this a part of the yearly performance appraisal

### Make It Fun!!

