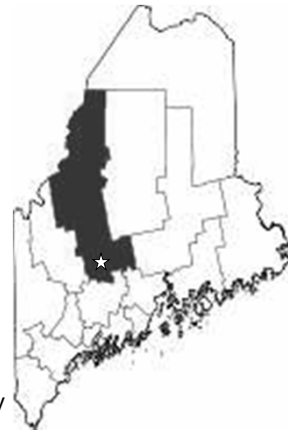
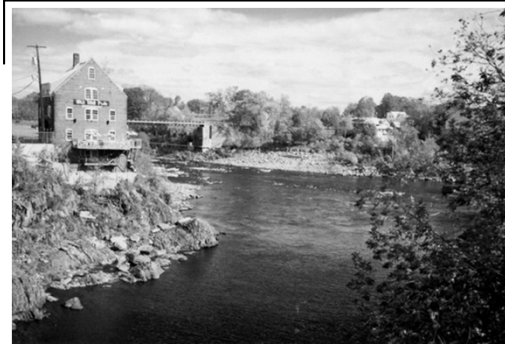




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Redington-Fairview General Hospital  
August 24, 2011  
Sherry Rogers, RN, MSN, NEA-BC

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- \* Located in Skowhegan in Southern Somerset County
- \* 25 bed Critical Access Hospital
- \* 24,800 ED visits a year
- \* Serve over 30,000 people from Canada to Skowhegan
- \* One Medical Surgical Unit- MacArthur Unit

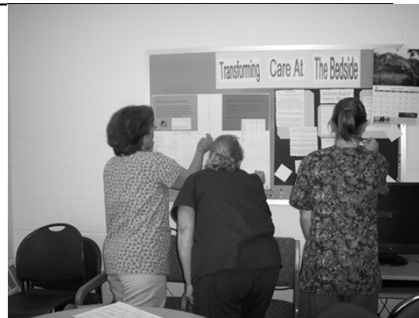
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## 2. Go with the interest!

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### Capture the Enthusiasm!

- ❑ Go where the excitement is
- ❑ Establish a sense of urgency
- ❑ Quick wins or successes

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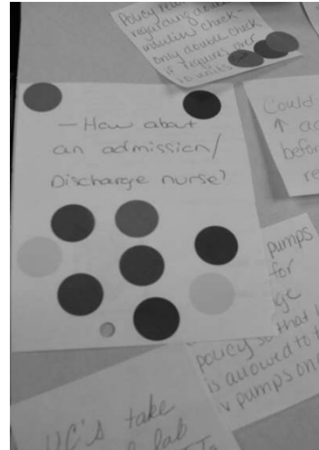


## Admission and Discharge Nurse

-At the very first snorkel, the nurses wanted an admission and discharge nurse.

-TCAB Team came up with all the benefits to this position.

-How could I justify more hours?



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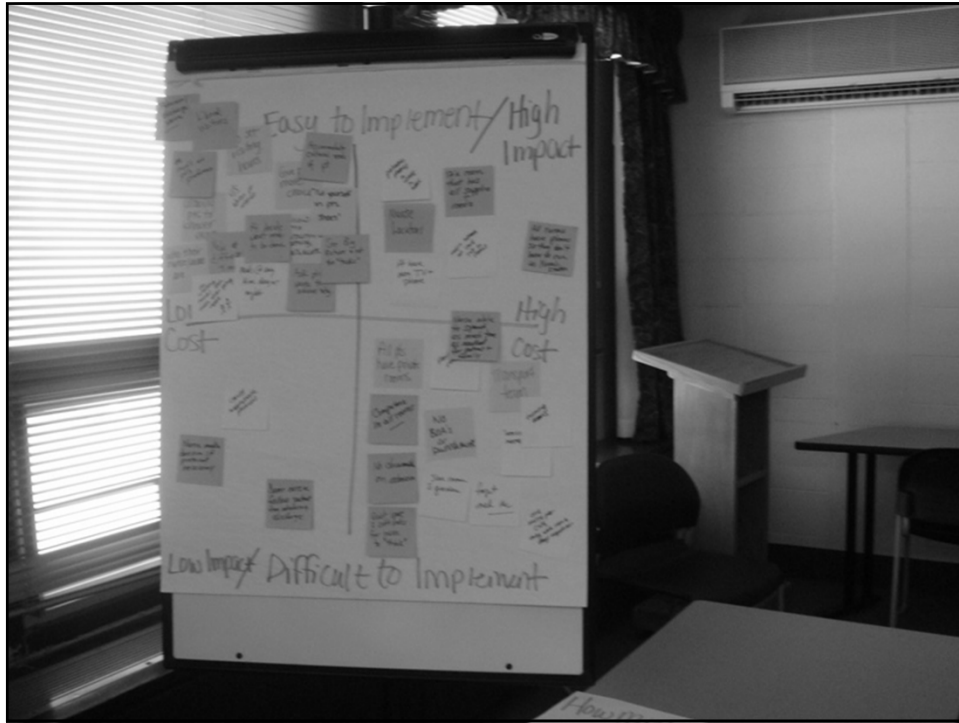


## Matrix of Change

- Apply ideas to chart
- Strive for easy, low cost solutions
- Translate high cost ideas into low cost solutions

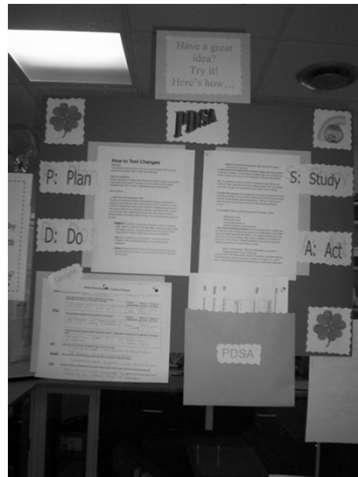


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## PDSA

- Mentor staff who want to try ideas
- Go with the interest of credible people
  - Empower all to implement quickly
  - Remind them one shift, one nurse, one patient, one time





## 3. Organize!

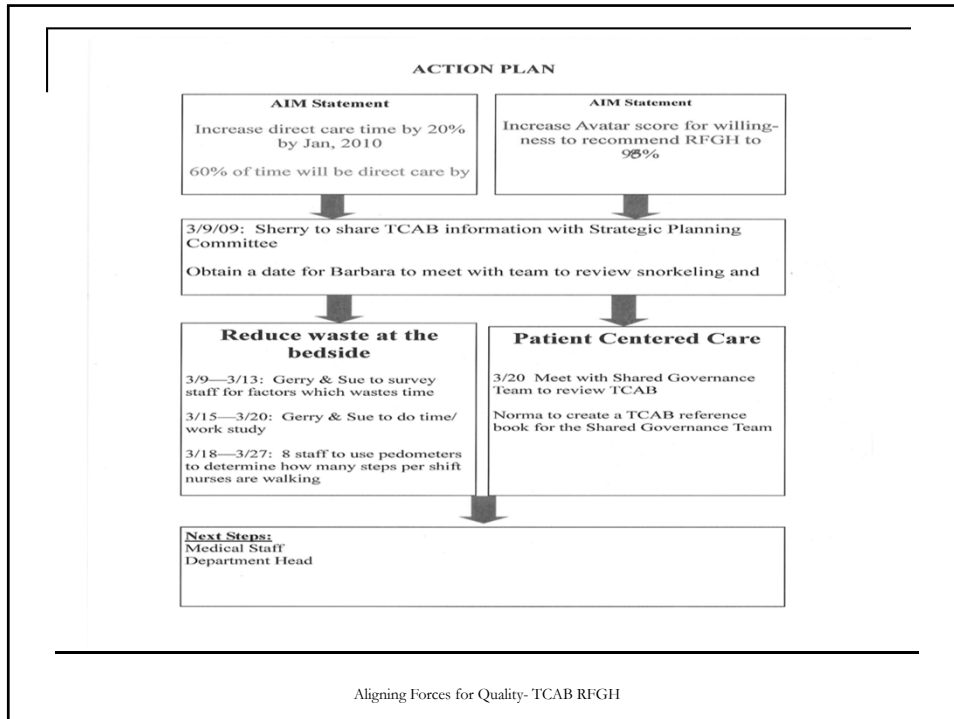
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### Put Structure to It!

- ❑ Pull the right team together
- ❑ Give them time
- ❑ Set up meetings
- ❑ Know your focus
- ❑ Establish action plans

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## Establish Competence

- ❑ Provide guidance, boundaries and support
- ❑ Help staff set up meetings
- ❑ Help staff with systems thinking
- ❑ Involve other departments and disciplines

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## 4. Communicate!

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### Tell Your Story!

- ❑ Use the elevator speech
- ❑ Talk to Senior Leadership Team
- ❑ Talk to Medical Staff, Medical Director
- ❑ Keep the Vision and Strategy alive

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## Communicate and Share Hospital wide:

- Department Head Reports
- Employee Newsletter
- Medical Staff
- Leadership
- Board of Directors



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### Medical-Surgical TCAB: Transforming Care at the Bedside September 2010

We marked 101 days with no patient falls on September 27, 2010 with a celebration in the new lobby. We celebrated with pumpkin pie and apple cider donuts from the Firehouse Bakery, hot apple cider and popcorn, and gave away a beautiful basket from North Star Orchards. Rehab provided fun for everyone who came to the celebration with the Wii Fit. Those adventurous enough got to work on their balance, hula hoop and play games using the Wii. On display were the lifts we use to keep our patients safe.

TCAB would like to thank everyone who came, over 200 RFGH staff, for making the afternoon successful. We also want to thank all RFGH staff and administration for helping us to keep our patients safe. We make a great team!

Norma Munn RN-BC, Medical-Surgical Manager



Members of the TCAB Team: Sue Warner RN, Gretchen Dionne RN, Angel Quattrone CNA, Ellen Belanger CNA, Natasha Hanson RN



# 5. Take Chances!

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## Use Courage!

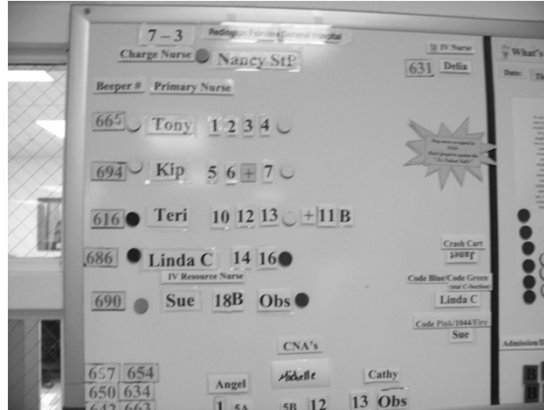
- ❑ We are not good risk takers
- ❑ Implement Rapid Cycle Improvement
- ❑ Don't be afraid of letting them go!
  - Engage front line staff
  - Trust and value their input
  - You will not disappoint
- ❑ Empower action
- ❑ Be transparent



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## Not all innovations worked at RFGH!



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- “Setbacks are inevitable. Misery is a choice.”  
(Stephen Covey)



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## 6. Stay Committed!

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### Commit!

- ❑ This is a journey
- ❑ Round for outcomes
- ❑ Recognize staff for what they have done
- ❑ Sustain the gains
- ❑ Support from organization



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## Ensure Teamwork

- ❑ Team training
- ❑ Know your culture of safety survey results
- ❑ Take a team vitality survey
- ❑ Need accountability of your team

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## Engage Leadership

- ❑ CEO
- ❑ Director Support Services, COO
- ❑ Medical Director
- ❑ Medical Surgical Unit Leaders
- ❑ Department Heads

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## Involve ALL the staff

- Difficult to pull all staff together due to patient care needs and shift work
- We created a story board that is posted on the unit
- We kept a “snorkel” board going weeklong without a meeting
- Staff added ideas and set priority with multi-votes

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## RESULTS



In the first three months:

- ❑ Implemented skin protocol order sets
- ❑ Implemented screening phone calls so nurse is not pulled away from patient care
- ❑ Trialed admission and discharge nurse model
- ❑ Improved our discharge instructions to be more Patient Friendly
- ❑ Implemented “Ticket to Ride”
- ❑ Implemented Precaution Room Kits

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## Bedside Report

- TCAB Team members trialed first
- Kept spreading to all staff



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## Supply Drawer Organizers

- Polled staff on “Top 10 Most Needed Supplies at the Bedside”



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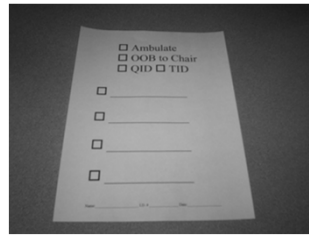
## Sleep Hygiene Kits

- Gathered supplies to improve patient's sleep
  - Earplugs
  - Soft music with nature sounds.
  - Herbal Tea
  - Eye mask



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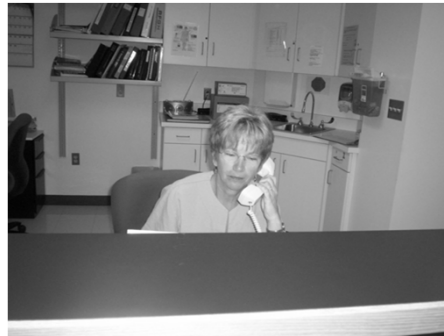
## Ambulation Sheet



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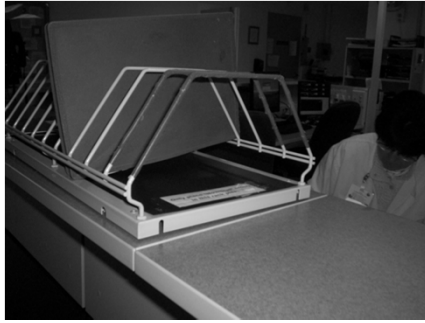
## PACU Courtesy Phone Calls

- PACU courtesy call when patient arrived in PACU from OR.



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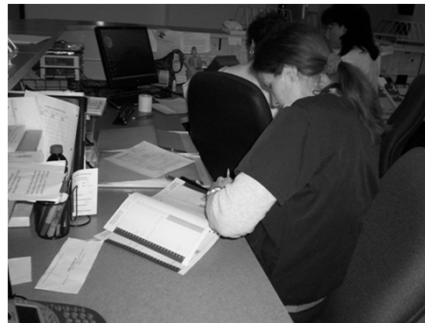
## Stat Rack



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## Outpatient Therapy

- Appointment book and appointment cards
- Nursing to schedule outpatients like a physician's office
- Measured the "wait time" before and after the use of appt. book & cards
- 20% decrease in wait time



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## Hourly Rounding



- Call Bell Study completed before trialing hourly rounding.
- After implementing results showed a 51% reduction in calls.
- Fall reduction was significant.

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## Admission/Discharge Nurse



- TCAB Team given the duty of selecting A/D nurses.
- Currently, this role is changing to a Transition of Care.

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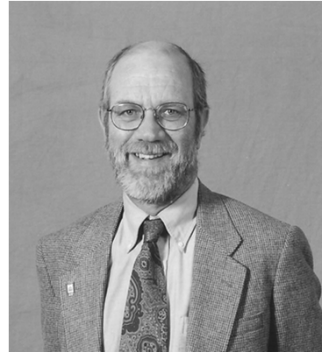
## ■ Lessons learned

- Culture of planning and perfection
- Share stories and emphasize learning
- Involve patients
- Deal with skeptics
- Reign in the excitement and focus on certain improvements
- Need to celebrate more

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## Celebrate Success and Have Fun!





“TCAB is growing your new leaders. By giving them responsibility now, they will be leading our future!”  
(Richard Willett, CEO)

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“It gives us a way to help define our own work environment. We have a collective voice.”  
(Kim Baiko, Staff RN)

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“There is great teamwork and all know expectations and the vision of the organization. The results are positive. Staff have accountability and make changes first hand without our hierarchy process getting in the way!”

(Carol Steward, Director Support Services)

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“The really cool thing is the independent initiative of the nurses in addressing issues. They are working on things to make care better for our patients.”

(Dr. Michael Lambke, Medical Director)

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Thank you!

Contact:

- [srogers@rfgh.net](mailto:srogers@rfgh.net)
- 207-474-5121