

Why Not a Patient Care Bundle?

Improving Patient and Family Satisfaction by Bundling Evidence-Based Best Practices at the Bedside

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In today's dynamic, fast-paced healthcare environment, new initiatives, methods, and practices are constantly being presented to frontline staff. Frequently, these initiatives are presented as "the latest and the greatest." Sometimes, they are implemented based on the most recent dictum from one of the several regulatory agencies governing the healthcare environment. Occasionally, they may even be rolled out as a "pet project." Regardless of

the drivers behind each new practice and initiative, implementing the "change" into daily practice is often stressful and sometimes destabilizing to staff, who may not be fully aware of or support the reason behind the change. An additional obstacle to early adaptation and hardwiring of the change may be a belief it is merely the latest fad, trend de jour, or flavor of the day as staff wait to see if not implementing the change has consequences.

At Adirondack Health, the nursing leadership team was working to bring multiple initiatives to the forefront and have them hardwired within the staff. Many of these initiatives have been worked on at the staff level for several years. The objectives of the bundle were to align all nursing units within the organization to the philosophy of patient- and family-centered care delivery model; to implement each initiative of the patient/family care bundle throughout the organization through education and training; and to improve patient quality outcomes and the patient/family experience within the organization by increasing the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) score for value-based purchasing.¹

The nursing leadership team at Adirondack Health employed several leadership principles during this project. These principles include servant leadership, proactive leadership, evidence-based best practices, alignment of initiatives, and buy-in/staff engagement. The remainder of this article will discuss these principles and how the leadership team applied these to the project.

LEADERSHIP PRINCIPLES

Servant Leadership

Many organizations have adopted servant leadership as their management philosophy. “The serving leader revolves around a state of being and traits consistent with the notion of holistic care or treating the whole person including the mind, body, and spirit rather than simply the body or disease.”² According to Greenleaf,³ the 10 principles of servant leadership are listening, empathy, healing, awareness, persuasion, conceptualization, foresight, stewardship, commitment to the growth of people, and building community. The nursing leadership team at Adirondack Health used several of these principles in the initiation of the patient/family-centered care bundle. Many of the initiatives brought into the bundle were born out of the hospital’s long-standing nurse practice committee, driven by frontline staff. Inspiring and supporting innovation and creativity among frontline is key. Providing staff with the proper tools and environment to perform well at their job is the responsibility of the servant leader. If some of those tools are missing, the nurse can go off track and not pay full attention to what the needs of the patients are. This leadership team understands its obligation to help solve problems, provide guidance, and foster clinical growth among the staff. With the tools provided in the bundle, the nursing staff is able to focus on the goal of meeting individual patient needs by taking the time to maximize the patient/family experience.

Proactive leadership

Instead of problem solving in a reactionary fashion, the nursing leadership team at Adirondack Health decided to pursue a proactive leadership position. This was done through thinking strategically and outlining a vision of what excellent, patient-centered care should look like at Adirondack Health. “A compelling vision for what a company stands for and

does can provide considerable motivation for staff...the right vision can infuse workers with a sense of purpose they apply to otherwise menial tasks.”⁴ The leadership team decided not to roll out random individual initiatives. The team wanted to frame the initiatives within a larger context (patient-centered care) to create a unified vision.

Engaging in proactive leadership begins with the leadership team. If a team does not work well together, or is unable to bring their issues to the table without fear of reprisal, how can the leadership team expect their staff to work together and succeed on a project? Fostering a leadership team that promotes diversity, encourages creativity, and respects differences is crucial to obtaining the best outcome. Proactive leaders lead by example. This will allow staff to emulate the behaviors modeled by the leadership team, collaborate together, and work through differences in opinion, all while pursuing the same shared vision.

Evidence-Based Best Practice and Bundling

To provide excellent patient care every day, nurse executives and leaders of today must realign priorities and systems, maximizing evidence-based practices, and focus on specific quality initiatives that have predictable outcomes to enable the organization’s success. The evidence-based best practices included in the bundle at Adirondack Health have been written about in many professional journals. Based on our research abstract, we used the following: bedside shift-to-shift report using situation, background, assessment, and recommendations (SBAR), use of white boards, rounding, the Silent Hospitals Help Healing (SHHH) program, discharge processes, individualized patient care, and nursing excellence expectations.

Using bundles helps to solve problems related to: high uncertainty, low predictability, frequent interruptions, and poor outcomes. The theory behind care bundles is that when several evidence-based interventions are grouped together in a single cluster of care, it will improve patient outcomes.

The process used in developing the bundle was the plan, do, check, act (PDCA) methodology. The steps performed included:

1. Identify an area for improvement (patient satisfaction scores).
2. Research the cluster of practices that show improvement.
3. Complete a literature search related to each best practice identified.
4. Prioritize each best practice according to quality outcomes.
5. Delete any practices from current repertoire that were not supported by research.
6. Develop the patient care bundle based on the researched evidence.
7. Educate all staff and hardwire education in the institution.
8. Audit and monitor HCAHPS results, share with stakeholders, and adjust as needed.

Alignment of initiatives

To be successful in sports, all members of the team need to be playing the same game, on the same field, using the same

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