

# Great Expectations: *Linking Vision to Everyday Work*

*Karen Richards, DNP, RN, NE-BC, and Jean Mellott, MSN, RN-BC*



In a Magnet® organization, leaders must continually seek out opportunities to improve patient outcomes and processes associated with the delivery of high-quality, safe patient care. Using the Magnet model as a framework helps to guide leaders to link an organization's vision to the everyday work. Outstanding patient care experiences are at the heart of Exeter Hospital's mission, vision, and values. In an effort to enhance the patient care experience, Exeter intro-

duced several evidence-based initiatives designed to provide staff with the tools needed to deliver an exceptional experience. Service communication, relationship-based care, TeamSTEPPS™, and lean thinking concepts were all introduced sequentially over a 4-year period. Grounded by nursing's professional practice model, the tools became critical components of everyday clinical practice and guided the work of the unit-based practice councils.

Over time, however, it became clear that leaders, providers, and staff from across the organization were uncertain as to how the initiatives were interconnected and how each supported the other. Managers often expressed frustration that some departments had received significant training, whereas others had only received the basics. As a result, employees had variable levels of exposure, training, and utilization of these evidence-based resources and tools. In response, senior leaders chartered a group of system educators and content experts to uncover opportunities to enhance the level of integration and application of the key concepts and tools into standard daily work. The group was tasked with creating an integrated curriculum for all employees, providing education for current employees and managers, and identifying key behaviors and job skills to effectively integrate the concepts into employee performance.

## STRUCTURE

A cross-affiliate team of educators and content experts was chartered to take on the challenge of integration and application of the 4 initiatives and to determine competency outcomes. Team structure was changed from ad hoc to a formal project team, with the work of the team becoming known as the “integrated curriculum.” As the process began, it became evident that the concepts of service communication, relationship-based care, TeamSTEPPS, and lean thinking, all shared common threads, as identified in [Figure 1](#). Over the course of the next 18 months, 4 priorities surfaced and focused the team’s work:

1. Involving managers more in the everyday application of the concepts
2. Refining the structure of the curriculum and production of competencies, materials for new and existing staff, managers, and providers
3. Identifying how to use existing data sources to guide future education needs assessments
4. Establishing milestones and outcome metrics for the project

Project team meetings were held monthly, and progress was reported out quarterly to the members of the health systems operating group (HSOG). The group, chaired by the chief executive officer, and composed of various system vice presidents, became the sponsors of the project.

## PROCESS

Initial phases of the project included compiling descriptions of key aspects of each initiative. Time was spent discussing the descriptions and developing shared understanding and assumptions. Finally, comparisons and considerations were made regarding the following:

- How do the initiatives complement one another?
- How do they duplicate or overlap?
- Is there a logical order to the introduction of each of the 4 initiatives?

Following the team’s in-depth exploration of the 4 initiatives, common elements quickly began to emerge. These elements, deemed fundamental to each of the programs, were identified as “basic performance expectations” for all Exeter

employees. This was a critical finding for the team, which ultimately led to the development of the integrated curriculum, a program designed to educate all current and future employees on the cultural expectations of:

- Putting patients’ needs first
- Effective interpersonal communication
- Effective teamwork

while integrating the concepts of service communication, TeamSTEPPS, relationship-based care, and lean thinking.

[Figure 2](#) presents the visual tool designed to compliment the curriculum.

In late fall, the team conducted a survey of managers and directors that validated that leaders, providers, and staff across all Exeter affiliates had variable levels of exposure and training, and variable opportunities to actually implement these evidence-based initiatives, resources, and tools.

The team created an integrated curriculum to provide all employees with an understanding of the basic performance expectations. In an effort to brand the program and more clearly express the content, the integrated curriculum was renamed Expectations for Excellence at Exeter, or Ex3. Objectives were to examine the patient care experience, create awareness of foundational evidence-based practice tools, and begin to help participants appreciate their unique role in Exeter’s continuous quest for excellence. The program was first presented to senior leaders, managers, and directors, and the feedback was generally positive. Some of the content was revised based on specific suggestions from the group, such as paring down the slides, offering concrete examples of excellent communication and handoffs, and keeping the conversation broad and applicable to all staff, rather than focusing primarily on clinical staff. Feedback from the program evaluations included statements such as:

- “Linking the concepts will be very helpful in solidifying the patient care experience.”
- “Improving professional conduct and team work is key to a positive work environment.”
- “Common vision... alignment (of) our work”
- “Shared mental model”
- “Will help to focus on sustaining business”
- “Stronger, more effective team”

## SUSTAINABILITY

The vice president for human resources expressed the need to create a model that would include the ability to measure the effectiveness of corporate orientation. He suggested that Ex3 should have a follow-up component. To meet that expectation, new employees now receive an additional 4-hour follow-up course approximately 90 days post-hire. Ex3, Part 2, delves deeper into each of the evidence-based tools and offers participants the opportunity to discuss application of the basic performance expectations in their unique work setting. Ex3, Part 2 objectives are to identify strategies to sustain and create relationships, discuss examples of effective teamwork, demonstrate various techniques to optimize the patient care experience, and identify opportunities for improving departmental efficiency using lean principles. The

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