Two Heads are Better than One

Improving Care with Changes to the Staffing Model

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Background

- Prompted by 3 near miss reports in preop
- Inefficient preop processes may increase risks for patient safety
- Previous preop staffing model and processes led to delays in procedure/surgical start times, throughput issues and overtime
- Research shows the positive impact of teams in nursing and healthcare with regard to:
  - Patient safety & quality of care
  - Staff burnout
  - Organizational outcomes

Aims

- To establish safeguards to ensure patient safety and care delivery to patients on the Surgery & Procedure Admissions Unit (SPAU).
- To improve patient experience, foster staff accountability, gain efficiencies, optimize resources and facilitate throughput.

Methods

Approach

- Multidisciplinary Shared Leadership collaborated to develop a staffing model to achieve safety and care objectives
- Followed Institute for Healthcare Improvement Model using Plan-Do-Study-Act

Qualitative Results

- Improved staffing model: 2 RNs paired/assigned to preop patients, and RN pairing parallel workflow
- Enhanced patient experience, safety and care delivery
- Staff satisfaction enhanced
- Efficiency gains and optimized resources
- Improved communication between staff and staff accountability fostered
- Role modeling; best practices/lessons learned shared by working as a team

Quantitative Results:

- Reduced admission time for preop/procedure patients: 17.5% with pre-admit visit and 20% without pre-admit visit
- Reduced healthcare costs (annualized savings of approximately $227,227)
- Reduced care coordination near misses (3 pre-implementation, 1 post-implementation)

Discussion

- Nursing implications: (1) Results of project validated current findings of teamwork in nursing and healthcare; (2) successfully applied a 2:1 RN to patient ratio in order to improve patient safety, quality of care, and preop efficiency / throughput.
- Next steps: adding more structure and addressing barriers based on data, feedback and process observations.