The views expressed are those of the authors and do not reflect the official policy of Madigan Army Medical Center, Army Medical Department, the Department of the Army, the Department of Defense or the U.S. Government.
STOP!
Collaborate & Listen

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MADIGAN ARMY MEDICAL CENTER

• Level II trauma center/teaching hospital, 240 beds, Tacoma, Washington

• Serves 100,000 active-duty service members, retirees, and family members

• 20-bed cardiac step-down telemetry Unit

• 31-bed medical surgical oncology Unit

• Average patient: >65 years; diagnosis of COPD, congestive heart failure, diabetes, renal insufficiency; mid-level acuity (4/6); Length of stay 4 days
Purpose and Goals

• Increase communication between nurses, physicians, and patients 50%

• Enhance communication through emphasis on patient short-term goals with 80% tool compliance

• Train 90% of staff on how to use tools

• Administer pre surveys to nurses, physicians, and patients by March 1, 2015

• Present tool at Internal Medicine orientation by June 2015

• Administer post surveys by September 1, 2015
Project Overview

• Goal: Enhanced collaboration and communication between members of the care team

• Focus: Internal medicine patients on telemetry unit and medical surgical unit

• Solution: Collaborative Daily Goal Sheet
Collaborative Daily Goal Sheet

What are the nurse’s primary concern for the patient today?

☐ Diet

☐ Fluid

☐ Pain

☐ Procedure

☐ Blood Sugar

☐ Wounds & Drains

☐ Discharge Plan

☐ Other

☐ Questions?

☐ Next Rounding:

Interdisciplinary Goal/Plan for: ___(today's date)___

Nurse:

________________________________________

Resp. Therapy:

________________________________________

Nutrition/Speech:

________________________________________

PT/OT:

________________________________________

Wound Care:

________________________________________

Consult Team:

________________________________________

Primary Team:

________________________________________

Social Work:

________________________________________
Key Activities and Dates

Pre-Project Surveys
• April 1-11

Kickoff Event
• April 27, April 29, May 1
• 125 staff members trained
• Food, beverages, raffles prizes

Implemented Whiteboards
• May 1-August 1

Post-Project Surveys
• November 2-20
Baseline Data

• Surveys to nurses, physicians, and patients

• Likert items provide insight on the perception of communication between members of the care team

• 65% (56) nurse surveys collected

• 60% (13) internal medicine physician surveys collected

• 13 patient surveys collected

• Goal to bolster collection of patient surveys, re-query physicians and nurses after full implementation
Collaborative Daily Goal Sheet  Compliance

![Graph showing compliance percentage over time from August 2, 2015, to November 1, 2015]
Compliance Rates

Collaborative Daily Goal Sheet Audit
  • RN name, date, plan of care

Average RN compliance rate: 50.89%
  • Lowest: 28.6%
  • Highest: 75%

177 Collaborative Daily Goal Sheets audited between 2 South and 6 North between August and November 2015
Pre & Post-Survey Communication Satisfaction Overview

“Communication between nurses and physicians on this unit is very open.”

![Bar chart showing satisfaction percentages for nurses and physicians before and after a project.](chart)

- **Nurse Satisfaction**
  - Pre-Project: 70% (n=56)
  - Post-Project: 77% (n=55)

- **Physician Satisfaction**
  - Pre-Project: 81% (n=13)
  - Post-Project: 93% (n=14)
Post-Survey Nurse Data

“I regularly write on the Collaborative Daily Goal Sheet to communicate information to the multidisciplinary team.”

- Strongly Disagree: 11%
- Disagree: 26%
- Agree: 37%
- Strongly Agree: 26%

n=39
Post-Survey Nurse Data

“The Collaborative Daily Goal Sheet promotes communication between the patient and multidisciplinary team.”

- Strongly Disagree: 11%
- Disagree: 23%
- Agree: 29%
- Strongly Agree: 37%

n=35
Nurse Survey Comments

Disagree:

• “I think it’s a good way to communicate with the patient IF all the teams used it.”
• “Not utilized by primary team or ancillary service.”
• “Used mainly to keep patient updated with information and communicating with other staff members who are helping out in the room.”

Agree:

• “Great communication method, but I feel like it’s only nurses that use them.”
• “Excellent way for nurses to provide info to patients and family.”
• “At times, whiteboards are difficult to clean [...] making new information written down hard for the patient to read.”
"I regularly write on the Collaborative Daily Goal Sheet to communicate information to the multidisciplinary team."

- Strongly Disagree: 31%
- Disagree: 61%
- Agree: 8%
- Strongly Agree: 0%

n=13
“The Collaborative Daily Goal Sheet promotes communication between the patient and multidisciplinary team.”

- Strongly Disagree: 23%
- Disagree: 15%
- Agree: 62%

n=13
Physician Survey Comments

Disagree:

• "When I want to write things, I often lose time tracking down whiteboard markers."
• "It’s a great idea, but I’ve often noticed that because we do ‘table rounds’ and not in-person rounds with patients, we aren’t able to go back and write the plan on the whiteboard."

Agree:

• "Helpful though for nurses to communicate times of appointments/procedures [...] but the nurse will have written the time on the whiteboard."
Fiscal Impact

TRICARE Inpatient Satisfaction Survey (TRISS)

• Survey measures beneficiary user satisfaction with their inpatient experience

• Military healthcare organizations are rewarded monetarily for performance scores exceeding established benchmarks

• Reviewed quarterly
## Fiscal Impact

<table>
<thead>
<tr>
<th>Incentivized Questions</th>
<th>Qtr 2 (Pre-Proj)</th>
<th>Qtr 3 (Proj Implementation)</th>
<th>Qtr 4 (Post-Proj)</th>
<th>TRISS Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse Listened</td>
<td>78.1%</td>
<td>77.9%</td>
<td>80.5%</td>
<td>85.9%</td>
</tr>
<tr>
<td>Good Staff Communication</td>
<td>62.7%</td>
<td>63.5%</td>
<td>65.4%</td>
<td>68.1%</td>
</tr>
</tbody>
</table>

- This increase in performance was not enough for a monetary reimbursement

- If the upward trend continues and exceeds the TRISS targets, there would be a distribution of $30,000 or more to the organization
Key Challenges/Barriers

• Delay in grant funding process
• Delay in printing whiteboards
• Lack of physician participation despite encouragement
• Physician education and training
• Administrative time for group work
• High volume of patient turnover with minimum staff
• Surveys (low return rate)
• TRISS results timing
Unintended Positive Outcomes

• Use of whiteboards from interdisciplinary teams (PT/OT, social work, RT, wound care, other primary teams)

• Visual attraction of new whiteboards

• Project improved work environment morale (swag, raffle prizes)

• Consideration for Army Medical Department whiteboard standardization
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QUESTIONS

STOP!
Collaborate & Listen

AACN CSI Academy
Clinical Scene Investigator

AMERICAN ASSOCIATION of CRITICAL-CARE NURSES

MADIGAN Army Medical Medical Center