Success Through Inter-professional Collaboration

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Purpose: Create an inter-professional unit practice council.

Background: 6NE is a high-acuity, high-volume medicine, cardiology acute care unit. It is a dynamic environment with a diverse patient population that introduces new challenges and opportunities for inter-professional collaboration. The 6NE unit practice council (UPC) previously consisted of 6 staff nurses, with the goal of supporting nursing practice. In the fall of 2015, the group expanded to include a physician, an operations supervisor and a patient care technician (PCT) from the unit. The goal with this is to leverage a culture of collaboration and to improve patient care outcomes.

Description: Using the UWMC practice model, we focused on the following three domains: professionalism, culture of inquiry and exemplary clinical practice. Professionalism: we promoted transformational leadership by collaborating with the physician member to create peer-to-peer education at quarterly staff education days. Culture of inquiry: we worked with PCT member to create unit based projects including reduction of staff and patient injuries by removing “blue pads” from beds, and increasing daily weights project. Exemplary clinical practice: PCTs and RNs contributed to the design of a project to reduce patient falls and increase patient and staff satisfaction by implementing safety rounds.

Outcomes- Professionalism: We increased med-surg certification rates with 100% of UPC nurses now certified, a 50% increase in the last year. Of our unit staff, 5 eligible staff have become certified. Additionally, 74% of RNs responding to recent survey reported feeling more prepared to present to providers during SIBR rounds (Structured Inter-professional Bedside Rounding). Culture of inquiry: 6NE had 6 staff injuries in the 12 month period leading up to implementation of removal of blue pads. In the first 5 months since implementation, there has been only 1 staff injury. Patient injuries related to shearing continue to be zero based on most recent Pressure Injury Prevalence data. Currently 6NE is working on a daily weight project with the goal to improve the rate of daily weights from the current baseline of 66%. In the 6 months leading up to implementation of safety rounds project, 6NE had 3 patient falls with injury. Since implementation, 6NE has had 0 patient falls with injury.

Conclusion: Our expanded practice council has allowed us to leverage the unique expertise of its members to empower our peers to improve patient and staff outcomes. Additionally, it has given 6NE a stronger voice in the UWMC shared leadership structure, which includes the LPC and PPC. With the success of current projects and initiatives, for the future it is our goal to increase our certification rate of eligible floor staff to 80%, to increase our daily weight documentation to 80%, to have zero staff injuries related to mobilizing patients, and continue to have zero falls with injury.

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