Implementing a New Patient Care Delivery Model to Improve Staff Satisfaction on an Acute Care Unit

Janto, Sophie; Al-Ghizi, Tanya; Pham, Trang; Harborview Medical Center; Seattle, WA

**Purpose:** To improve staff satisfaction and improve morale by implementing an innovative and creative teamwork-based Patient Care Delivery (PCD) model.

**Background/Significance:** 3EH is a 30 bed cardiac/renal/telemetry unit at Harborview Medical Center. Based on the 2014 National Database for Nursing Quality Indicators (NDNQI) employee engagement survey, and qualitative data gathered through informal leadership rounding on staff, staff morale was determined to be low. Staff indicated that communication between Registered Nurses (RNs) and Hospital Assistants (HAs) was poor. RNs felt that their nursing skills, including assessment, and education were not being optimized as they were performing excessive amounts of personal hygiene care, ambulation, intake and output documentation, and other tasks that HAs are qualified to perform. HAs did not feel valued or part of the care team. In order to improve patient-centered care, teamwork, value-added processes, and safe and reliable care, a new care delivery system was implemented. By improving these indicators, overall staff satisfaction was expected to improve.

**Description:** The unit was divided into four geographic “pods” (A, B, C, D), each consisting of five rooms in “line of sight”. Each pod was staffed by two RNs and one HA. To remain budget neutral, the day shift staffing matrix was adjusted by decreasing the number of RNs from nine to eight and increasing the number of HAs from two to four. Patient assignments were made based on the geographic location of patients. This allowed the RNs and HA within each pod to “huddle” in the first hour of the shift to discuss care needs and to develop individualized care plans.

**Evaluation and Outcomes:** Data collected through surveying the staff six months after implementation of the PCD model showed 76% of staff thought that communication with HAs improved. 79% of staff reported that they “usually” were able to work at the top of their license, and 72% of staff reported overall improved staff satisfaction. Data from NDNQI survey showed an increase of 4.76% from 2014 to 2015 in the question of “Adequate support services allow me to spend time with patients”. While the primary goal of PCD model was to improve staff satisfaction and morale, other positive outcomes such as increased response times, increased meal consumption/I &O documentation, and decreased in falls were also achieved.

**Conclusions:** The pod based patient care delivery model was successful at improving staff satisfaction and morale. Other positive outcomes such as increased response time, decreased falls, and improved input and output documentation were also achieved.

**Contact:** sophiej2@u.washington.edu