

Prioritization, Accountability and Engagement: Programmatic Strategies for all Three to Impact Patient Safety

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Transitional Trauma Unit (TTU) Staff Members Lehigh Valley Health Network, Allentown, PA

Background

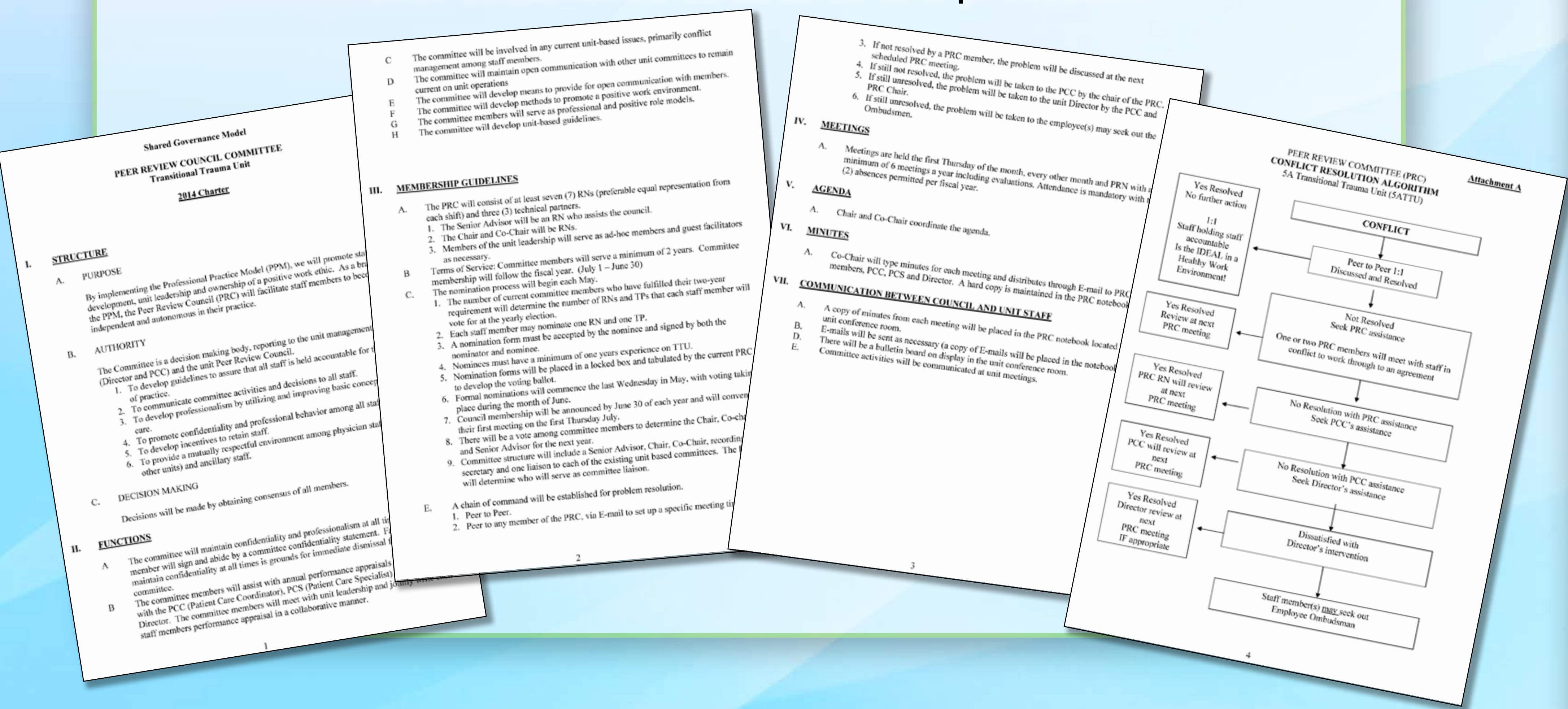
Magnet™ designated organizations must demonstrate unit-level nurse sensitive clinical indicator data outperform the mean or median of a national database, for the majority of units, the majority of the time. Two such required indicators are falls and hospital acquired pressure ulcers. Staff from a 24-bed medical-surgical transitional trauma unit (TTU) recognized the need to PRIORITIZE actions to improve patient outcomes by decreasing fall and pressure ulcer rates.

Prioritization

- Chief Nursing Officer to clinical nurses:
- Aligned and incentivized goals upon which salary increases were based.
- Percent reductions in nurse sensitive clinical indicators
- Decrease in falls with injury by 20%
 - Decrease in pressure ulcers by 15%

Accountability

Strong Unit Shared Governance Model
with established structures and processes



Bundled Actions

An Evidence-Based Plan

- Education Blitz
- Twice daily quality huddles - identify unit population-specific risk factors
- Transparency of data - publically displayed visibility boards
- Real-time communication of outcomes - prompted ongoing analysis and modification of strategies and actions

Outcomes



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