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ROADMAP...Setting the Course for Patient and Family Involvement in Their Plan of Care (Poster)

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ROADMAP...Setting the Course for Patient and Family Involvement in Their Plan of Care

Lehigh Valley Health Network, Allentown, Pennsylvania

PROJECT GOAL:

Design an electronic daily plan of care that incorporates standard work CONCEPTUAL FRAMEWORK: Patient Centered Care, as defined by the Picker Institute

Pre-Project Current State

- Patient Perceptions
 - Not being informed
 - Inconsistent communication to patient and family regarding plan of care
- Opportunity to improve patient satisfaction scores for 'discharge preparation' and 'communication of information'
- Prototype document that was awarded Magnet PrizeTM -Abington Memorial Hospital Daily CARE Plan



Methods

Project Team Members

- Chief Nursing Officer (CNO) Sponsor
- Nursing Informatics Manager Co-leader
- Staff Development Specialist Co-leader
- Interprofessional stakeholders, including direct care nurses

Content Development

Gemba

 Japanese term for 'actual place;' the setting where work takes place

Gemba Walks

- Interviews of patients, families and caregivers throughout hospital
- Patient and Family Advisory Council
- Patient Centered Experience Implementation Team

Decision Points

- Paper or electronic report???
- Vendor selection

leview of All My Daily Medical Actions and Plans Allentown, PA Lehigh Valley Hospital-Muhlehberg Reason I'm here: Doctors in charge of my care Other care team members: Questions I want to ask my care team What I need to do and learn about today

Ask your physician or case manager for further assistance

Final Product

References:

- Edgman-Levitan S., Cleary P.D. What information do consumers want and need? Health Affairs; 15:42-56, Winter, 1996. Mooney, B. Simplicity wins a prize. Advance for Nurses, 11:8(10); 2009.
- Shook, J. Managing to learn: using the A3 management process to solve problems, gain agreement, mentor, and lead. Cambridge, MA. The Lean Enterprise Institute. 2008.

Standard Work for Implementation

- Explained at time of admission
- Folder and pen provided
- Printed daily, prior to bedside shift report
- Reviewed with patient and family
 - During RN change of shift bedside report
 - Upon change in plan of care

Implementation and Outcomes

- Piloted on 30 bed med-surg unit
 - Pre- and post-implementation RN surveys on pilot unit
 - Patient Satisfaction Scores
 - Extent felt ready for discharge
 - Information to family regarding tests and treatment
- Expanded to all med-surg and step-down units
- Qualitative comments from patients and families consistently and unanimously enthusiastic!

Lessons Learned

- Identification as a Network priority project prompted support
- CNO as sponsor helped remove barriers
- Continuous reinforcement of standard work and staff accountability was necessary
- Going to the gemba was critical to success

A PASSION FOR BETTER MEDICINE."

