

BREAKING THE MATRIX WHILE FOSTERING AN ALL RN CARE MODEL

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PROBLEM STATEMENT

Nursing care delivery models significantly impact patient outcomes and nursing job satisfaction. On a medical-surgical unit, a highly engaged team posed a question to improve staffing ratios, patient safety, and educational development. With a nurse to patient ratio of 1:6 the growing number of high acuity patients in the hospital became difficult to manage. A proposal for an All Registered Nurse (RN) Care Model was applied with an emergence to solve a problem while evaluating the matrix. This unit transitioned from a Functional Care Model consisting of registered nurses and unlicensed assistive personnel (UAP), to an All RN Care Model eliminating the use of UAP.



OBJECTIVES

Several specific objectives stood out when considering the progression for this proposal including: a reduction in nurse to patient ratios, fall rates, and hospital acquired conditions. Other objectives included improvement of patient education, outcomes, responsiveness, and overall improvement in nurse job satisfaction.



METHOD

A review of historical data including staffing models, patient average length of stay, quality metrics, case mix index with diagnosis related groups, and organizational readiness is analyzed. In April 2017 the unit shared governance council, leadership, and hospital leadership strategized a plan to transition the matrix to a 1:3 or 1:4 all RN to patient ratio and the UAP were transitioned within the organization. Each shift consists of total care provided by a dedicated RN and RN care partner. Promotion of teamwork and support are displayed throughout the unit. An acuity table (Figure A) is formulated to categorize patients as medical-surgical or progressive; the table includes frequency of nursing interventions, oxygenation status, wound care, post-op complications, etc. Patient assignments are based on daily review of the acuity table submitted by the RN. Charge nurse ability to create a manageable assignment is vital throughout the transition and is reviewed as needed. The unit shared governance council remains open to suggestions and improvements at monthly meetings.

Nurse Assessment/ Intervention Item Every 1-3 Hours	Room #		
	5	5	5
Respiratory Compromise – Oxygen 71%-88%, pulmonary hygiene	✓		
Monitoring/ assessment requiring intervention	✓		
Monitoring vital signs, neuro signs, tissue perfusion			✓
Post-procedure/ surgical monitoring/ intervention			✓
IV medications requiring nursing assessment			
Patient Status: (P) progressive, (MS) medical-surgical	P	P	M S

Figure A: Example of acuity table

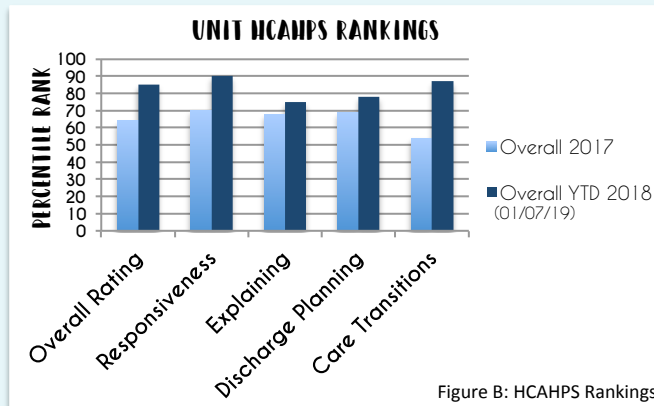


Figure B: HCAHPS Rankings

DISCUSSION

Increases in HCAHPS scores after April 2017 have proven that success is apparent from the patient perspective. (Figure B). There is improvement in the nurse-sensitive indicators CAUTI and MRSA. There is no change in CLABSI, C. diff, VRE, and falls, however these rates remain low. The employee satisfaction survey resulted in a significant increase regarding manageable workload, improved work processes, and quality being the top priority (Figure C).

Employee Satisfaction Survey		
Item	Current Result	Change from April 2017
We have enough people in my work group to handle the workload.	57%	+27
Our work processes have shown improvement over the past 12 months.	83%	+20
Day-to-day decisions/activities demonstrated that quality is a top priority.	86%	+16

Figure C: Employee Satisfaction Survey

CONCLUSION

The All RN Care Model maximizes the potential for nursing assessment, implementation, autonomy, critical thinking, evaluation, and revision as the highest in quality care. A reduction in staffing ratios has enhanced patient interaction and education. A monthly review of empirical outcomes and patient satisfaction is acknowledged for continued improvement. Evidence shows that the All RN Care Model results in improved patient outcomes as well as higher patient and nurse satisfaction.



Fantastic 5 North Surgical Progressive Care Unit celebrates staff through team building activities and a picnic at the park!