

Minimizing the Chaos of Change

Employing staff training to reduce stress and maximize adoption

In the summer of 2015, Good Samaritan in Vincennes, Indiana planned to open the new Gibault Memorial Tower. This tower was built to house the inpatient units which meant that the inpatient units would all be moved. Leadership knew that staff would face increased stress, and prepared for it. Guest speakers presented topics related to moving a hospital and stress management. Education plans were developed on progressive schedules to minimize stress loads on staff. Communication and information was continuous to keep Good Samaritan running smoothly during transitions.

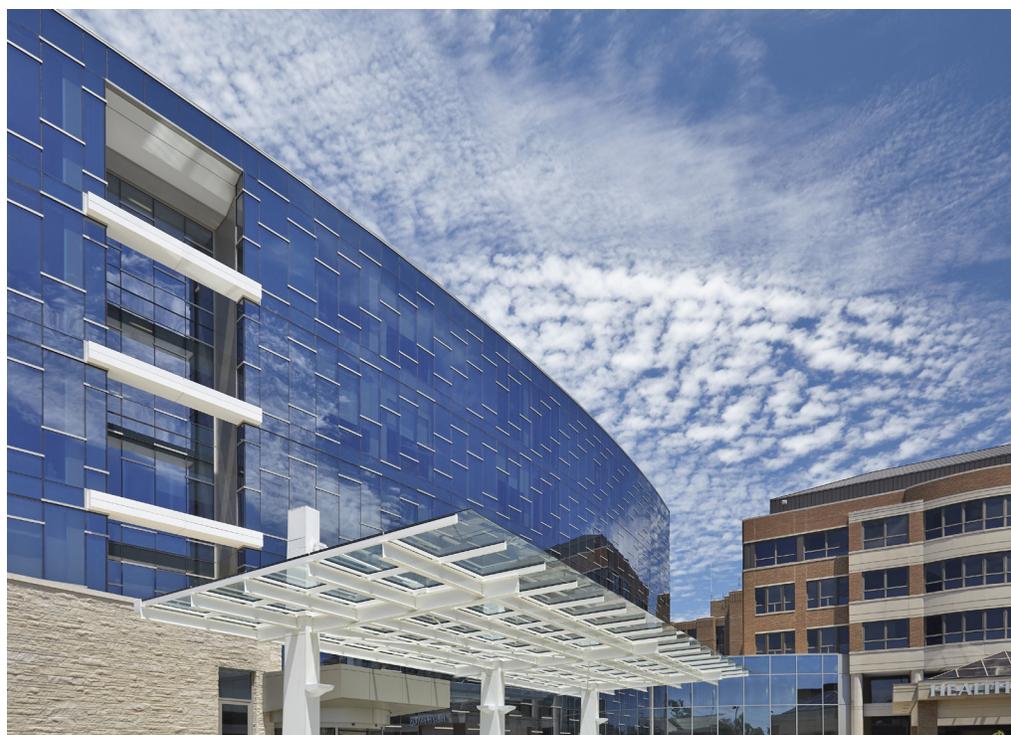
With that single but major move, 232-bed Good Samaritan introduced clinical staff to new floors, new units, and new processes and technologies, including the Responder 5 critical communications solution. Along with Responder 5, the hospital also integrated new mobile phones and new staff RTLS badges – technology never before used by staff.

“With changes of this magnitude, we knew we faced the potential for chaos,” said Jamie Frederick, RN, BSN Good Samaritan’s Nursing Professional Development Specialist. “We implemented a strategic training plan to manage and minimize the chaos. Our detailed, phased training program helped us prepare not only the clinical staff, but the related ancillary staff including EVS, pharmacy, radiology, therapy and transport.”

PREVIOUS SYSTEM

Before the new technologies were put in place, Good Samaritan was wrestling with an older ‘call bell’ system that simply sent patient calls to a central nursing station.

“The old system was literally what it said, a ‘call bell’ that went to the unit desk and required locating someone to respond,” said Jenny Shrum, RN, BSN, Good Samaritan’s



Nursing Professional Development Specialist. “That process added steps for the nurses to determine the reason for the call, then responding to get what was needed by the patient – all of which added delay to the response time. We weren’t getting good scores for patient satisfaction, and we had no data on calls, responses, or delivery of care to make changes.”

WORKFLOW DESIGN

While construction was still under way, the Good Samaritan Clinical Informatics and Education Department were already working on designing the processes and programs needed in training each unit and related staff.

“We wanted to standardize workflows as best as we could across the floors and the units to provide consistency and make transitions easier

“The new Responder system saved us tremendous amounts of time and made the units function much more efficiently.”

Jamie Frederick, RN, BSN, Good Samaritan Nursing Professional Development Specialist



Responder® Elements & Integrations

- Staff Terminals and Workflows (standardized)
- EVS
- Staff Assist
- Rounding
- Respiratory
- Transport
- Pain Assessment
- Staff Alert
- Fall Risk
- Procedure in Place (privacy)
- Family Requests
- Corridor Light integration
- Pillow Speakers (Pain, Water, Toilet buttons)
- RTLS integration
- Direct Connect

for our ‘floating’ staff,” said Alyssa Honaker, RN, Clinical Informatics Nurse.

Rauland’s distributor, South Western Communications, guided Good Samaritan (SWC) by conducting extensive needs assessments to review workflows and processes. Once they understood the desired processes, SWC advised the team on “best practices” and made recommendations for each unit/specialty: MedSurg, OB, Oncology, Hospice, ICU, CDU and Surgery.

“The unit with the greatest variation is the OB unit, because of the unique needs and the workflows it has that other units don’t need,” pointed out Pam Anderson, RN, Clinical Informatics Nurse.

Once specific workflows were approved for each unit’s staff terminal layout, training was prepared and schedules made based on the planned moves into the new areas.

TRAINING PLAN: A PHASED APPROACH

A phased learning approach integrated a number of training methods, including way finding, staff terminal instruction, phone and badge use, and an overview of how all of the systems work together for improved communications and workflow.

The lesson plan included:

- Familiarization Tour -where are the rooms, the supplies, the lounge
- Discovery scenarios - hands-on, ‘scavenger hunt’
 - Helped with learning, seeing the interaction of the systems and understanding the results of integrating Responder/phones/TLS processes in a single solution loop
- Focused on specific workflows/processes, need for it, and why/when to use it.

“For each unit, we first educated ‘super users’ – the managers and shift coordinators or appointed staff – in classroom style training,” said Frederick. “Then we moved on to train the staff, using a phased training approach with unit staff.”

During the initial on-unit training, in groups of approximately 8 nurses and 4 ancillary staff, sessions within the new patient rooms allowed staff to see, touch and use the new Responder

nurse call system, familiarize themselves with the staff terminal and workflow processes, and how to use them in controlled situations.

Nursing staff then moved on to interactive hands-on use of Responder 5 software tools within the new unit, mirroring their daily activities from sign-on to logging off duty at the end of shift. The additional training also encompassed how to assign phones and tags, as well as how to make their patient assignments across systems.

Hands-on training was supplemented with short videos on routines/functions, and user-friendly manuals designed and provided by Rauland’s distributor SWC that further explained how to use the Responder 5 system.

Training also included scripts for staff to use when instructing family members on workflow buttons on the staff terminals that were specially programmed for family use. These buttons provide a way for family members to communicate needs easily without leaving the patient’s bedside.

GAME INTEGRATION

“We created a ‘scavenger hunt’ that allowed staff to act out scenarios and get hands-on use of the new Responder staff terminals, starting and completing workflows, and responding to patient needs,” said Frederick. The training involved scenarios specific to the unit that allowed staff to work with the staff terminals, using the buttons to initiate related processes, and then way-finding to get the tools needed to complete the tasks.

GETTING A RESPONSE

By the end of training, staff was comfortable with the new system, fearlessly pressing buttons on the staff terminal to initiate workflows and processes. “They understood the underlying communication process,” said Frederick, “and had some hands-on experience. They knew that a direct response by ancillary staff or team members would occur from that button press.”

BENEFITS ACHIEVED

As a result of the phased training, related staff coverage, and the hands-on implementation, a number of benefits were quickly achieved at Good Samaritan and potential chaos avoided, Frederick added.

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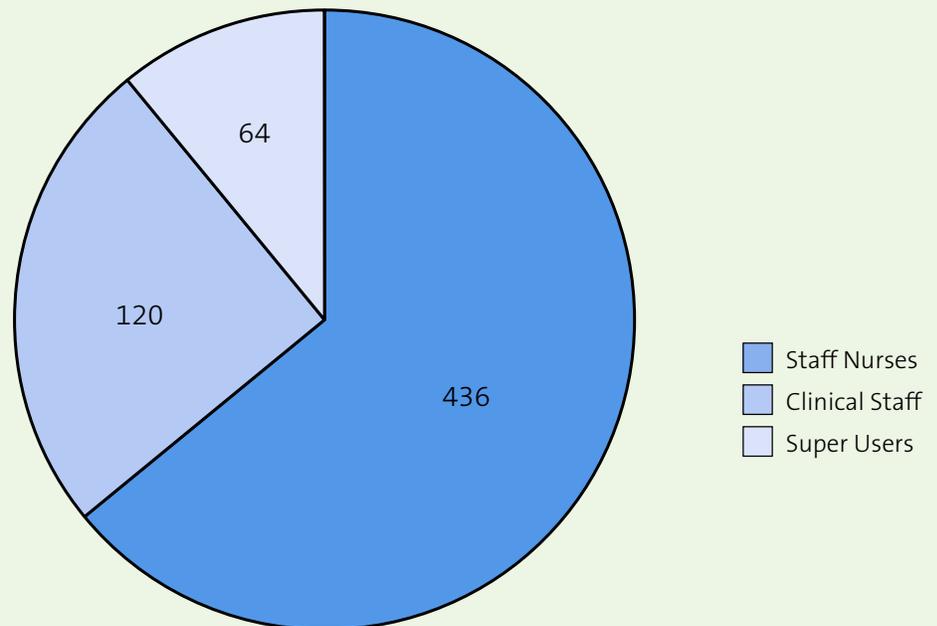
SYSTEM BENEFITS

- √ Stress over the introduction of staff terminals in the patient rooms was greatly reduced. Staff quickly integrated the new processes and workflows into daily care.
- √ Responder 5's integration with staff phones and badges has greatly improved workflows – and staff and patient satisfaction
- √ Ability to quickly identify staffing and locations on the PC console is saving tremendous time in reaching staff, determining who is on-duty, staff assignments, and how to find them
- √ Call escalations are immediately going to the right level of staff via the patient's pillow speaker and/or the family terminal screen in the room -- saving steps , and delivering better time management and workflows
- √ Better prioritization of calls, avoiding the need for unit secretaries to triage each and every patient call
- √ Corridor lights have removed clutter and provided a cleaner, more focused environment within the units – eliminating paper stickers and flags at each room entry
- √ Corridor lights and direct calls to staff members has decreased the noise levels on the units

“We can already see the system is helping manage patient pain better by using the rounding feature and the ability of patients to notify the nurse directly,” said Shrum.

Pharmacy, too, is plugged in to the new system for better communications and workflow with clinicians. Ancillary staff carry phones to make it easier for them to interact with other staff and monitor rooms status.

TRAINING OVERVIEW: TOTAL TRAINED 600+



USER-FRIENDLY REPORTING

Reports from Responder are delivering tremendous amounts of detail and data for nurse managers to use in balancing workloads and staffing levels, and in monitoring and improving the delivery of patient care.

All nurse managers were trained on the reporting feature as part of the move to the new tower and systems, with Rauland's distributor SWC blocking time with each manager to review routine reporting on:

- Rounding
- Response times
- Types of calls
- # of calls per shift/ staff
- Time in room
- # times in room

“We find the reporting to be very user friendly,” said Frederick. “Family concerns can be addressed with actual data that verifies the delivery of care, the nurse presence in room, and the frequency. The staff really value the ability to provide confirmation of the care delivered.”

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Good Samaritan

About Good Samaritan

A health care leader in southwestern Indiana and southeastern Illinois for more than 100 years, Good Samaritan is a 232-bed community health-care facility with more than 1,900 employees. Good Samaritan offers a broad range of medical services as well as some of the most progressive technology available today, including an Imaging Center, Heart Center and Same-Day Surgery Center.



About Rauland

Rauland-Borg is a respected global leader in the design and delivery of advanced communications, workflow and life-safety solutions for hospitals worldwide, with installations in more than 4,000 hospitals in 40 countries.



About Responder®

Responder® communication and nurse call systems help staff deliver the best possible patient care, with fast, direct patient-to-staff and staff-to-staff communication, flexible integrations, intelligent call routing and real-time reporting.



About SWC

South Western Communications, SWC, delivers communication, physical security and life safety solutions to meet the needs of Healthcare, Education, and Detention customers across Indiana, Kentucky, Georgia, Mississippi and Tennessee. SWC's consultative approach and in-depth needs analysis coupled with best in class product offerings create an integrated solution, ensuring satisfaction and flawless integration.



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