“TAKE 5”
Fairview Hospital

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Background

• Fairview Hospital PEDIATRICS is a 24 bed community based medical surgical unit. Primary diagnoses includes, but are not limited to, respiratory conditions, management of dehydration, fever in newborns, postoperative care of surgical patients and the treatment and management of viral or bacterial processes. Patient age ranges from newborn through 20 years of age.

• The unit staff consists of 21 RNs (6 of which are professional Certified Pediatric Nurses), 1 LPN, 3 Patient Care Assistants, 4 Secretaries and 7 Child Life Specialists.

• Family-Centered Care is the foundation of our practice. We believe that each child is unique and an integral part of a family unit. Families are involved throughout the course of their child's hospital stay and are considered valued partners in the nurse patient relationship.
The purpose of this Quality Improvement project is to enhance relationship-based care by maximizing nurse-patient/family communication and improve patient/family satisfaction.

► Cleveland Clinic nurses have chosen Marie Manthey’s “Relationship-Based Care” as the model of care that drives our bedside practice.

► According to research by Press Ganey Associates Inc., “the nurse patient relationship, sets the tone of the care experience and has a powerful impact on patient satisfaction.” (The Nurse Patient Relationship, 2012)

► Based on 2007 CAHPS and Press Ganey Survey data, Press Ganey identified “Nurse Communication” as the factor with the greatest impact on patients’ overall ratings of their hospital experience. (The Nurse Patient Relationship, 2012)
Methodology

To improve communication between nurses and patient/families the pediatric nurses initiated “Take 5”:

• “Take 5” is a process where the nurse SITS down with the patient/family during the beginning of the shift and connects with them.
  – Research shows if you sit down and speak to patients/families eye-to-eye they feel you spend more time with them—even if the amount of time you spend is the same. (Friedel, Linda, 2012)

• The nurse shares her plan of care for the upcoming shift and asks them for their goals and expectations.
  – The family’s plan might not be the same as the nursing plan.

• In addition, the nurse asks if there is anything we could do to make their hospital stay easier.
  – Having a child hospitalized is a stressful event for parents/families
TEACHING TOOLS

- Presentation to staff (outline displayed)
- Handout with process explained/reviewed
- Poster of Relationship Based Care used as a reference
Relationship Based Care Teaching Outline

- **Definition**: RBC is a practice model that empowers nurses to place first priority on why they entered the health care profession in the first place – to impact lives and help people

I. Three Key Relationships
II. Outcomes
III. Examples
IV. Reflection
“TAKE 5”

At some point, during the beginning of your shift, take 5 minutes to talk with and connect with the patient and their family.

**Process:**
1. Introduce self
2. Share the nursing plan of care for the shift.
3. Ask about what they specifically would like to happen over the upcoming shift (remember that the family's plan might not be the same as the nursing plan)
4. Ask about their goals and expectations of care, Is there anything that we could do to make their hospital stay easier.

**Guidelines:**
1. Sit down and speak with them, eye-eye. (research shows if you sit down and speak to the them eye-to-eye patients feel you spend more time with them-even if the amount of time you spend is the same)
2. Time should be uninterrupted and not while doing other things if possible.
3. Document your "Take 5" with a "5" next to your initials on the hourly round sheet

*Communicating with patients and their families is as vital as vital signs!*
Relationship Based Care is comprised of three crucial relationships:

- The relationship with patients and families
- The relationship with themselves
- The relationship with colleagues

**ROLE OF THE NURSE...**

**Teacher:** the nurse educates patients and families to safely care for themselves both in the healthcare setting and after they leave the hospital.

**Healer:** the nurse establishes a caring relationship with the patient and family and assures that they receive physical, emotional, and spiritual care based on an assessment of their needs.

**Collaborator:** the nurse works with each member of the healthcare team to coordinate the patient's plan of care and assure positive collaboration.

**Guide:** the nurse clarifies confusing health issues, explains procedures, and ensures that patients and their families are informed enough to make decisions about their care.

**Leader:** the nurse advocates for the patient, and makes changes that enhance the care for patients and families.

Follow the path to great outcomes...
PROCESS

• Presentation to staff on Relationship-Based Care at unit Shared Governance meeting and poster display. (June 2012)
• Presentation to staff on “Take 5” at unit Shared Governance meeting. (July 2012)
• “Take 5” teaching tool distributed to all staff. Individualized explanation was given to anyone unable to attend presentation. (July 2012)
• “Take 5” started. (August 2012)
• Nurses would document their “Take 5” by noting a “5” on the patients hourly rounding log.
• “5”s were posted around the unit to serve as reminders
Nursing Implications

- Communication between nurses, patients and their families is crucial to providing quality patient care and improving patient satisfaction.
- “Take 5” has become an effective tool to enhance communication with families and promote a therapeutic relationship.
- This technique can be easily adapted for other patient populations to improve care, patient/family satisfaction and ultimately employee satisfaction by empowering nurses to be advocates for their patients/families.
- “Take 5” is here to stay!
Outcomes

• Compliancy among the nursing staff as been successful and “Take 5” is executed on every shift in an effective manner. Outcomes of this initiative have been focused on Press Ganey scores and family responses.

• Based on the Press Ganey Survey, patient satisfaction scores have steadily improved from second quarter 2012, when “Take 5” teaching initiatives began. Overall Assessment scores went from 46% second quarter 2012 to 95% first quarter 2013. Nursing Care scores rose from 63% second quarter 2012 to 90% first quarter 2013.

• Anecdotal evidence from patients and families show positive feedback and gratefulness for being included in the plan of care. One of our patient’s mothers when asked what she would like to see happen for her baby said: “I just want my baby to be able to sleep!” The staff rearranged taking vital signs to after breast feeding and the infant was able to have a peaceful rest throughout the night.
Inpatient Pediatrics: Nursing Care

% Very Good

Q1'12 (n=18) = 68%
Q2 (n=14) = 63%
Q3 (n=8) = 89%
Q4 (n=11) = 88%
Q1'13 (n=7) = 90%

90th percentile
References


• Press Ganey Scores. Fairview Hospital June 2012-June 2013.