



Managing the Patient Experience: Driven to Distraction

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Problem and Background

- The nurse work environment is very complex requiring multi-tasking to manage the patient experience. On average, nurses complete 100 tasks per shift, with 3 minutes spent on activity performance before an interruption occurs. Interruptions occur in 53% of observations where medications are administered.¹
- Several changes in the Sentara Healthcare clinical environment created a perfect storm for increased interruptions for nurses as they managed the patient experience. In 2008, Sentara purchased an electronic medical record (EMR), and began to review documentation processes while customizing the EMR.
- Between 2008 and 2011, Sentara implemented the EMR in 8 hospitals and the medical group practices. The EMR introduced several changes in the clinical setting to include managing patient documents with a mobile cart system. At the same time, unit administrative staff were reduced.
- Barcoding for medication administration tracking and communication changes were implemented. Wireless phones were introduced to ensure nurses are in patient rooms, engaged in value added activities with patients and their families.
- Other changes included: plant expansions; nurse call system connected to wireless phones to improve communications; nurse call dome lights for hourly rounding; pain medication assessment; and fall risk and skin rash identification.

Significance

- Interruptions negatively affect patient procedures, work flow, and safety. The emotional atmosphere and interaction between patients and clinicians is disturbed.
- Constant rearranging of priorities, forced by interruptions, are a source of frustration to nurses and may lead to a feeling of being pressed for time resulting in job dissatisfaction, stress-related symptoms, along with poor patient quality and safety.

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Study Aims

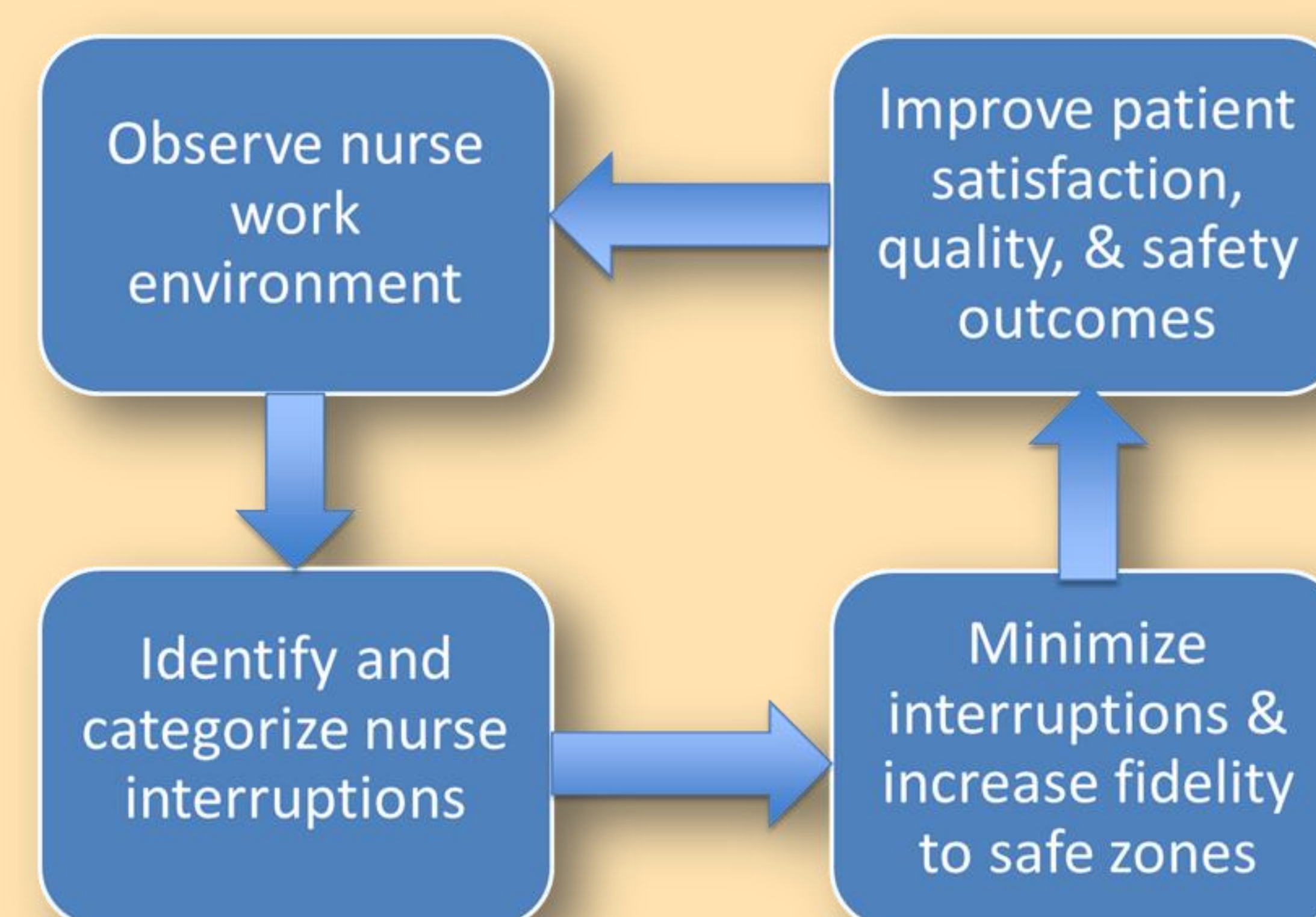
This study aimed to explore interruptions in nurse work environments to improve the patient experience. Research questions included:

1. What are the types of interruptions that occur in the nurse work environment?
2. Do interruptions cluster at specific times during the day?
3. What is the average number of interruptions per hour?
4. What is the average duration of interruptions?

Program

- The Patient and Family Experience Redesign Team was tasked with decreasing interruptions in the nurse work environment as a result of observations during an engagement with Deloitte.
- As shown in Figure 1, the Team decided to review the nurse work environment to identify interruptions and ultimately improve job satisfaction and stress-related symptoms. Changes in nurse work environment and education should minimize interruptions, encourage fidelity to medication safe zones, and improve patient care, quality, and safety.

Figure 1.



Evaluation Strategy

- Sentara conducted a work sample of interruptions occurring in nurse work environments (Figure 1). In April 2013, 36 staff was trained as observers.
- Observations were completed at 10 Sentara hospitals and select free-standing emergency departments. Observations occurred between 7:00 am and 10:00 pm seven days a week.
- All clinical areas were included in data collection. Over 300 staff were interviewed with 200,000 patient encounters observed. Descriptive statistics were used to report findings.

Results

Work sampling observations collect by Sentara revealed the following:

1. Interruption types
 - 15% of interruptions were via the telephone
 - 52% of interruptions were in-person
 - 58% of the in-person interruptions were by other staff members
2. Interruption clusters
 - Interruptions were the highest at 8:00 am, 1:00 pm, 4:00 pm, and 8:00 pm
 - Established medication red zones were breached as interruptions occurred while RNs administered medications at the bedside
3. Interruption frequency
 - Interruptions occurred an average of 9.1 interruptions per hour
4. Interruption duration
 - Most interruptions lasted less than 30 seconds

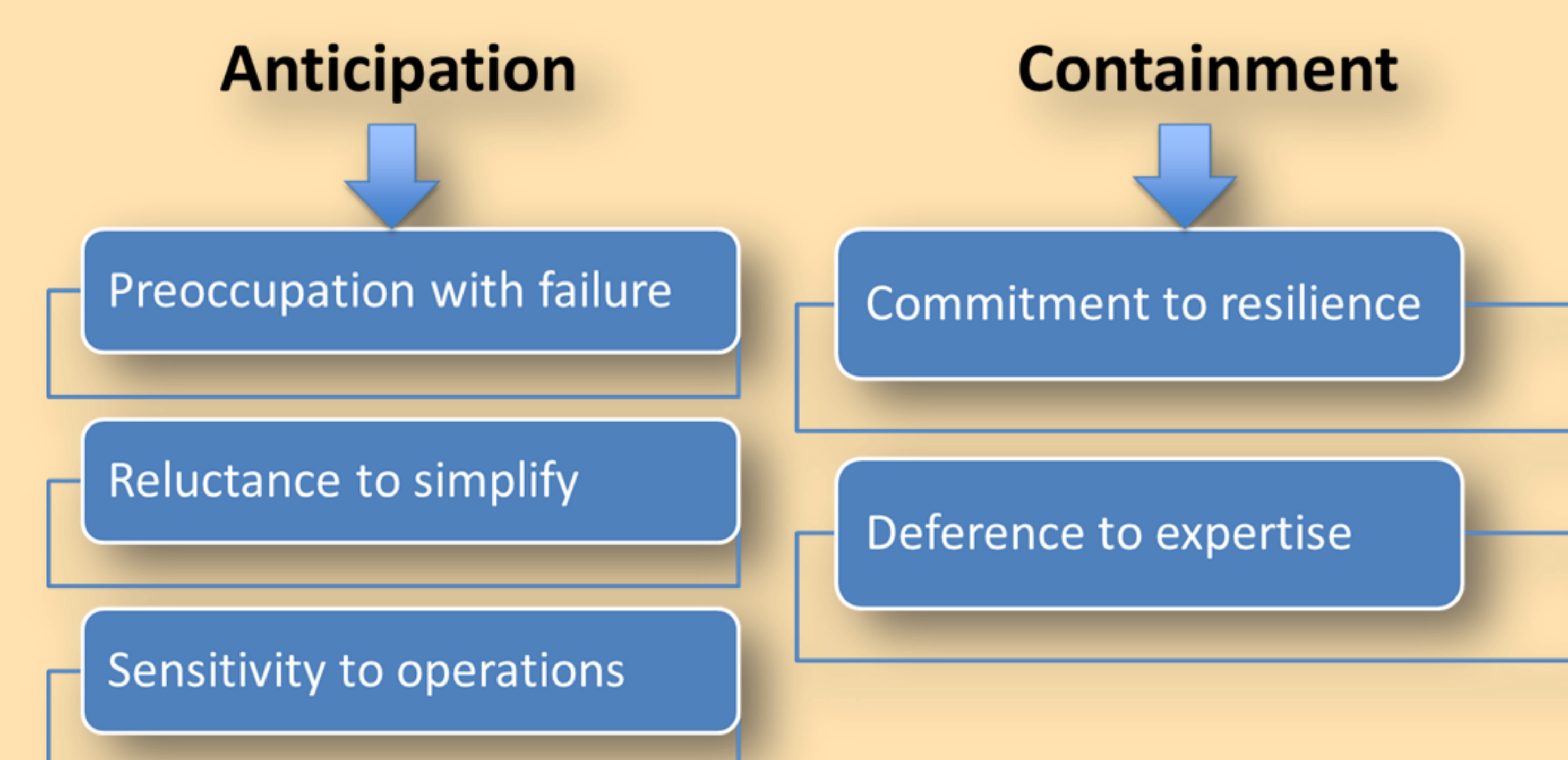
Conclusions and Implications

The Patient and Family Experience Redesign Team created 3 sub-teams to increase awareness around nursing interruptions and ultimately decrease interruptions.

- Educator Team refocused attention on safety practices and fidelity to medication red zones
- Pharmacy Team developed a plan to manage missing medications
- Phone Team evaluated options to send secure texts to providers

The sub-teams integrated mindful organizing² (Figure 2) within the practice setting to detect emerging errors and minimize the adverse consequences of unexpected events.

Figure 2.



References:

¹Sitterding, M.C., Broome, M.E., Everett, L. Q., & Ebright, P (2012). Understanding situation awareness in nursing work: A hybrid concept analysis. *Advances in Nursing Science*, 35(1), 77-92. DOI:10.1097/ANS.0b013e3182450158.

²Weick, K.E., & Sutcliffe, K.M. (2007). *Managing the unexpected: Resilient performance in an age of uncertainty*. (2nd edition). San Francisco: Jossey Bass Publishers