



QUALITY IMPROVEMENT UPDATES
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Annual QI Touchpoint Wrap-Up

- Thank you!
- Best Practices Shared
 - Early Ambulation
 - Carb Rich Drink
 - Presurgical Patient Education
- Tools and Worksheets Developed
 - Emailed after call
 - QI toolbox on MSSIC.org



RCA Worksheets

- 5 Step Process
 1. Gather Patient Information
 2. Evaluate Process
 3. Evaluate Staff Competence
 4. Develop Plans and Goals
 5. Summarize and Share with Stakeholders



Step 1: Gather Patient Information

Step 1: Patient Information											
Patient Name:											
Admission Date:											
Location of Event:											
Surgery Date:											
Surgical Procedure Performed:											
Surgeon:											
Surgery stop time:											
Day of week/time (shift) of event:											
Nursing Leadership to complete/provide:	<table border="1"> <tr> <td>Staffing at time of event:</td> <td></td> </tr> <tr> <td>RNs—Employed</td> <td></td> </tr> <tr> <td>RNs—Travel/Agency</td> <td></td> </tr> <tr> <td>Nursing Assistants</td> <td></td> </tr> <tr> <td>Mobility Aides (if applicable)</td> <td></td> </tr> </table>	Staffing at time of event:		RNs—Employed		RNs—Travel/Agency		Nursing Assistants		Mobility Aides (if applicable)	
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Step 2: Evaluate Process

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Was an order present in the EMR to ambulate patient within 8 hours (or sooner) of surgery end time?	Yes No (consider root cause)
Does your site utilize standing early	Yes No (consider root cause)
ambulation orders/order sets/protocols?	
Can staff easily find the stop time in the EMR?	Yes No (consider root cause)
	If staff can't see the stop time in the <u>EMR</u> how is it communicated to them?

Step 3: Evaluate Staff Competence

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Has staff received education on early ambulation?		Yes—Verbal	<u>Yes—Written</u>	No (consider root cause)
	On hire/Orientation			
	Annually			
	PRN “Just in Time”			



Step 4: Set a Goal and Develop a Plan

Step 4: Action Plan	
PLAN: GOAL:	
PLAN GOAL:	
PLAN GOAL	



Step 5: Identify Trends, Summarize, and Disseminate

Early Ambulation RCA Summary											
	Patient 1	Patient 2	Patient 3	Patient 4	Patient 5	Patient 6	Patient 7	Patient 8	Patient 9	Patient 10	TOTAL
Location											
Day of Week											
Shift											
Type of surgery											
Surgeon											
Check all that apply											
Understaffed											
No order present, not ambulated											
Order present, not ambulated											
Patient refused and education was not provided to them											
Presurgical education incomplete											
Who ambulated patient first? (nursing/rehab)											
Ambulation status not included in shift to shift report											
Surgeon/APP did not inquire about ambulation during post op rounds											



How to use RCA Worksheets

- Spot checks if process sound (above 80% for most metrics)
- Regular checks on all fallouts if improvement needed
 - Weekly recommended, at least monthly
- Incorporate into Performance Improvement Plans
- Share summary with stakeholders
 - Nursing, OR, Office Leadership
 - Keep your surgeon champion(s) and administrative lead in the loop
 - Weekly, monthly, or at least quarterly



Final Thoughts

- Just like our quality process overall, these tools and processes can be constantly evolving—edit them to best meet the needs of your site.
- If there is something we missed, email us and we will add it to our toolbox.
- Again, thank you for sharing your challenges and successes in 2022—we are looking forward to an even better 2023.

