Beth Israel Deaconess Hospital-Milton
EMERGENCY DEPARTMENT TEAM NURSING MODEL

The Problem
From 2010 through 2014, Beth Israel Deaconess Hospital-Milton experienced a 19.6% consistent increase in the number of patients seeking care in its Emergency Department. Additionally, during the first 4 months of FY 2015 – the department has experienced a further increase in patient volume of 8.6% from 2014.

As a result of this increase, hospital and department leadership pro-actively identified the potential for a decrease in the quality and safety of the care it provided, as well as sub-optimal performance related to patient experience. It was also identified that this increased demand could result in challenges to staff retention, meaningful communication and the effectiveness of interdisciplinary relationships.

Aim/Goal
Implement a team nursing care model that would result in a supportive care environment, improve/maintain effective staff communication and relationships, quality, safety and experience of provided care, and more rapidly address patient needs, including timely departmental patient flow.

The Team
- Phillipa Breslin: RN, Nurse Manager, Emergency Services
- Valerie Blathras, BSN, RN, Assistant Nurse Manager, Emergency Services
- Kerry Ehrstein, BSN, RN Emergency Department
- Karen McLaughlin, MSN, RN, Emergency Department
- Lynn Cronin, MSN, RN, CNL, VP Nursing/CNO

The Interventions (Select Actions Taken)
- Starting in November 2014, patients are now assigned to primary nurses working within geographic nursing teams – rather than exclusively to individual RN’s
- Teams are comprised of staff of varying experience and skills, where the team leader assumes the mentoring role to the less experienced team member
- Standardization of various procedures, including hand-off communication and transfer processes
- Handoff communication occurs between caregivers of equal or higher levels of knowledge, skills and experience to meet patient continuing care requirements
- Patients and family members are involved in handoff communication and information sharing when appropriate
- Staff training to new procedures

The Results/Progress to Date

Lessons Learned
- Despite increased patient volume from 2012 to 2015, patient experience metrics have been maintained. Top box scores place BID-Milton’s ED in the top quarter nationally.
- Team members have complementary skills that have resulted in a greater synergy between care providers and coordination of effort
- Team members feel more supported in their roles by other team members

Next Steps/What Should Happen Next
- Ongoing assessment of staff feedback, including evaluating proposals for further model refinements
- Identify and track additional comprehensive metrics that measures impact of new nursing model, including:
  - Nursing specific patient experience metrics
  - Quality and safety outcomes
  - Employee engagement (survey scheduled for Spring 2015)

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