

Using Peer Champions for Validation

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RESOURCES

- Bedside Report/Purposeful Rounding Validation Tool

https://drive.google.com/file/d/12ocrl0Ab517W859W_nzlU17sla58EHg9/view?usp=sharing

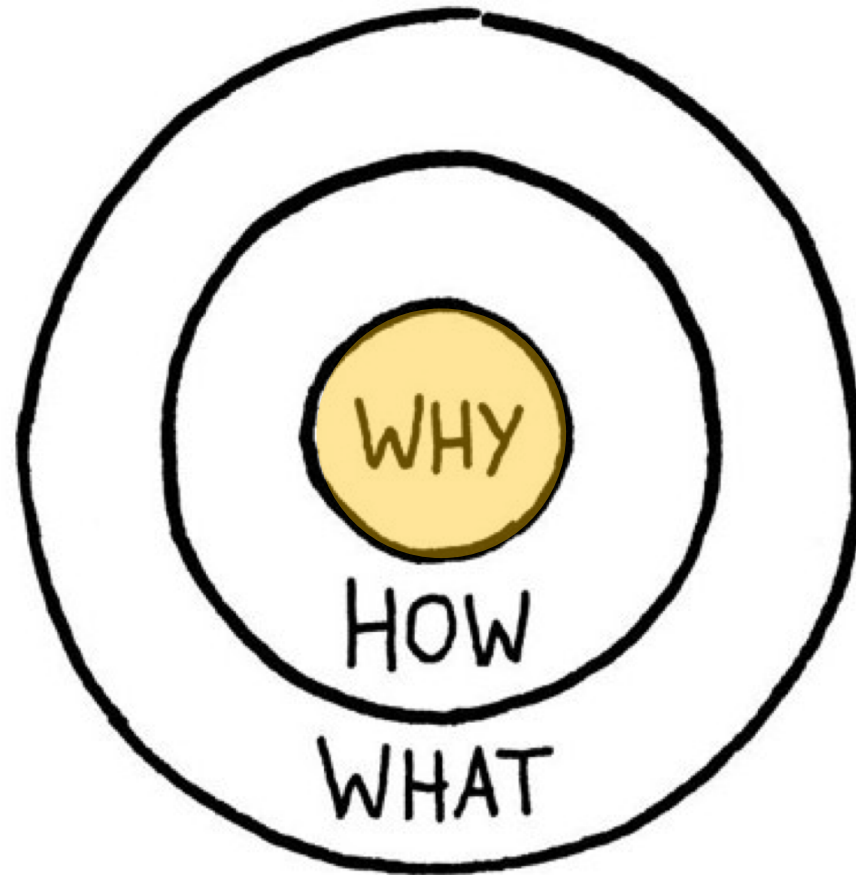
- Validation Worksheet Template

https://drive.google.com/file/d/1_PBoOYjoE-fhtW_cy5IRgXlnUwcftqfb/view?usp=sharing

- SOLUTION – Validation Rounding

https://drive.google.com/file/d/1_9YUc5tXn-yXDwx0TAjY7JsWomXn1VFq/view?usp=sharing

The “WHY”



The “WHY”

Leaders cannot do it all – especially when it comes to validating change



The “WHY”

You want to know your training is effective.



4 Types of Validation

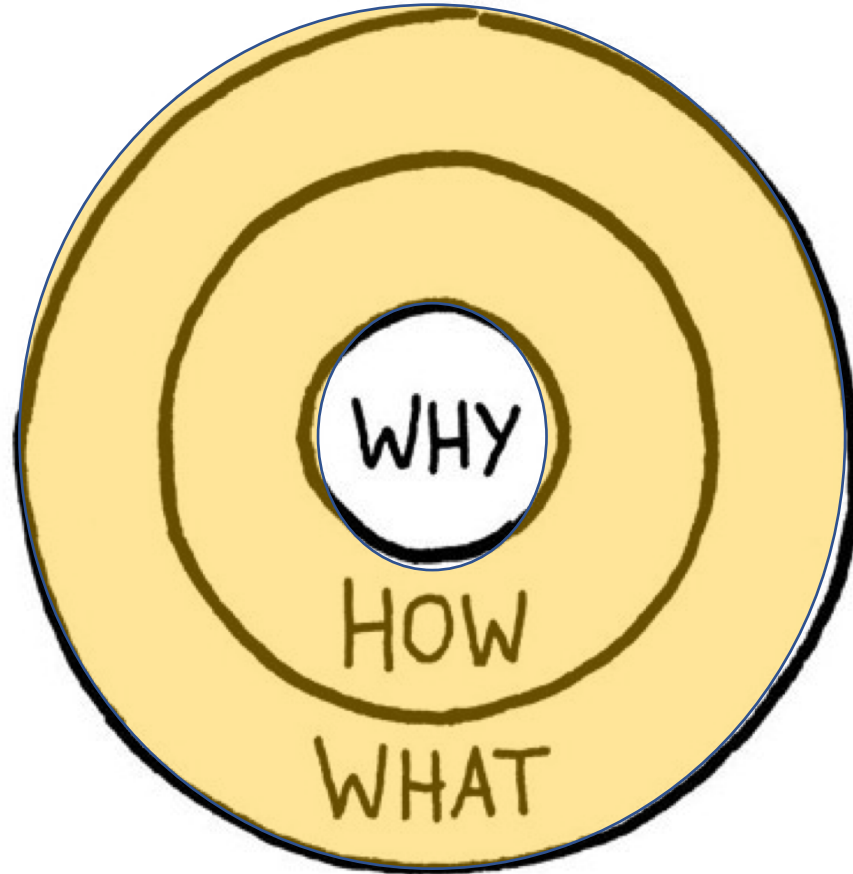
- #1 DATA, DATA, DATA
- #2 Ask the Patient
- #3 Ask the Nurse
- #4 Watch People Work

The “WHY”

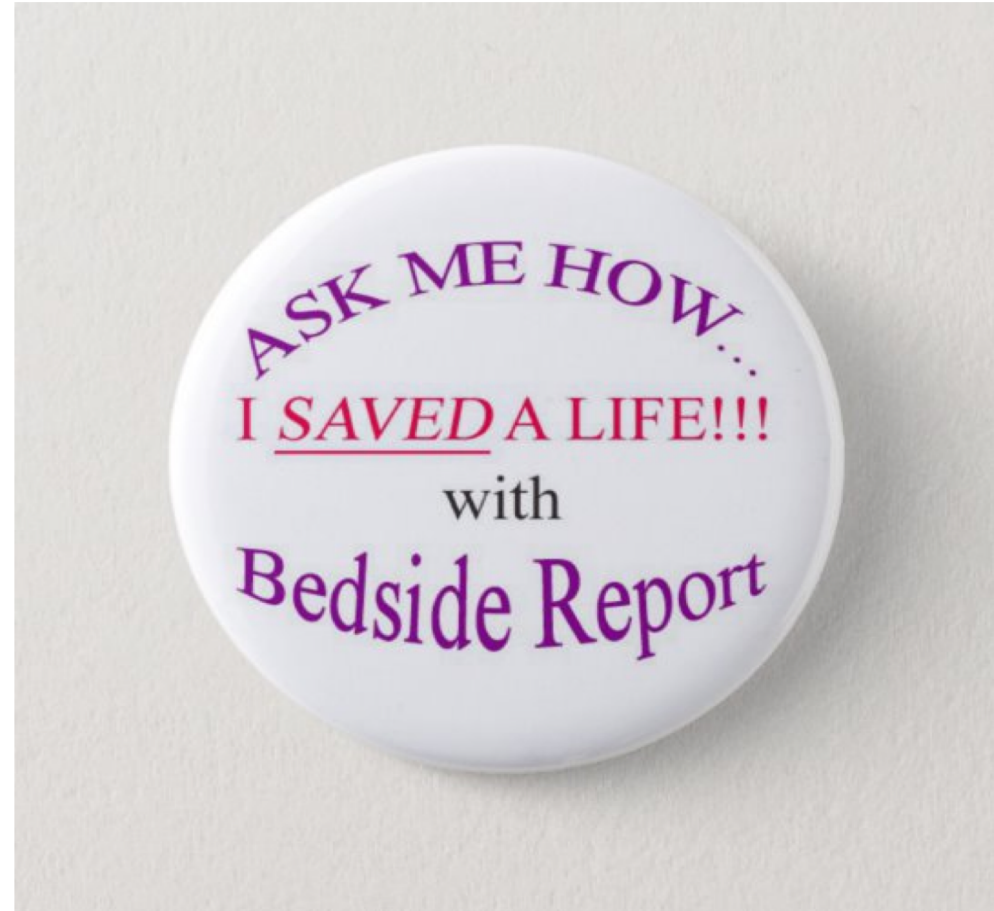
Change is difficult enough. Who wants their boss watching them?



The “WHAT and HOW”



Bedside Shift Report



RN Rounding with Physicians

“No Doc Rounds Alone”



Post DC Calls to Patients and Community Partners



Engaging Patients and Families in White Board Use

Patient Name: _____

Nurse: _____ Physician: _____

Date: _____ Room #: 202

TODAY'S GOALS: _____

DISCHARGE PLAN: _____

DIET: _____

Pain Medication: _____ ☐

Last Dose Received: _____ Next Available Dose: _____

No BP or Lab Draws:

☐ Left Arm ☐ Right Arm

What You Have Scheduled Today:

☐ Lab Test ☐ Therapy

☐ X-Ray ☐ Procedure

☐ CT-Scan

Activity/Assistance

☐ Cane ☐ Lift

☐ Gait Belt ☐ Wheelchair

☐ Walker ☐ Assist of 1 or 2

Rounding			
07	08	09	10
11	12	13	14
15	16	17	18
19	20	21	22
23	00	01	02
03	04	05	06


0 1 2 3 4 5 6 7 8 9 10

No Pain Mild Moderate Severe Very Severe Worst Pain Possible

0 1-3 4-6 7-9 10

CALL, DON'T FALL!

Your safety is important to us.
Please call your nurse
for assistance
before getting out of bed.



Teach Back

*“If they don’t do
what we want, we
haven’t given them
the right
information.”*

--Vice Admiral Richard Carmona
Former Surgeon General

Purposeful Rounding

Key Words at Key Times:

"I'm here to do my hourly round"

"What can I do to make you more comfortable?"

"I want to make sure that you have everything you need"

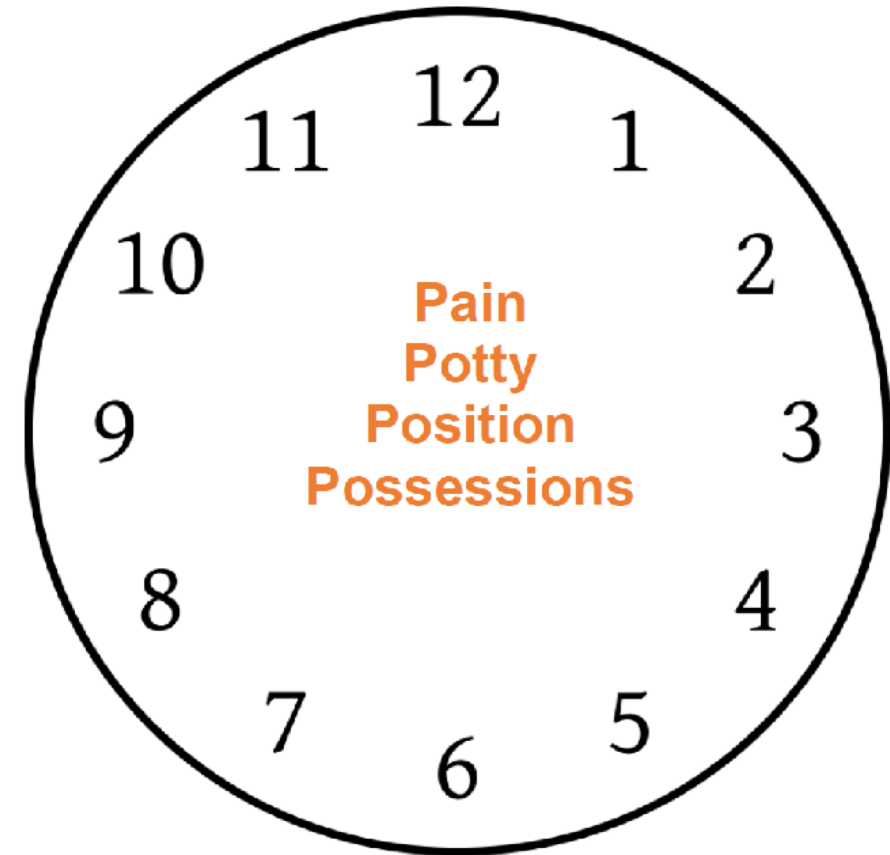
"Someone will be back in to round on you in about an hour"

"Is it okay if I close your door for your privacy?"

"What else can I do for you while I am here?"

Purposeful Hourly Rounding

Taking credit for all you do!



The 4 P's

1. **PAIN:** "How is your pain?"
2. **POTTY:** "Do you need to use the restroom while I'm in here?"
3. **POSITION:** "Are you comfortable?"
4. **POSSESSIONS:** "Do you need me to move phone, call light, water pitcher, or over-bed table within reach?"

More on the “HOW” ...

Tools to use for Validation

Nursing EBP Audit Tool

Self assessment (Never, Sometimes, Usually or)

Nurse Name:

Date:

Evaluator Name:

Activity/Essence

ENTRANCE

Knocks on door (Keep

SAFETY/INFECTION

Washed/Gel hands wh

WARM WELCOME/PE

Acknowledged patient contact, handshake or

PURPOSEFUL HOUR

PREPARATION

Asks about any pain n

medicated for pain, as

SAFETY/INFECT

Asks/encourages posi

needs - if patient has n

position recently, repos

Asks/encourages pers

needs: empties urinai/

needed

Personal items within

water, call bell, table)

Assess additional com

"Is there anything else

before I leave, I will be

hour?"

BEDSIDE SHIFT REP

Introduce and manage

G - Greet and Inti

Stands at patient beds

patient/family to partici

Reviews patient care a

"Patient has their educ

bedside with medicatio

Identifies what is most

patient this shift

Visually inspects woun

incisions, IV sites

Off-going thanks patie

writes name on whiteb

It Takes Two

RN rounded with phys

Medication Purpose/

education

RN reviewed both pur

potential side effect du

administration

Physician Round Validations

Physician Name:

Date:

Evaluator Name:

Activity/

Gets RN for It Tak

Name:

Employee(s) Rounded

Washed/Gel hanc

WARM WELCOM

KEY WORDS OR QU

Knock before enti

Acknowledged pa

contact, handsha

Sat at bedside - "

G.R.E.A.T. ENCO

Relationship Building/f

What is working well fo

Staff member I can rec

Physician I can recogn

Tools and equipment n

Systems you want to in

Quality or Safety focus

Patient perception of c

saying? (Discuss focu

Tough Questions: (Dis

to address or have he

Behaviors Coached: (I

Key words (Acknowledge,

You)

Customer Service Priorities

Standards

Other:

Is there anything I can

Thank you for making

Who will you n

What are barri

Is there anythi

Leader Rounding on Employees

Bundle Element:

Purposeful (Hourly) Rounding

Discharge/Follow-Up Phone Calls

Teach Back

Bedside Shift Report/Handoffs

Whiteboards

Other:

Validation (Patient) Rounding Summary

TIMEFRAME (Week or Month):

UNIT(S):

Validation Tactics

Validation (Patient) Rounding	Employee/ Inter-disciplinary Rounding	Data/Surveys	Competency Evaluation (Testing/Observations)
Validation Rounding is a conversation with a patient (and/or family member) to establish rapport, harvest recognition opportunities, assess employee performance, validate that performance expectations are being met, validate that processes are working, identify opportunities for service recovery, and to "manage up" the caregivers.	One-on-one rounding conversations are always purposeful when you have the right intent and questions; and adding an intent to validate is a good one. Changing up your rounding questions to target the nursing bundle element that you are validating can help keep rounding "fresh" and purposeful.	When we only trust our gut (or subjective information) in regard to the current status of changes, we may not be armed with the knowledge needed to initiate, or continue, the drive to improve. Data and survey findings coupled with other validation tactics are necessary for a robust improvement process.	Demonstrating to others the status of skills, abilities, and/or knowledge
"Our goal is to be thorough in our communication about your care. Around the hours of 7am and 7pm, our staff changes in this unit. Can you tell me how the nursing leaving and the nursing coming on interact with you and/or your family during this time?"	1. What is working well with _____? 2. The goal is for _____ to be consistently practiced (every patient, every encounter, every time). What may be getting in the way of this consistency? 3. To make _____ even more impactful in improving patient care, what suggestions do you have?	Purposeful (Hourly) Rounding: Call Light Volumes, Falls, Decubitus Ulcers, Patient Satisfaction (e.g., Responsiveness of Staff, Nurse Communication, Cleanliness), Nurse Satisfaction	<ul style="list-style-type: none">Role Playing DemonstrationDirect ObservationQuiz/Test – Written or OralSimulation

Was f outpa

More on the “HOW”...

Tool to use for
**BEDSIDE SHIFT
REPORT**

ENTRANCE

SAFETY/INFECTION CONTROL

WARM WELCOME/BEDSIDE REPORT

VISUAL UPDATE

CLOSING HANDOFF

ENTRANCE

Knocked on door and asked permission prior to entering

Safety/infection control

Gel/Foam hands when entering and exiting patient room/area

WARM WELCOME / BEDSIDE REPOT

Acknowledged patient/family with eye contact, handshake, or touch

Used patient's name and introduced and managed up oncoming caregiver

Encouraged patient/family to participate and ask questions or add information

Reviewed patient care and plans for next steps, using patient friendly language

Reviewed education folder and medication sheets and used teach back

Checked the equipment and supplies in the room – IV's, Monitors, Tubes (chest tubes) etc.

VISUAL UPDATE

Updated the communication board (What is important to patient, Acceptable pain score, Time of next pain med, Name of caregiver, etc.)

Cleared room of clutter and belongings in easy reach of patient

CLOSING HANDOFF

Caregiver leaving care thanked the patient for the opportunity to provide care

Oncoming caregiver asked "Is there anything I can get for you now?" "I'll be back in about an hour."

More on the “HOW”...

Tool to use for
**PURPOSEFUL
ROUNDING**

ENTRANCE

SAFETY/INFECTION CONTROL

**WARM WELCOME/PURPOSEFUL
ROUNDS**

ADDRESSES/ANTICIPATES NEEDS

CLOSING/FOLLOW-UP

ENTRANCE

Knocked on door and asked permission prior to entering

SAFETY/INFECTION CONTROL

Gel/Foam hands when entering and exiting patient room/area

WARM WELCOME / PURPOSEFUL ROUNDS

Explained purpose of visit: "I am here to do my rounds to ensure you have all you need."

Bundles care during rounds – Completed other scheduled tasks and incorporates rounds

ADDRESSES/ANTICIPATES NEEDS

Asked about any pain needs. If recently medicated for pain, asks how the pain is being managed.

Asked about any position change needs – If patient has not changed position recently, repositions patient.

Asked about any personal toileting needs – Emptied urinal/bedpan if needed. If toilet training needed, encourages patient to bathroom.

Moved personal items within reach of patient (phone, water, call bell, table).

Assessed additional comfort or other needs

CLOSING/FOLLOW-UP

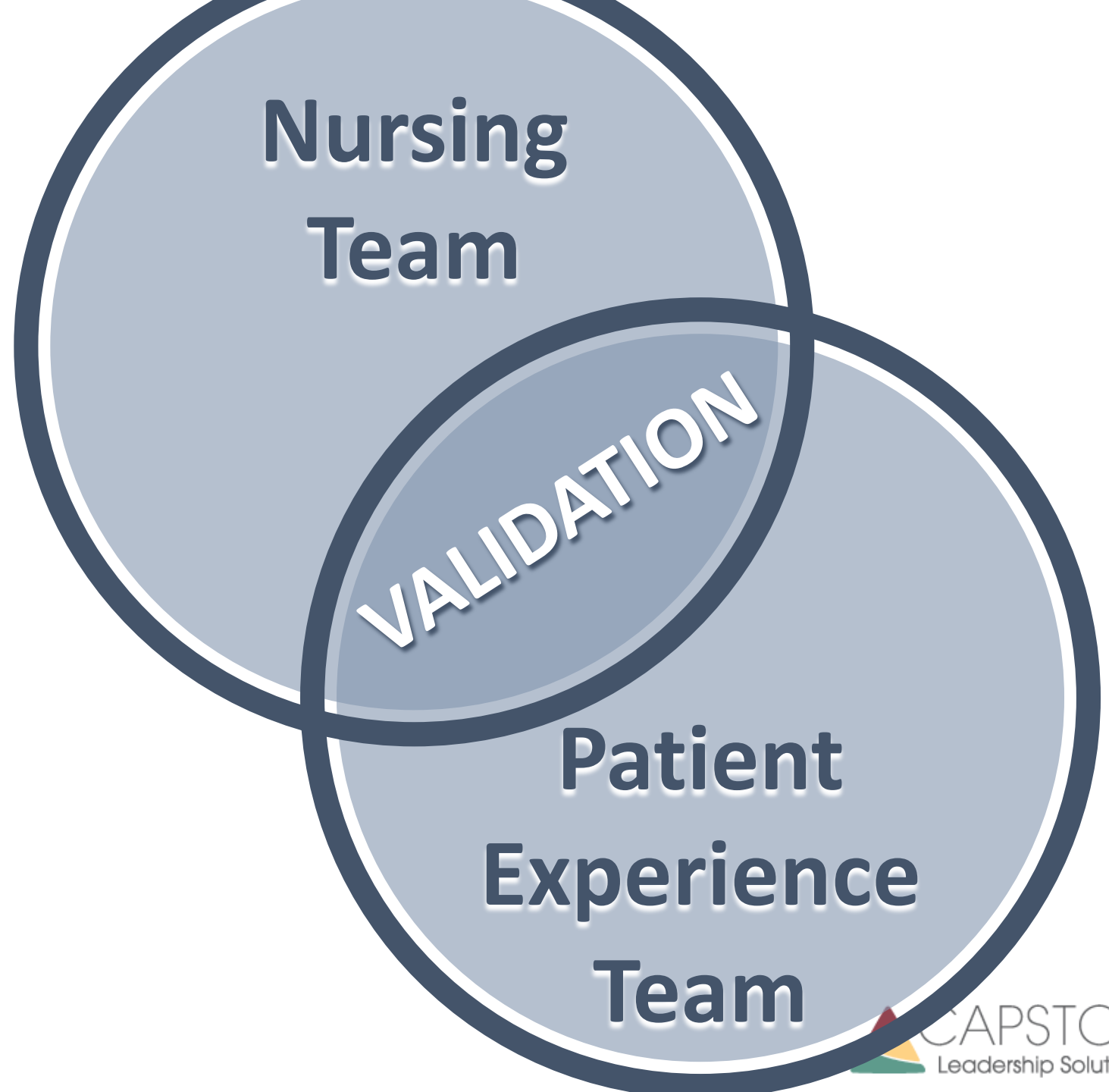
Asked patient and family "Is there anything else I can get you before I leave?"

Informed patient that "I will be back in about an hour."

Let's get way out there.....



Validation by the other Employee Driven Teams



In closing...

JUST
START



QUESTIONS?

CALL US!



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