

TCAB Collaborative
Hospital Readiness Assessment and Information Packet

January 2010

Transforming Care at the Bedside Project Overview

Background

Aligning Forces for Quality (AF4Q) is a national program of the Robert Wood Johnson Foundation that aims to help targeted communities across the country set and achieve ambitious goals to improve the quality of their health care in ways that matter to patients and families.

Aligning Forces for Quality: Transforming Care at the Bedside Collaborative (TCAB Collaborative) is an initiative of the Robert Wood Johnson Foundation that engages nurses and frontline staff to improve the quality and safety of patient care on medical and surgical units in hospitals. The TCAB Collaborative is part of the Foundation's *Aligning Forces for Quality* initiative that brings together those who get care, give care and pay for care to improve the quality of health care in entire communities. Technical Assistance for the TCAB Collaborative is provided by the American Organization of Nurse Executives.

Transforming Care at the Bedside (TCAB) — initiated by the Robert Wood Johnson Foundation (RWJF) — was originally launched as a pilot program with the Institute for Healthcare Improvement (IHI). Since the program's beginnings in 2003, TCAB has served as a learning laboratory for change, with a focus on improving the delivery of care in medical/surgical units — where an estimated 35 to 40 percent of unexpected hospital deaths occur and nurse turnover is highest.

The goal of TCAB is to engage front-line nurses and leaders at all levels of the organization to:

- improve the quality and safety of patient care on medical and surgical units;
- increase the vitality and retention of nurses;
- engage and improve the patient's and their families' experience of care; and
- improve the effectiveness of the entire care team

TCAB is not a traditional quality improvement program. One primary characteristic that sets TCAB apart from others is its focus on engaging front-line staff and unit managers. Many transformational care delivery ideas are initiated directly from nurses and other bedside care team members. The TCAB process empowers these care givers to identify where change is needed, suggest and test potential solutions and decide whether the innovations are implemented.

Assessment Information & Requirements

1. Completed assessment (see pages 4-6).
2. Please submit no more than five (5-6) pages of narrative in responding to questions in Section II of the application.

Send the completed assessment to msonneborn@mnhospitals.org at the Minnesota Hospital Association no later than April 30, 2010. Please do not fax the information.

Please feel free to contact Mark Sonneborn, at msonneborn@mnhospitals.org if you have questions about TCAB (for more info about TCAB, you may want to visit this site: <http://www.rwjf.org/qualityequality/product.jsp?id=30051&c=EMC-CA137>). AONE will be providing the initial training for the TCAB Collaborative.

Hospital Readiness Assessment Information

SECTION I

Name of Primary Project Contact: _____

Title: _____

Organization: _____

Address: _____

City/State/Zip: _____

Telephone & Fax: _____

Email (required for communication with project staff): _____

Name of Chief Nurse Executive (if not listed as Primary Contact above): _____

Demographic Information:

In which Aligning Forces for Quality community is your hospital located? _____

Please mark which one best describes your hospital:

____ Urban ____ Rural ____ Suburban ____ Critical Access ____ Academic Medical Center

Please indicate Yes or No:

Has your hospital achieved Magnet status? _____ OR on the Magnet journey _____

Has your hospital received the Malcolm Baldrige National Quality Award? _____

Please name the medical-surgical unit that will participate in the collaborative. _____

Please answer the next set of questions for the medical –surgical unit you selected:

Indicate the number of beds on the unit. _____

Indicate the number of FTE's on the unit. _____

Indicate the number of years of experience the unit nurse manager has as a nurse manager. _____

Indicate the number of years that the unit nurse manager has served the unit in that role. _____

Indicate the current voluntary turnover rate for registered nurses on the selected unit. _____

SECTION II

Please answer the following questions in narrative format:

1. Please outline the top three goals you hope to achieve by your hospital's participation in this initiative.
2. Please identify the medical/surgical unit you have chosen to participate in TCAB and describe why you selected this particular unit and include a description of key project staff and how they will be involved on this unit. Please describe any shared leadership/shared governance structures that exist on this unit.
3. Is your hospital currently participating in any Aligning Forces for Quality Activities within your community? If so, please describe your participation or enter "None."
4. Please describe the quality reporting and improvement structures in the hospital. Include in your description how these structures will benefit the project and how they will contribute to the extraction of quality data that will be needed.
5. Do the nursing department's annual goals include implementation of innovative ideas or strategies that increase employee creativity? If so, please list these annual goals.
6. Is there an established process for managing change and innovation that nursing and hospital leaders understand and are expected to utilize? If so, please describe this process.
7. Describe a sustainable quality improvement initiative in your hospital involving nursing, particularly on the unit you have selected to participate, and indicate the measurable improvement achieved.
8. Please describe the experience of nurses both in your hospital and in the selected medical/surgical unit with quality improvement efforts and existing quality improvement projects underway in the designated medical/surgical unit.
9. Describe your methods and staffing structure for data collection related to required measures and voluntary performance measures. Include a description of your capacity to report patient data by race and ethnicity.
10. Explain how you will meet the financial and staffing requirements outlined under hospital responsibilities on page 6 of this packet. In your description, please include the number of staff committed, an estimate of the time and resource commitment, the source of the financial support and anticipated financial allocation (including travel costs) for this collaborative.

11. Please provide an example of how patients and families (or representatives) are engaged on hospital advisory groups, committees, unit meetings or other work groups at your hospital.
12. Please describe how the Aligning Forces for Quality: Transforming Care at the Bedside Collaborative effort will be sustained beyond the hospital collaborative period. Also include how this effort will be spread to other units within your hospital or other hospitals within your organizational system.
13. How will key lessons learned and successes be disseminated and shared with senior leadership and other units within the hospital.

Hospital Responsibilities

The participating hospitals will commit the following:	
1.	<p>Staff and Financial resources: Four to five hospital representatives to attend initial AONE training and each face-to-face meeting. The TCAB unit manager needs to attend all face –to-face meetings. The CNO needs to attend all the face-to-face team meetings. The unit manager and staff are expected to devote time to the work of TCAB. All travel expenses for 4-5 hospital representatives to attend each face to face meeting.</p>
2.	<p>Education: The hospital will provide on-site education on quality processes for all project participants. AONE will provide instruction on the TCAB principles and processes along with quality improvement techniques to assist with a particular hospital's education needs during the initial training meeting</p>
3.	<p>Measurement, Evaluation & Reporting: The hospital will participate in an evaluation program and commit to timely submission of all requested reports.</p> <p>Required Measurement:</p> <ul style="list-style-type: none"> • Each participating TCAB medical/surgical unit will report on three core measures that include the NOF endorsed nurse-sensitive indicators for patient falls, patient falls with injury, and pressure ulcer incidence stratified by race and ethnicity • Innovation logs will be submitted on a regularly scheduled basis. • Initial work will determine a baseline assessment of leadership behaviors and team vitality. This initial work should be repeated in the second year of participation. <ul style="list-style-type: none"> ▪ Monitoring unit level progress: The hospital will monitor, track and document its own unit level successes for the purposes of improvement.
4.	<p>Unit Identification & Project Leader: The hospital will identify one (1) medical /surgical unit to participate in the project. Furthermore, the hospital will identify a project leader and measurement leader to be the main contacts for AONE.</p> <ul style="list-style-type: none"> ▪ Protected Time for Participants: The participating unit staff will need to have protected time in their schedules in order to work on projects and participate fully in the testing, evaluation/reporting requirements.