

SCRUBS THURSDAY Feedback from Summer 2019

1 Lessons learned? Positive outcomes/story?

- many difference remain between units
- TOAs were a win!
- dedicated staff to patients
- staff took pride in their work
- good from a learning process perspective “whole picture”
- better to know/see other clinical areas, meet staff
- the staff appreciated the helping hands
- learn about other areas to bring to your area
- enhances teamwork between departments
- bring ideas to your area
- increase resource pool
- staff like positive feedback
- adopting SOP in outpt dept (renal)
- opportunity to discuss flow on different units, helps with understanding between transfers
- was able to assist with locating equipment for staff
- able to provide feedback for bundles followed
- appreciative of management working alongside
- frontline staff response improved and process was more ‘accepted’ over time
- process implemented on home unit as seen on another unit! aka stolen ideas!
- attended rounds, like physician engagement, would like to implement

2 GAPS/BARRIERS/OPPORTUNITY FOR IMPROVEMENT

- communication –staff had not heard about it
- staff prepared, they knew we were coming
- e-Volve Thursday meetings
- time/scheduling
- hard to leave on fires/problems to experience others
- time
- SOP in place on inpatient units –not always able to articulate
- finding time that works for partners to go to unit
- expand to outpatient clinics
- staff said “I don’t do that, I’m old school” re: TOA
- challenges within the unit for standard work (ie psych)

3 IDEAS FOR IMPROVING SCRUBS THURSDAYS

- not so prescribed, make it day-to-day
- embed in our culture
- frontline staff participate
- same day leaves unit short on leaders
- need formal feedback loop
- inform staff someone’s visiting

- having a sub/partner
- opportunities for inpatient leadership to see/visit some outpatient areas
- expand to RP and staff shadowing
- cross campus coverage/visits
- attend on units where your staff might float, so that managers can better support
- include outpatient depts. (Renal ☺)

4 HOW WE SHARE IMPACT WITH STAFF

- suggestion box to compliment others
- Tims cards
- inform all staff on unit
- patient stories, why we do standard work, good outcomes
- patient stories, staff meetings, emails, 1:1
- 1:1 feedback
- indicators, transplant, d/c home, PD-increased HP #
- shining stars
- graduate follow up clinic
- patients visiting after d/c
- staff meeting stories
- stats
- thank you board posting thank you cards
- forward emails from patients and families to all staff
- handout Above and Beyond awards at staff meeting
- real time feedback and compliments
- hanging up thank you cards/pictures in staff room
- public acknowledgement of Above & Beyond
- emails to staff when exceptional work is done
- coffee card and first nurse to discharge, ++ donuts for zeros!
- including staff in discussions with adverse events –showing impact
- reviewing our “what went well” debriefs on our week staff meeting
- sharing patient stories
- MoreOB goals, reviewing metrics of achievement
- forward patient comments to staff (emails/rounding)
- staff meetings good and bad, include this week’s learnings
- share stories
- board in staff room with Thank-You’s
- debriefs from week
- patient stories, goals review
- patient visits (formal, drop in)
- “shining star” to recognize good work
- share patient stories at staff meetings
- patient emails/notes shared
- sharing positive results from all the changes
- leadership rounds, recognizing staff