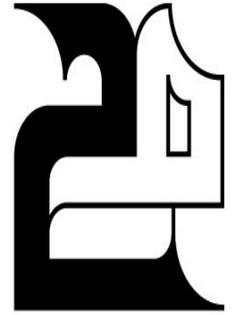


“Nursing Care Plan”
HHUMC
Experience

مستشفى حمود
Hammoud Hospital
مركز طبي جامعي
University Medical Center



Presented
by

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Outline



- Objectives
- HHUMC background
- Introduction
- Planned strategy
- Recommendations

Objectives



At the end of this session you will be able to :

- Share our NCP experience
- Improve the implementation process of NCP
- Control and Maintain the improvement process

HHUMC background



- Dr. **Ghassan Hammoud** established **Hammoud Hospital** in 1966, in Saida.
- 300 beds
- 200 physicians in all specialties.
- 453 nurses, 253 of them RNs
- HHUMC delivers high quality of patient care
- It is considered the referable hospital in south Lebanon



Hammoud Hospital

Hammoud hospital has 22 Nursing Units



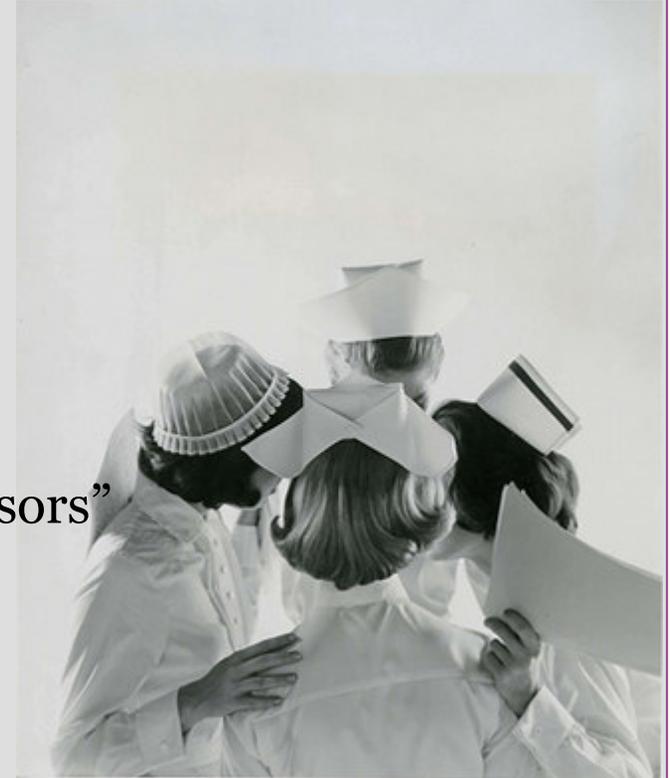
- Emergency department
- Orthopedic-Urology
- Hematology –Oncology
- Delivery suite
- Nursery
- Obstetrics –Gynecology
- Neonatal intensive care unit
- Intensive care unit(ICU, 2 sections)
- Cardiothoracic and vascular surgery
- Invasive Cardiology
- Cardiac surgery unit(CSU)
- Telemetry
- General surgery
- Operating Room
- One day surgery
- Anesthesiology
- Medical unit (1st class)
- Pediatrics
- Medical unit (2nd class)
- Coronary care unit (CCU)
- Dialysis unit
- VIP Floor

INTRODUCTION



Nurses talk about NCP:

- “We are busy!”
- “It is just a paper”
- “What are the benefits of it for the patient”
- “We do it so we will not be blamed by supervisors”
- “Why are we importing issues strange to our culture into our work ?”
- “We are writing it because it is required by MOPH standards”
- “Writing plans of care needs time taken away from patient care”



Introduction



- ✓ Quality patient care must be planned and coordinated.
- ✓ NCP provides direction and continuity of care provided.
- ✓ NCP facilitates communications between nurses and care givers.
- ✓ NCP is a guideline for evaluation and documentation.
- According to these benefits of NCP, efforts were used to implement it.

Quotes



*“So many dreams at first seem impossible.
And then they seem improbable.
And then, when we summon the will, they soon
become inevitable.”*

Christopher Reeve

Planned strategy



Planned Strategy consists of three phases:

I-Assessment phase :

- Team initiation
- Data collection(survey)
- Data analysis
- Personnel involved (NS-NM-RN-D.O.N- Administrative-nursing schools)

II-Planning phase

III-implementation phase:

- implementation of the methodology

III-Evaluation phase:

- Audit
- Follow-up

Assessment phase

1. Team initiation



- ❑ Selection of two RN from the hospital to attend an extra training session about Nursing Care Plan. (Jan 2005)
- ❑ Selection of Nursing Care Plan Members according to different criteria:
 - ❖ Theory and practice skills
 - ❖ Educational Level background
 - ❖ Language and management skills. (June 2005)
- ❑ Training of team members through training sessions, workshops, and evaluation tests about NCP.
- ❑ Meetings were initiated in order to define the objectives of the NCP team, tools used for the process implementation and evaluation.

NCP Team Members



- This team consists of the following staff:
 - ✓ Telemetry NM (Team Leader)
 - ✓ Clinical Director
 - ✓ NM Pediatric
 - ✓ CCU NM
 - ✓ NICU NM
 - ✓ OBGYN NM
 - ✓ Medical Floor NM
 - ✓ Clinical Educator
 - ✓ Two Supervisors

Most of the team members are instructors in different universities

- This team started to work on the ground at the beginning of 2006.

Purpose of PCP Team



- To comply with MOPH standards
- To improve the nursing care plan documentation
- To unify the nursing process

Responsibilities of NCP Team



- To establish a policy and procedure
- To train RNs on documentation
- To perform audit
- To collect data and improve documentation
- To review the documentation process (review form, use of computer system...)

Time Table



- The team chairperson /leader will report directly to nursing director
- Meeting will be held as necessary and as assigned by chairperson/leader (biannually or as needed)

Assessment phase

2. Data Collection



- The first step was identifying the total number of RNs in the hospital which was: 115 BSN and 24 TS.
- A survey was distributed to the staff as initial data baseline that takes into consideration nurses' knowledge and experience level, educational background, and language skills (Jan 2006)

Assessment phase

2. Data Analysis



Data collected from the survey reveals the following:

- language barrier (English, Arabic & French)
- Variation in the level of education among RNs
- Variation of education background among RNs
- Variations in the nursing theory and practice skills among RNs

Assessment phase

2. Data Analysis



Data collected from monthly meetings with NM, supervisors, patient's file audit team and members reveals the following:

- Shortage of registered RNs
- Workload
- Turnover
- Lack of motivation and interest to write NCP

Assessment phase

2. Data Analysis



Problem:

- language barrier
- ❖ 10 RN use Arabic language
- ❖ 39 RN use French language
- ❖ 90 RN use English language

Solutions:

- We aimed to Standardize the NCP to be written in English Language.
- We trained each RN to improve his/her English language for better writhing skills.
- English courses were given to them.
- Guide them in the writing process.

Assessment phase

2. Data Analysis



❑ Problem:

- **Variation in the level of education among RNs**
- ❖ Grade I: high level of education(80 RN)
- ❖ Grade II: moderate level of education(34 RN)
- ❖ Grade III: weak level of education(25 RN)

❑ Solutions:

- Staff Development started to play a major role in training session regarding nursing processes, critical thinking, communication skills and documentation .

Assessment phase

2. Data Analysis



PROBLEM:

- **Variation of educational Background among RNs.**

Solution:

- Choose NANDA as our nurses reference.
- Started to train on it within sessions done by Staff Development Dep.
- Distributed of NANDA books in all nursing units as a guideline.
- Sent via email specific nursing diagnosis list for each department in order to improve nursing care plan documentation.
- Selection of the Nursing Diagnosis and training done by the NMs according to the Department specialist

Assessment phase

2. Data Analysis



❑ Problem:

- **variations in the nursing theory and practice skills among RN**

❑ Solution:

- Training session about physical assessment (residents/external educators)
- Training session about how to do link b/w NP in patient's file
- Training on proper documentation without duplication in patient's file
- Training on how to use communication skills
- Training on leadership and management skills.
- Training session grouped from the development plan of each RN

Assessment phase

2. Data Analysis



Problem:

❖ **Shortage and turnover of RNs**

solution

❖ Insist on administration to recruit more RNs

2004-----139 RN

2010-----253 RN

❖ Motivating and rewarding our RNs

Assessment phase

2. Data Analysis



Problem

➤ **Workload (High acuity patient)**

solution

- ❑ Plan with administrative and paramedical units to decrease workload e.g.: inserting a computerized system
- ❑ Organizing and facilitating both admission and discharge processes...etc

Assessment phase

2. Data Analysis



Problem

- **Lack of motivation and interest to write a NCP**

Solution

- Shedding the light about the importance of nursing care plan in the nursing process.
- Alert them about the legal issues that result from not writing a NCP.
- Inspire them to write NCPs through collaborating nursing students while documenting a care.
- Choose the Nurse Managers ,RNs to be a nursing instructor s to follow up the student
- Inform the nurses that NCP is a mandatory process

Planning



Put a plan for our strategy divided to:

- Encourage the RNs to write what they know (simple manner-2005)
- Training session for the policies and procedures(2006)
- Started our audit(2007)
- Follow up

Implementation phase

1. PCP Team Activities



- Training session for all RN in charge on intervals(2006-ongoing)
- Initiation of nursing care plan policy and procedure
- Initiation of nursing care plan audit checklist(2007)
- Starting audit on monthly basis in all nursing department
- Analyzing the result quarterly (three month)
- Putting plan for each department according to the deficiencies found in the result (quarterly results)
- Obligated department with low rate to take this as KPI
- Conduct electronic nursing care plan to be implemented in 2012
- Modify the NCP sheet according to the new requirements
- Training session to the new employee during their orientation phase

Implementation phase

2. personnel involved Activities



- Nursing Director held continuous meetings with nursing schools and nurses instructors about NCP improvement strategies.
- Nurse supervisors play a role of follow up on the effectiveness of training session, through the on-site continuous training

Implementation phase

2. Tools used



- NCP sheet
- Nursing Care Plan Audit Checklist
- Electronic Nursing care Plan system

Evaluation Phase



- Monthly Nursing care plan audit
- Modify the plan of implementation according to the results at the end of the year
- Keep updated about the new NANDA releases.
- Follow -up to the process
- Modify the nursing care plan audit checklist (2010)

NCP Audit Results

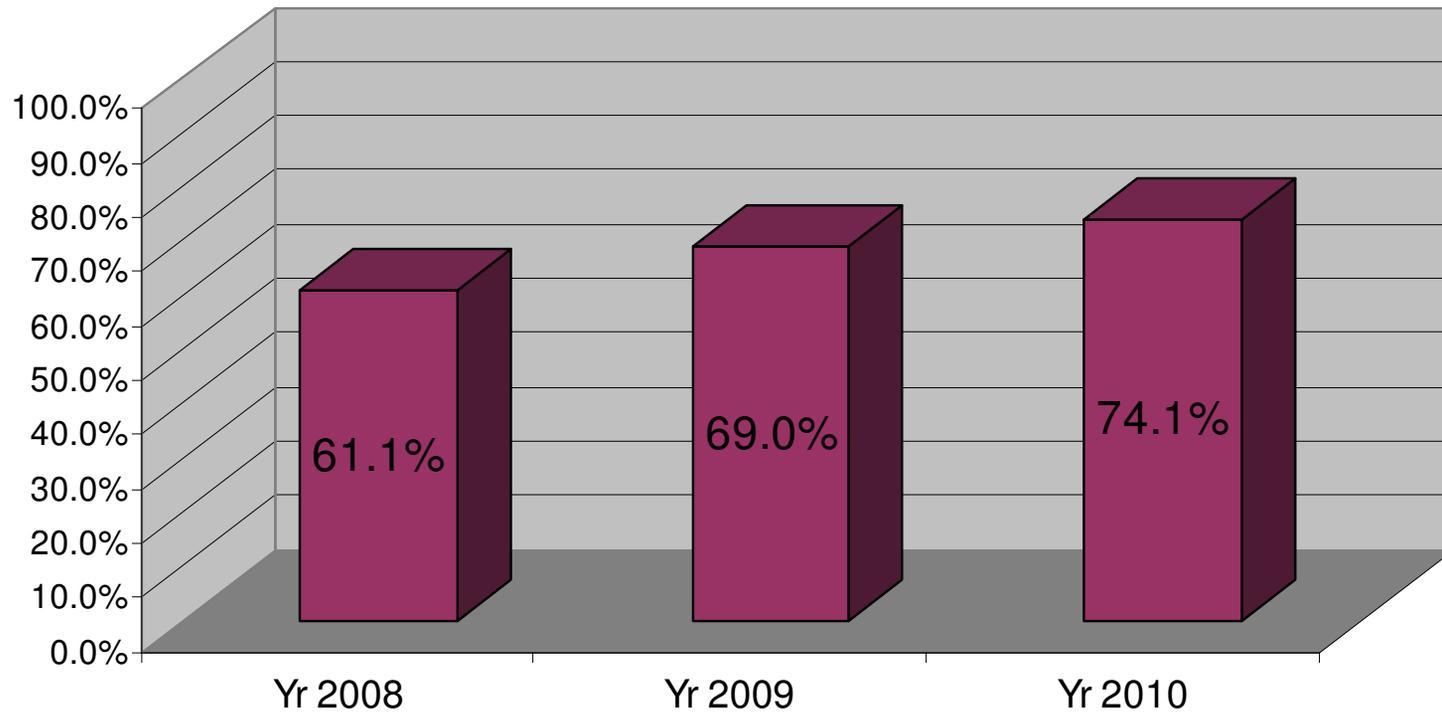


Nursing unit	Quarter I	Quarter II	Quarter III	Quarter IV	Total
GF	85.30%	76.70%	87.30%	94.70%	86%
NICU	85.30%	86.70%	86.70%	87.30%	87%
8 th MS	78.10%	76.90%	80%	75.30%	78%
Telemetry	84.70%	78.70%	84.70%	86%	84%
7 th MS	82.70%	90.00%	89.30%	88.70%	88%
OBGYN	62.00%	66.70%	78%	84%	73%
Pediatric B	70.70%	74%	84.70%	83.30%	78%
Pediatric A	78.70%	78%	78.70%	80.70%	79%
5 th MS	72.00%	58.70%	75.30%	78%	71%
CCU	51.30%	64.70%	61.30%	72%	62%
ICU	57.30%	65.30%	69.30%	72%	66%
4 th GS	61.30%	62%	65.00%	72%	65%
Oncology	38.70%	42.70%	45%	62.70%	47%
Total	69.9%	70.9%	75.8%	79.8%	74.1%

NCP Audit Results



Compliance of NCP documentation for the past 3 years



Conclusion



- All nurses should have at least the ability to write and individualize an appropriate and effective NCP
- NCP is not an action but it is a complete process that starts from assessment and ends in evaluation, and all nurses with different levels are involved.



Recommendations



- NCP is the cornerstone of the RN'S duty.
- Nurse Managers should play a role in both supervision and follow up .
- Administration must provide all resources needed in the improvement pathway.
- Improving the NCP is not a individual effort but it is a team work.

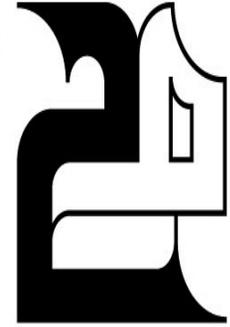


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