DEVELOPING A HELPING-TRUSTING CARING RELATIONSHIP

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Introduction: A commitment to sustain an authentic trusting-caring relationship with another is the foundation of professional nursing practice. Communication regarding the value of the work and the role of caregiver is essential. A caring team works together to promote harmony and healing among themselves as well as those they serve, influencing the whole system. Effective communication and collaboration between nurses, physicians and ancillary staff is essential to positive patient outcomes. This project focuses on addressing multidisciplinary collaboration and effectiveness in order to plan more efficient and satisfying discharge outcomes with patients.

Significance: Our patients experience delays in care due to inconsistency in the communication between the physicians, nurses and ancillary staff. The average peak discharge time in our med-surg/telemetry unit was 4 PM, which was stressful and non-healing both for patients and nurses because of shift change, working hours, and the match demand for resources in beds and staffing. This affected the nurse’s opportunity and capacity to sustain a healing relationship with their patient and had a negative impact on patient health related outcomes. We intend to create a caring relationship that promotes knowledge, growth, and empowerment with our patients that will enhance their awareness of health and well-being.

Purpose: The purpose of this project is to develop helping, trusting and caring relationships with patients, families and the members of the health care team. Our aim is to improve the patient flow and service experience of our patients through effective communication and creation of a trusting relationship among caregivers. To this end, we developed a tool that measured the caring/healing relationship between the health care team and the patient. This tool includes assessment of the patient’s perceptions of caring, nurses caring behaviors, abilities and efficacy. It also helps to transform tasks into caring healing interactions, creating a higher level of consciousness. This promotes healing and wellness and facilitates an efficient discharge process.

Setting and Participants: This project is a part of our organization’s effort in bringing human Caring Science into the active practice of nursing staff in a 41-bed Med-Surg/Telemetry-Stroke unit. This project was designed to improve the discharge process and patient flow. Participants include the unit nurse manager and assistant nurse managers, patient care coordinators, bed control staff, physicians, pharmacy manager, transport/mobility staff, nursing staff and unit assistants.

Project Description/Process: Tools were developed to measure the caring/healing relationship between the nurses and health care team. The nurse manager and assistant nurse managers utilized a valuable approach in rounding by creating a tool that emphasizes the caring-healing relationship between the nurses and the patient. Patients were asked about the consistency of the health care team in providing care with loving kindness and patients were asked if they felt that their cultural
traditions and spiritual beliefs were supported. Discharge planning was facilitated by the following:

- Discussion of the patient’s discharge plan as early as during admission by creating an avenue for expression of their understanding on their illness/health and personal beliefs during Nursing hand-off Knowledge Exchange (NKE) and discharge rounds.
- Creation of a healing environment that helps patients formulate and express questions and concerns to ask the health care team. We provided our patients pertinent information in their Care boards, name, contact numbers and hospital stay information in their welcome cards.
- Participation in daily consistent care rounds which created an opportunity of helping-trusting-caring relationship by health care teams. A rounding tool was developed that assisted in assessing patient needs, experience, and gauging readiness for discharge. It also provided immediate feedback and recognition to nurses after patient rounds for the excellent care they’ve provided to the patient.

Project Outcomes:

- Created a culture that promotes a trusting caring relationship among caregivers through a cross-functional team and improved patient flow.
- Linked all our initiatives in promoting organizational goals for quality, safety and patient satisfaction.
- Attained a simple approach in identifying the bottlenecks and variability in bed turnover such as admitting procedures (ED-Bed), discharge process and bed readiness by employing a predictive tool for admissions and discharges.

Project Projected Evaluation: By creating a culture that promotes a trusting caring relationship among caregivers, we predict that nurse and patient satisfaction service scores will be above 80%. This will be achieved by pro-actively managing patient flow through meaningful and intentional inter-action of the health care team with the patients. We were able to utilize a review system to monitor demand for staff and beds and match both to system-level needs on a shift-by-shift basis. We hope to eliminate or decrease the surge alerts of late afternoon discharges after 3 PM and distribute the discharge times in three time frames before 1100H 20%, between 1100H-1500H, 50% after 1500H 30%.

Future Directions: We hope to successfully integrate this process in all levels of the health care organization. We will continue to improve the patient care experience by establishing and sustaining meaningful and trusting relationships that will improve our patient flow. This allows for predictability in patient volumes and movement, along with deploying staffing as warranted by demand throughout a given period of time. We intends to maintain unit environment that engages in meaningful, mutually satisfying relationships and healing between patients and nurses.

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