

Project Methods

Purpose Statement

Patient safety and quality outcomes are connected to effective communication between healthcare providers. When patient safety is in jeopardy, Speaking Up Behaviors (SUB), a healthcare professional identifying a concern that might impact patient safety and using his or her voice to raise the concern to someone with the power to address it, should be used (Kane, 2018). Speaking Up Behaviors can be promoted by giving healthcare professionals structured tools, education, and individual recognition of SUB attempts (Frankel et al., 2019; Jones et al., 2021; Labrague & De los Santos, 2019). Without leadership and organizational support and structures in place, SUB attempts are not successful. There is a positive relationship between SUB interventions and patient safety outcomes, perceived teamwork, and healthy work environment, retention, and the likelihood of speaking up (D'Agostino et al. 2017; Ginsburg & Bain, 2017; Okuyama et al., 2014; Sayre et al., 2012a; Schwappach & Richard, 2018). Therefore, a project to improve SUB will employ multifaceted interventions to determine the impact on patient safety outcomes, nurse retention, and the likelihood of SUB.

Design

The project design will be multifaceted and include organizational structure and culture, leadership, and personal interventions.

Organizational Structure and Culture

- Safety Event Notification System for Organizational Reliability (SENSOR) updated to associate communication failures with patient care safety events as well as education on use of SENSOR for reporting communication-related professional conduct incidents

- Development of a SUB structured communication tool
 - Incorporating CUS (I am concerned; I am uncomfortable; This is a safety issue) into SBAR (Situation, Background, Assessment, Recommendation) for safety communication
- Development of a Speaking Up huddle debriefing tool for monitoring the cause, frequency, and outcomes of SUB.
 - RNs will describe the event leading up to the need to use speaking up behaviors, their chosen method of speaking up behaviors, the listener response, outcomes of the behavior (patient or professional), and identified process or resource needs to prevent future situations. The huddle will take place with the involved nurse(s) and the manager, charge nurse, or supervisor, and the debriefing tools will be placed in a drop-box on the unit or be an intranet-based form submission. Completed forms will be evaluated by Nursing Quality Council to guide action plans for improvement.
- Develop a safety communication policy that outlines organizational recommended tools for structured safety communication
- Develop a “Good Catch” recognition program that promotes a positive connotation with SUB
 - Informal and formal recognition of colleagues by Quality and Safety leaders monthly and quarterly

Leadership

- Executive walking rounds to provide clinical colleagues the opportunity to communicate concerns to leaders

- Insights gained from unit colleagues will be acted upon to change the environment and a communication feedback loop back to the colleague will be completed
- Provide just-in-time coaching for SUB events while promoting positive, judgment-free communication
- Executive leaders such as the Chief Nursing Officer, Chief Executive Officer, and Chief Medical Officer create videos that give permission for a SUB culture to be incorporated into education sessions and posted on the organization's web-based communication interface, "Workplace"

Personal

- Computer-based learning module:
 - Define SUB
 - Barriers to SUB
 - Successful SUB
 - Organizational Support of SUB
 - Resources to implement SUB
- In-person education session that includes role-play activities

Timeline

The planning and development phases of the project will include organizational structure and culture, leadership, and personal interventions and will begin in May 2022. In June 2022 the development phase of the leadership interventions will take place. The implementation phase will be in July 2022, with all interventions going live by the end of the month. The project will

be submitted to the Southern Illinois University Edwardsville Institutional Review Board for approval of the descriptive, cross-sectional research study design that will aim to evaluate the effectiveness of the interventions by using validated speaking up climate tools. Sustainability following the implementation and evaluation phases will begin in February 2023 and will be maintained through onboarding education, the SENSOR system, and continued Speaking Up Huddle reports disseminated through leadership councils to maintain an organizational culture change.

Setting and Stakeholders

The setting is a rural community critical access hospital with a three-time Magnet designation, where nursing services occur in collaboration with medical providers in both inpatient and ambulatory settings. Active stakeholders involved in this process include the Chief Nursing Officer, the Director of Quality and Safety, all members of the leadership team, and all nurses and medical providers. Other stakeholders include members of the project team through Southern Illinois University Edwardsville School of Nursing. Passive stakeholders include patients and family members impacted by safety communication outcomes.

Approximately 150 registered nurses working in ambulatory and inpatient settings will be included in the project interventions. Inpatient units include intensive care, medical surgical, obstetrics, transitional care, and nursing supervisors and comprise approximately 74 nurses. Ambulatory settings include ambulatory surgery, emergency services, outpatient, wound, pain, and cardiac rehab, and comprise approximately 76 nurses. Inclusion criteria for interventions involving nurses directly will be nurses that provide patient care in collaboration with medical providers. Interventions that impact structure and culture will include the organization.