FEATURE

ConGRASpulations, a success story: The revival of workload to ensure tomorrow’s success

by Steffanye Michaelson, Anita Long, and Elaine Avila

ABSTRACT

In our organization, nursing staff are required to complete a work load measurement tool (GRASP) every shift. This information is used to determine nurse/patient ratios and perform cost analysis. On a Surgical Oncology and Medical Short-Stay Unit, the nursing staff had not completed the GRASP over several years. Data did not reflect the actual work load of nurses on the unit. With a new Patient Care Manager, there was an emphasis on improving performance with GRASP. Strategies were implemented to increase utilization. At the end of the one-month period, there was a significant improvement in completion rates from 55.22% to 95.64%. As a team, we celebrated the successes with a “conGRASpulations” luncheon. Over the last five months, the process has been sustained with a 95.37% compliance rate.

BACKGROUND

In our organization nursing staff are required to complete the work load measurement tool (GRASP) for every shift. This information is reported to the Ministry of Health and Long-Term Care for cost analysis and used by the organization to determine nurse/patient ratios. For several years, nursing staff on the unit were not completing the tool, as expected. As a result, the GRASP data did not reflect actual work load. There was a lack of understanding and appreciation about the utilization of GRASP, as well as a visible lack of motivation and engagement observed from the staff. With the leadership of a new Patient Care Manager (PCM) a renewed emphasis was made on improving GRASP performance to 95%.

PURPOSE

The purpose of this quality improvement (QI) initiative was to increase GRASP performance from 56% to 95%. This would be achieved by implementing multiple strategies to enhance awareness. We wanted to engage front-line staff and empower them with the knowledge about the value of completing the workload tool.

METHOD

The setting of this QI initiative was in a 36-bed Medical Short-Stay and General Surgery/Surgical Oncology unit. Patients on this unit include those who have undergone colorectal, hepatobiliary-pancreatic, and gastric cancer surgeries.

An environmental scan was completed to understand the staff work load, the work load instrument, and barriers to its completion. In collaboration with staff, multiple strategies were identified and implemented to raise awareness and engage the point-of-care staff. Expert consultants from within the organization were brought to the unit to provide education surrounding cost-benefit ratio, patient care impact, as well as clarification regarding myths and misconceptions about the tool. Staff engagement occurred in the form of huddles, staff meetings, and one-to-one discussions. Another method we found to be highly successful was the continuous monitoring of performance. The leadership team provided regular feedback along with positive reinforcement and acknowledgement of the efforts of the point-of-care staff. We used email updates, including the graphic representations, to ensure that the raw data could be viewed in real time. This allowed staff to visually appreciate and understand the impact of both performance and missing patient work load on daily staffing.

LESSONS LEARNED

Staff engagement throughout the process was crucial to the success of this QI project. A fundamental understanding of the need for change is imperative for staff engagement, empowerment and success of any initiative. Knowledge is power. For the GRASP performance initiative, the end result of an in-depth understanding of GRASP resulted in staff adherence to completing the tool and staff engagement in the process of building and reevaluating the tool to ensure its relevance for capturing the work provided to the patient population.

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CHALLENGES

As with any QI initiative, there were challenges identified and embraced. A key challenge that was observed was resistance to the change, as it was perceived as an additional task with no staff benefit. We often heard, “What is in it for us?” Lack of understanding of the essence of the tool led to a lack of performance and accountability. Time constraint was also seen as a challenge with the staff facing multiple competing priorities.

SUSTAINABILITY

To ensure sustainability in performance, sharing data (i.e., pre and post implementation and current) with staff illustrated the success of their performance. Continued email updates on data regarding performance, average staffing per shift, and patients with missed workload were disseminated which contributed to continued empowerment and engagement. The monitoring process has evolved from a daily to bi-weekly basis with very little follow-up needed to ensure expected performance. Over the last five months the process has been sustained with a 95.37% completion rate. Another strategy to sustain compliance was the development of unit Workload Champions ensuring the staff has ownership of the tool and process. The staff is actively encouraged to suggest ways in which the tool can best capture the needs of the patient population. The constant engagement from staff has definitely played a key role in the sustainability of workload tool completion.