

Transformational Leadership

Bridging Cultures through Shared Values in a Professional Environment of Partnership

TL9EO – Visibility, Accessibility, and Communication

TL9EOa: Provide one example, with supporting evidence, of an improvement in patient care or the **nursing practice environment**, associated with communication between the clinical nurse (s) and the CNO.

Outcome data must be submitted in the form of a graph with a data table.

Example TL9EOa: Improving Patients' Experience of the Temperature of Meals Served in the Adult Oncology Unit

Problem

The first strategic objective of KFSHRC General organization is **to deliver world-class customer experience**, **quality and safety of care to our patients**. At KFSHRC-J, Patient experience (PEx) is measured through the Press Ganey surveys. Executives and teams are responsible for the outcomes achieved in outperforming the PEx benchmarks. Nursing Affairs addresses this strategic objective through its departmental and unit goals.

Kathy Sienko O.B.E., BSN (Hon), MSc, FInstLM, the Executive Director, Nursing Affairs (ED, NA), conducts regular rounds on the nursing units, usually three times per week. This enables her to meet with staff, review the clinical environment, hear from patients, and dialogue with care delivery staff. Registered Nurses (RNs), i.e., clinical nurses, also take the opportunity of these visits to approach the ED, NA on personal and professional issues that are of concern to them.

During her rounds, two of the RNs on the Oncology unit, Maria Mendoza, BSN RN, and Kemban Tan, BSN RN, raised their concerns about the food service to patients, especially those on isolation precautions. At this time, the Infection Control and Hospital Epidemiology (ICHE) team had advised that to limit exposure to and spread of COVID-19, only nurses should serve food to patients on isolation precautions.

The practice was that the food services staff would deliver the food to the unit. If no nurse was available, the food would be left either at the nursing station or on a table outside the patient's room until a nurse was available to deliver it. Nurses told the ED, NA, that in many cases, the food was often cold by the time they were available to deliver the food to the patient and that the patients were naturally dissatisfied with the temperature of the

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food. A review of the data showed that in May 2021, the level of patient satisfaction with "The temperature of food" on the Oncology unit was 30.68.

Table TL9EOa.1: Attendees to the Kick-off Meeting

Name & Credentials	Job Title	Department
Kathy Sienko O.B.E., BSN (Hons) RN, MSc, FInstLM	Executive Director	Nursing Affairs
Alanoud Abualsaud, MSN RN	Program Director	Nursing General Services
Mohammad Al Hroub	Infection Control Coordinator	ICHE
Rania Makki	Head	Food Services Department
Maria Mendoza BSN RN	SNI, Clinical Nurse	Oncology
Kemban Tan, BSN RN	SNI, Clinical Nurse	Oncology
Neda Abu Ahmed	Supervisor	Food Services Department
Ahmed Al Ghareeb	Supervisor	Food Services Department

Goal Statement

Improve the mean score on the Press Ganey patient satisfaction survey for the question: "The temperature of food" on the Oncology unit at KFSHRC-J.

Description of the Intervention

During their two-weekly 1:1 management meeting held on June 15, 2021, the ED, NA shared with Alanoud Abualsaud, MSN RN, Program Director for the adult Oncology unit, the concern raised by the two nurses. Alanoud confirmed that she was aware of this issue and that there had been some reluctance to change the practice because of legitimate concerns about the spread of COVID-19. She agreed that the patient satisfaction data was very low in May 2021.

The ED, NA proposed contacting the heads of Infection Control and Food Services in the first instance to hear their perspective on the issue and to call a meeting of all relevant parties. The ED, NA telephoned the Infection Control Coordinator Mohammad Al Hroub, BSN RN, CIC, to discuss whether it would be possible to change the food services delivery practices regarding isolation patients to enable trained Food Services staff to deliver the meals. A similar call also took place with the Head of Food Services, Rania Makki. All parties decided that a meeting should be convened to discuss and explore potential solutions. The first meeting was held on June 28, 2021, and the attendees are shown in Table TL9EOa.1.

At the meeting on June 28, 2021, the attendees agreed to convene a project team whose role would be to identify potential solutions, develop an implementation plan, and escalate issues for resolution as required. The project was then assigned to Alanoud under the ED, NA's sponsorship. Prior to the first project team meeting, it was decided to invite additional members who could add value to the work. These were Mohammed Hamadi, Director, Support Services, and Nada Turkestani, BSN RN, Nurse Clinician, adult Oncology unit. Project team meetings were held on:

- July 04, 2021
- July 29, 2021
- August 18, 2021
- August 25, 2021

At the meeting on July 29, 2021, the project team reviewed and amended the food service process and agreed to use it on the adult Oncology unit starting August, 03, 2021.

Prior to commencing, the following activities were undertaken:

- An information session was conducted for HNs, Nursing Staff, and Food Services staff.
- After the training, an email was sent to all with instructions and requirements for implementation. See Figure TL9EO.1 below.
- Resource persons from Nursing and Food Services were identified.

From: ABUALSAUD, ALANOUD USAMAH

Sent: Thursday, July 29, 2021 12:17 PM

To: ALGHAREEB, AHMED < n3514084@kfshrc.edu.sa >; OUM FZZINE, MOUNIR < n3532233@kfshrc.edu.sa >; ABU AHMED, NEDAA MOHAMMED < nabuahmed@kfshrc.edu.sa >; HAMADI, MOHAMMED ABDUH < mhamadi@kfshrc.edu.sa >; AL HROUB, MOHAMMAD KAMAL < malhroub97@kfshrc.edu.sa >; TURKESTANI, NADA ABDULAZIZ < nturkestani@kfshrc.edu.sa >

Subject: Food Delivery to Isolation Rooms Trial - Adult Oncology, 5 N, 5 S

Dear All,

Thank you for attending the meeting today. The agreement was as following:

- Food delivery will be done by the food attendant to isolation room by knocking the door and handing the food to the sitter. (No room entry)
- If the sitter did not respond, the food attendant will call the nurse for help.
- Nursing will create a form contains information about isolation and sitter status. The form will be completed by the CN and handled to the food attendant when he/she arrives in the unit.
- Food Services will create a checklist to collect information about who delivered the food and challenges if any.
- The trial will be in 4th Floor Adult Oncology and 5th Floor, 5 North and 5 South.
- Education for Nursing and Food Services will be conducted on the 1st and 2nd of August.
- The trial will start Tuesday, 3 August to 19 August.
- Forms should be collected by Food Services and reviewed daily by Food Services.

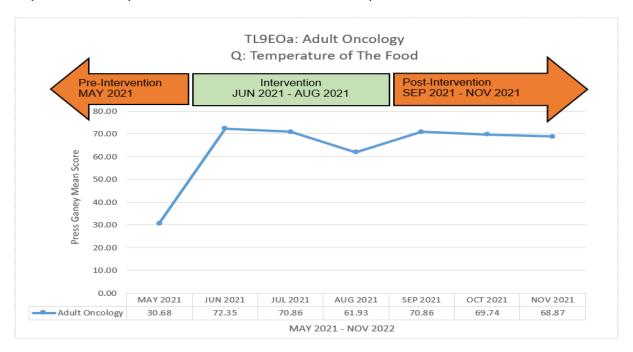
Please send me the forms to review as soon as it is completed.

Figure TL9EOa.1: Email On Food Delivery to Isolation Rooms Trial

Outcome

Based on the change in practice, patient satisfaction scores with the temperature of meals increased in the intervention periods and were maintained consistently above the May 2021 baseline.

Communication between clinical nurses and the ED, NA led to the investigation of the concerns raised by nurses about the temperature of the food being served to patients on the Oncology unit, the collaborative implementation of practice changes, and a sustained improvement in patient satisfaction as seen in Graph TL9EOa.



Graph TL9EOa: Temperature of Food Satisfaction