

Standardizing Initial Nursing Assessment Across Two Academic Medical Centers

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Introduction: The primary purpose of the initial nursing patient assessment is to gather data and information necessary to support nursing judgment and care planning. In preparation for moving to electronic nursing documentation two Academic Medical Centers (AMCs) within the Partners HealthCare System chose to standardize their current nursing assessment content. Brigham and Women's Hospital (BWH) and Massachusetts General Hospital (MGH) will implement the MetaVision (MV) documentation system to electronically enter nursing assessment information.

Methods: In order to successfully standardize the Initial Nursing Assessment (INA) across two AMCs we first set out to reach agreement, based on best practice, on what should constitute the initial patient assessment. Following this work we developed a set of principles that would guide design and development decisions for the electronic assessment. To achieve our objective we followed the following steps:

1. Accelerated Design Sessions (AD): to identify the assessment content ' Clinicians from both MGH and BWH came together to review and reach consensus on the list of potential assessment data elements ' The sessions were structured to drive consensus around defined topics
2. Joint Nursing Assessment Task Force: to determine which data elements to include in the INA ' Reviewed best practice of nursing admission assessment ' Established guiding principles to inform the 'build' of the electronic INA ' Tested/validated the guiding principles against AD assessment content.
3. Electronic Initial Nursing Assessment build sessions ' Using the established guiding principles, subject matter experts (SMEs) were convened to determine which of the AD content would be included or excluded from the INA.

Results: The guiding principles which were developed in the Joint Nursing Assessment Task Force were applied to the 'build' process. There was overwhelming consensus that these guidelines helped the build team to make more informed decisions regarding the inclusion/exclusion of assessment content. Feedback from the SMEs who participated on the build team reported that by using the 'guidelines' they were much less likely to make decisions based on tradition/habits/old ways. As a result a multi-site, standardized, electronic initial patient assessment was built and approved for use.

Discussion: We engaged in a very successful initiative to standardize the Initial Nursing Assessment across two AMCs. Integral to this success was the strategic pre-planning that was done to identify:

1. The right process: A project charter with a clearly defined scope, Specific goals for each meeting with structured discussions, Each meeting built upon the consensus achieved from previous meeting, A structured process which valued participation and input from bedside nurses
2. The right people: Nursing leadership, Novice and expert clinical nurses, Skilled nursing leadership facilitators
3. The right goals: Task force members were able to focus on the on the goals and objectives of the work and were able to leave behind 'the way we have always done it' for the sake of a successful improvement initiative. As a result, the task force believed that the end product was even better than they had expected.