



“We Like Being Pioneers”



An American Heart Association® and Laerdal Program



Baylor Scott & White Surgical Hospital – Fort Worth, located in Fort Worth, Texas is certified by The Joint Commission and performs a broad range of inpatient and outpatient surgical procedures.

Baylor Surgical is a Center of Excellence in Hip/Knee and Spine Surgery and holds Press Ganey Guardian of Excellence status in patient experience scores.

PROVIDER STORY

Being a facility that does not experience frequent code events, **Baylor Scott & White Surgical Hospital – Fort Worth** turned to Resuscitation Quality Improvement® (RQI®) to transform their approach to resuscitation. As a result, they’ve experienced major savings in man-hours while managing to keep their staff satisfied and compliant.

“I would sum it up to say being less manual and more technology getting our teams to look at solutions using new methodologies, not another piece of paper. We like being pioneers.”

– *Laura Sittler,*
Chief Operating Officer & Chief Nursing Officer
Baylor Scott & White Surgical Hospital – Fort Worth



CHALLENGE

Baylor Scott & White Surgical Hospital at Fort Worth is a small hospital, but also a busy one. “280 staff is the headcount,” Laura Sittler, Chief Nursing Officer and Chief Operating Officer at Baylor Surgical said in reference to their number of staff members. “And we have 30 beds, including four ICU beds. We are full all the time, so bed space is at a premium. We do an enormous amount of surgery. We do roughly 800 to 900 procedures a month. We’re very busy.”

Because of the high amount of traffic Baylor Surgical experiences every day, keeping staff CPR certifications compliant was taking a substantial toll on hospital leaders, both financially and in terms of man-hours. “Relieving people for eight, 10 hours a day to go to a course, and then, of course, it’s every month because somebody is going to be expiring all the time,” Sittler said. “We’re sending people out continuously through the year. They go for their [BLS card], next month they go for their ACLS. There was no rhyme or reason to how we could orchestrate it. It was basically reactionary. [We kept] trying to cover our tracks making sure nobody was going to expire.”

Linda Marshall, Baylor Surgical’s Director of Human Resources, agrees. **“The administrative piece of it is making sure they’re notified, keeping track of who’s expiring this month, next month, and making sure they know, and their manager or director knows,”** Marshall said. “Getting them into that class in time. It’s a lot of work.” “It’s a full-time job, trying to keep up with that,” Sittler added.

For more information, visit us at www.RQIPartners.com

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Resuscitation Quality Improvement:

- Provides a high-reliability platform for simulation-based mastery learning implemented through low-dose, high-frequency quality improvement sessions that measure and verify CPR competence and award a new AHA eCredential upon completion
- Supports mastery of High-Quality CPR skills through feedback-driven deliberate practice
- Skills sessions last approximately 5-10 minutes per quarter while cognitive learning activities last up to 35 minutes per quarter
- Administrators will have analytic data related to all activities performed. Tracking of performance and related continuous quality improvements initiatives related to resuscitation can be tracked and monitored.
- Simulation stations deployed at locations conveniently accessed 24/7 by students, allowing skills modules to be completed during the normal shift
- Comprehensively addresses the competence-based requirements for accreditation as established by The Joint Commission



SOLUTION

To help manage the daunting task of managing their staff's CPR compliance, Sittler looked toward the Resuscitation Quality Improvement (RQI) program. In addition to providing Baylor Surgical leaders some much-needed relief, RQI also appealed to Sittler by addressing the need for improving patient safety in the event of a code. "I was actually introduced to RQI at a facility that I worked at previously," Sittler said. "As a Chief Nursing Officer at that facility, I had close to 400 beds. We were an inner city, very large, tertiary hospital with a level two trauma service. That's how I was introduced to the concept of RQI." After pitching how RQI could revolutionize their facility, Sittler and Marshall said that hospital leadership quickly moved to support their initiative. RQI was adaptable to both large and small facilities.



IMPLEMENTATION

While implementing RQI, Sittler and Marshall noticed some resistance from certain staff members. "I think some of the staff were a little apprehensive about it just because it was new," Sittler said. "It held them accountable. Instead of showing up once every two years, now they're having to do it on a regular basis."

Once staff understood the benefits of RQI, though, their resistance began to disappear. "I don't think anybody really is resistant to it anymore," Sittler said. "I think most of them like it because the thing they didn't realize was how poor their skills really were. In fact, the first time I did the manikin, I didn't pass it, but I told the group, 'I'm going to do this, and you're going to see, I'm going to pass this because it's doable. Everybody can do this.'"



RESULTS

Improved staff satisfaction and improved CPR skills are only some of the ways Baylor Surgical has benefited from RQI implementation. When asked about how RQI's analytics suite has impacted their efficiency in managing compliance, Sittler responded "I like it because I know that I have a tracking mechanism to look at compliance. It's just nice to have that so that we're not spending personnel time building spreadsheets and documents that can't even be queried." Marshall echoed her thoughts. "It helps us keep a better eye on [compliance rates]. It's an easy system. I can pretty much just do it really quickly, whereas before it was a very manual process."

When asked if RQI had contributed to a change in culture at Baylor Surgical Hospital at Fort Worth, Sittler and Marshall both responded affirmatively. "The technology is there and it'll help you," Marshall said. "I think it's one more step to prove to the whole staff that this is the direction we're going. This is the way we're moving and to embrace it."

"I would sum it up to say being less manual and more advanced technology getting our teams to look at solutions using new methodologies, not another piece of paper. We like being pioneers."