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## TRANSFORMING CARE AT THE BEDSIDE (TCAB)

*The RN Labor Management Initiative (RNLMI) provided program support to several Med/Surg units seeking to engage frontline staff in TCAB – a quality improvement program intended to increase the amount of time nurses and other members of the health care team spend at the bedside.*

**The Challenge:** Hospitals face increasing pressure to improve the quality and safety of patient care, reduce waste in work processes, and increase the satisfaction and retention of staff members. Making quality improvements on medical and surgical units often requires a precise understanding of how daily work processes might be altered so front-line staff can spend more time in direct patient care and less time engaged in non-value-added activities.

**The Solution:** In 2010, Transforming Care at the Bedside (TCAB) was piloted in Med/Surg units at several 1199 RN institutions, including Beth Israel Brooklyn (3N), Montefiore North (3N), and North Shore Forest Hills (4N). TCAB is one of many quality improvement programs designed to improve patient care and satisfaction. TCAB was developed by the Robert Wood Johnson Foundation (RWJF) and the Institute for Healthcare Improvement (IHI). TCAB creates a framework for multi-disciplinary teams to work together, review data related to work processes, analyze problems, implement changes, and evaluate outcomes. TCAB participants include representatives from all areas of the patient care team (e.g., nurses, managers, physicians, pharmacists, therapists, nursing assistants, transporters). Beth Israel Brooklyn (1 North) and Beth Israel Petrie (7 Linsky) are currently engaged in TCAB.

**The Results:** TCAB teams at each hospital, with assistance from the RNLMI, conducted “RN Time Studies” to evaluate the amount of time nurses engaged in non-value-added activities. Using PDA-based software, the nurses tracked the tasks that took them away from the bedside during their shifts. The analyses revealed that nurses were spending excessive amounts of time engaged in activities that kept them from direct care. For instance, one TCAB team found that RNs were spending approximately 30 minutes more than the national average (per trip) waiting for patients’ medications at the pharmacy. It solved this problem by working with the pharmacy and IT departments to create an electronic medication request program to replace its paper process. The new system decreases the amount of trips staff makes to the pharmacy and increases the efficiency of pharmacy runners - allowing nurses and nursing assistants to spend more time in direct patient care. At Beth Israel Brooklyn, TCAB increased the amount of time nurses spent in direct patient care (a 35% increase in daily assessment and 49% increase in discharge processes). TCAB also significantly improved RN satisfaction scores at the same hospital.

