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<th>Core Interventions</th>
<th>Operationalization</th>
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| Relationship-Based Care                       | Tactics to hardwire the philosophy of relationship-based care *(e.g. patient/family included in patient rounds and plan of care)*:  
- Reinforce multi-disciplinary rounds  
- Establish morning huddles  
- Assignment of ARN’s to specific side for continuity of care |
| Attending Nurse Role (ARN)                    | ARN assignment: 16 patients  
# ARNs day/ eve: 2  
Shifts covered: days  
Days of week:: Mon-Fri  
Primary functions:  
- Start discussion of estimated discharge date, disposition at admission  
- Enhance communication between team members  
- Enhance patient experience  
- Enhance discharge process and ensure clear post hospital communication  
- Discharge phone calls  
- Presence during bedside rounding with MD teams |
| SBAR Handover Rounding Guideline              | SBAR Handover Rounding Guidelines will be used for:  
- Shift to shift report  
- Transfer of patients  
- Patient issues |
| Key Pre-Admission/Admission Data              | Upon admission, estimated discharge date and discharge disposition will be documented.  
- Dates will be documented in nursing notes/ CM notes/ ARN notes  
- EDD will be placed on white board in patient room |
| Innovation Unit Patient and Family Notebook for Patients and Families | Nurse to review packet with the patient upon admission. ARN to encourage its daily use by patient, family and care team.  
- Material will be introduced on admission and when appropriate throughout hospitalization to prepare patient for a safe discharge |
| Domains of Practice                           | Maximize scope of service for all of the health care disciplines. |
| Interdisciplinary Team Rounds                 | Time of rounds: 11am -11:45am  
Role groups to participate: Staff RN, Resource RN, Medical team, Case Manager, Social Worker, PT, OT, Speech, Dietary and ARN’s  
- In addition to the MDR at 11am, the Neuromedical teams participate in bedside rounding. Nurses are encouraged to attend. The ARN will be involved in these rounds when possible as well. |
| White Boards                                  | Electronic  
- Strategically placed on unit to facilitate patient placement, discharge planning, throughput, etc. Will review key white board indicators to see if EDD could be placed on these boards as well.  
In Room  
- Update daily with nurse name and patient goal(s). |
| Voalte Communication | Facilitates timely two-way communication.  
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| Toughbook utilization by ARNs | Uses:  
|                       | • SBAR Handover Rounding Guidelines  
|                       | • Discharge readiness tools |
| Implement Discharge Follow-up Phone Calls | Use paper tracking sheets until Studer software installed.  
|                                           | • Patients called 24-48 hrs post-discharge.  
|                                           | • ARN will make this call the day after discharge.  
|                                           | • May have weekend Resource Nurse do as well. |
| Quiet Hours | Efforts to minimize/reduce noise and interruptions in patient’s environment.  
|            | To be determined:  
|            | • “Quiet” methods used- private rooms help with this. Patients’ doors will be closed when possible for increased restfulness.  
|            | • Hours: 1:30-3pm; 10pm-5am |
| Discharge Readiness Tool | In development at PHS level |

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| Partnering with Lunder 6 and Lunder 8 to improve communication throughout the Neurosciences | • Meetings to be scheduled between Unit Leadership and then to include ARN’s  
|                                                                                      | • Unit ARNs from the Neurosciences will establish meetings based on established needs of patients |
| Establishment of Quiet Hours | Signs will be developed to support initiative. Will share success of Innovation Units with regard to this implementation. |
| Morning Huddles | ARN’s will establish morning huddles with team members on their side of the unit to highlight patient care needs and safety issues. This will help to foster teamwork and a culture of safety. |