(9207-LMT)

Nurses Are from Mars, Lab Techs Are from Venus: Interprofessional Collaboration in the Workplace

October 7, 2012 \Leftrightarrow 8:30 AM - 10:00 AM



Event Faculty List

Event Title: 9207-LMT: Nurses Are from Mars, Lab Techs Are from Venus: Interprofessional

Collaboration in the Workplace

Event Date: Sunday, October 7, 2012 Event Time: 8:30 AM to 10:00 AM

Director/Moderator

Olive Sturtevant, MHP, MT(ASCP)SBB, SLS,

CQA(ASQ)

Quality Assurance Director
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Disclosures: No

Speaker

Bethany King, MS Cellular Therapies QI Analyst Dana Farber Cancer Institute

bking3@partners.org Disclosures: **No**

Speaker

Elizabeth Hart, MA, CLS, MT(ASCP) Lecturer; Clinical Laboratory Scientist

University of Massachusetts-Dartmouth; Faulnker

Hospital

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Disclosures: No

Speaker

Colleen West, RN, BSN, MBA, CPHQ

Nursing Director: Quality and Magnet Programs

Dana Farber Cancer Institute

CMWest@partners.org

Disclosures: No

9207-LMT

Nurses are from Mars, Lab Techs are From Venus: Interprofessional **Collaboration in the Workplace**

Elizabeth E. Hart, MA, MLS (ASCP)^{CM} Faulkner Hospital and University of Massachusetts-Dartmouth beth.hart@umassd.edu





Objectives

- Review how each employee's professional background influences perspective in the workplace.
- Discuss how understanding these professional differences can ease communication and improve workflow.
- · List ways to help build a culture of understanding between professionals with differing backgrounds.

Lab Techs are from Venus

Clinical Laboratory Professionals

CLS: 165,220

Venus

Distance from sun

0.72 AU

Distance from Earth

CLT: 156,860 0.819AU

Total: 322,080 Equatorial diameter

12,104 km

Temperature -44C to 500C

www.bls.gov



Nurses are from **Mars**



Mars **Nursing** Distance from sun **Professionals**

1.66 AU

Distance from Earth

RN: 2,724,570

1.792 AU

LPN: 729,140

Equatorial diameter

Total: 3,453,710 6,787 km

Temperatures -140C to 20C

ww.bls.gov

Venus, Earth, and Mars



CLS and Nurses Live and Work HERE!

Mission Statement PARTNERS.



Faulkner Hospital strives to attain excellence in patient care services, provided in a learning environment with dignity, compassion and respect.

This is the mission of the entire healthcare team & nowhere does it say, "Mission Impossible"

Laboratory Diagnostics

Based significantly on laboratory reports and tests results

- **□Data-driven**
- □ Patient history
- Medications
- □Current status

Nursing Diagnosis

Based on clinical evaluations during assessment AND data

- □ Patient
- □ Family
- ☐ Response to stimuli
- □ Potential health risks
- □Lifestyle
- **□** Community

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| Complete and Accurate Diagnosis | |
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| □Examination of signs and symptoms ❖Current patient status | |
| □Medical history □Clinical Data | |
| □Characterization of pathogen(s) | |
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| Laboratory Data and Diagnostics | |
| ☐ Number of discharges: 36.1 million ('11) | |
| ☐ Number of outpatient visits: 96.1 million ('11)☐ Number of laboratory tests performed in U.S. | |
| 6.8 billion (2007) | |
| It is estimated that >70% of medical decisions are based on clinical laboratory | |
| information | |
| <u>www.cdc.gov</u> | |
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| Venus and Mars working together | |
| □Second blood type specimens- ABO2 | |
| ☐Hemolyzed blood specimens | |
| ☐Blood Cooler for Operating Room☐Transfusion Reactions | |
| ☐Administering blood products | |
| | |

ABO₂

Venus

What?

 Second BB specimen drawn > 20 minutes from first venipuncture

When?

 No previous blood type history

Why?

- Confirmation of correct patient blood type
- Prevent incorrect patient ID and tech errors

Mars

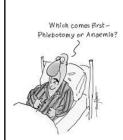
Another venipuncture

What? • Anot! When?

 They have a history at hospital **X**

Why?

- Don't you trust us?
- Don't you know what you're doing down there?





Hemolyzed blood specimens

Venus

- Hemolyzed specimens are NOT acceptable for most laboratory tests
- Data generated--invalid
- Inaccurate diagnosis or treatment may result
- NEED NEW SPECIMEN

Mars

- Are you sure it's hemolyzed?
- The patient was a difficult stick
- The patient is so ill and has been stuck may times
- Can't you just run the test anyway?

Hemolyzed Specimens

Currently unresolved ≥30% of blood specimens from O.R. and E.R. are hemolyzed

□Use of syringe to draw blood □Inadequate venipuncture training □Drawing from IV sites

Continuing to work with Nursing Educators

Blood Products in Critical Care Areas

Venus

- FDA requirements for blood product storage and transportation temps.
- Accommodation of need for immediate availability
- Reduce waste and potential adverse reactions

Mars

- Need products in O.R.
- Don't have time to bring unused products back to blood bank
- Don't want to have to monitor products during surgery

Blood Products in Critical Care Areas

Outcome

- ❖ Purchase of blood coolers
- ❖ Maintained and monitored by CLS
- ❖ Available to O.R., R.R., E.R., and Radiology
- ❖ Ease of use- minimal training
- Decreased response time for need of products in critical care areas
- ❖ Significant reduction in blood product waste

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Transfusion Reactions Venus Mars • STOP transfusion • Need to care for patient Notify blood bank Treat symptoms and calm patient Need to follow SOP • Need for proper documentation Need to document and draw appropriate specimens Need to work-up patient **IMMEDIATELY** Need to communicate with nurse, doctor and Need to communicate with lab pathologist Transfusion Reactions Outcome ☐ Blood Bank worked with Nursing to revise the Transfusion Reaction Forms □New SOP ❖Includes tear-off cover instruction page ❖Guide for nurses and doctors **□**Education **Administering blood products** Venus Mars • FDA requirements · Immediate need of $\sqrt{}$ Positive ID of patient product $\sqrt{}$ Initial monitoring of patient Staffing Minimize patient exposure · Protocol specific for · Limited knowledge of product blood products · Avoid adverse transfusion √ Storage reactions √ ABO/Rh compatibility · Limit product waste

Administering Blood Products

Outcome

❖ New Nursing SOP

✓ Includes summary of chart of blood components and blood product compatibility tables

❖ Best Practices and Care of Patient

❖Education and communication

- ✓ CLS to Nurse Educators
- ✓ Nurse Educators to staff nurses

Common Ground: We All CARE



- **C.** Communication
- **A.** Analysis and Adaptation
- R. Respect
- E. Education and Evaluation



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Data-driven Analysis of specimens Data-driven Analysis of specimens Data-driven Analysis of specimens Analysis of specimens

| Comprehensive and Accurate Diagnosis Examination of signs and symptoms Current patient status Medical history Clinical Data Characterization of pathogen(s) | |
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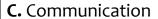
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Bethany King, MS Dana-Farber Cancer Institute bking3@partners.org





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- Review how each employee's professional background influences perspective in the workplace.
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Can Professional Training Cause Arguments?



Agenda

- Why we choose our profession
- Why professional training matters in the workplace
- Why we should value professional diversity in problem solving
- How do we use this knowledge to form effective multidisciplinary teams

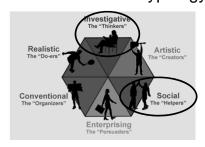
How Did We Get Here?



- 4 factors influence career choice
 - values
 - educational system
 - emotion
 - reality

Ginzberg, Ginsburg, Axelrad, Herma (1951)

Holland's Career Typology



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Why Does Profession Matter?

We tend to focus on other differences when we run in to communication issues:



- older/younger
- personality differences
- communication styles



| | Solves Broad Medical Problems | Solves Specific or Specialized Medical Problems | High Social Interaction | High Computer/ Machine Interaction |
|------------|--|---|----------------------------|---|
| MD | ✓ | √ | ✓ | |
| Researcher | | ✓ | | ✓ |
| Nurse | ✓ | | √ | |
| Lab Tech | | ✓ | | √ |

Understanding Others – What's the Problem?

- People tend to sort themselves in to professions based on personality traits they may not even realize they have
- Each profession has their own niche of specialized knowledge
- Transitions in care are where the errors occur

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Group Diversity Matters



- Groups have a higher IQ when they can respect each other
- Reading others emotions in groups is more important than motivation, satisfaction or unity
- This empathy can be built in under 10 minutes and last for up to a year

Back to the Earth

- Reflect on why you chose your own profession and what it means to you
- Make friends!
- Acknowledge differences
- Celebrate this diversity



Thank you!



Email: bking3@partners.org

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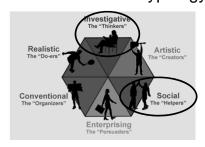
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Colleen M. West RN, BSN, MBA, CPHQ Nursing Director: Quality and Magnet Programs Dana-Farber Cancer Institute Boston, MA cmwest@partners.org

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Nurses are from Mars?



Gender Differences in Communication

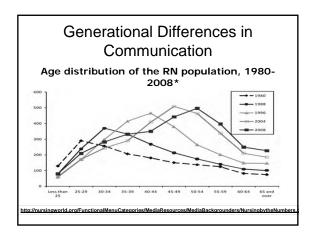
Male

- Content focus ■ "Just the facts"
- Female
- Relationship focus
- Detail oriented
- *Over 93% of nurses are female

Setting Expectations: SBAR Communications

- Situation
- Background
- Assessment
- Recommendation

Communication Conflicts THEY WERE PROCESSED INCORRECTLY BY YOUR BRAIN !!!



| | Veterans (1922-1945) | Baby Boomers (1946–1964) | Generation X (1965–1980) | Generation Y (1981–2000) |
|---------------------------|---|--|---|---|
| Work Ethic and Values | Hard work Respect authority Sacrifice Duty before fun Adhere to rules | Workaholics Work efficiently Crusading causes Personal fulfillment Desire quality Question authority | Eliminate the task Self-reliance Want structure and direction Skeptical | What's next Multitasking Tenacity Entrepreneurial Tolerant Goal oriented |
| Work is | An obligation | An exciting adventure | A difficult challenge A contract | A means to an end Fulfillment |
| Leadership Style | Directive Command-and-control | Consensual Collegial | Everyone is the same Challenge others Ask why | *TBD |
| Interactive Style | Individual | Team player Loves to have meetings | Entrepreneur | Participative |
| Communications | Formal Memo | In person | Direct Immediate | E-mail Voice mail |
| Feedback and Rewards | No news is good news Satisfaction in a job well done | Don't appreciate it Money Title recognition | Sorry to interrupt, but how am I doing? Freedom is the best reward | Whenever I want it, at the push of a button Meaningful work |
| Messages That Metivate | Your experience is respected | You are valued You are needed | Do it your way Forget the rules | You will work with other bright, creative people |
| Work and Family Life | Ne'er the twain shall meet | No balance Work to live | Balance | Balance |
| | *As this group has n | ot spent much time in the world | orce, this characteristic ha | s yet to be determined |

Nursing Profession: Ethics and Collaboration

Nightingale Pledge:

• "...I will do all in my power to maintain and elevate the standard of my profession,..."

ANA Code of Ethics for Nurses
Provision 2.3

• "...collaboration requires mutual trust, recognition, and respect among the health care team"
Provision 6.3

• "the nurse is responsible for contributing to a moral environment that encourages respectful interactions with colleagues, support of peers, and identification of issues that need to be addressed".

http://www.nursingworld.org/FunctionalMenuCategories/AboutANA/WhereWeComeFrom/FlorenceNightingalePledge.aspx

Nursing Experience

- The last hour of the night shift
 - Patients are waking up
 - Morning lab results obtained—Critical Results called back
 - Preparing for change of shift



Issue: Early AM Lab Results

- "I drew my patient's blood at 5am, the results are still not back"
- "Why can't all of our patients have their bloods drawn with results back by the time physicians make rounds?"
- "How can everyone expect to be first?"

Finding Common Ground

- As healthcare professionals, our aim is to provide excellent patient care no matter which role
 - Some times it is hard to see the "forest through the trees"
- Many difficulties result from system issues, time constraints, multiple demands & pressures
 - Less awareness of each other's work environment can increase tension & opportunities for misunderstanding