Final Report for
Evaluating Nurse Staffing Practices in
C.S. Mott Children’s Hospital General Care Units

University of Michigan Health System

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Table of Contents

**Executive Summary** .................................................................................................................. 1

**Introduction** ............................................................................................................................... 4

**Background** ................................................................................................................................. 4

- Key Issues ....................................................................................................................................... 5
- Goals and Objectives ...................................................................................................................... 5
- Project Scope ................................................................................................................................. 5

**Methods** ....................................................................................................................................... 5

- Performed Literature Search ........................................................................................................ 5
- Conducted Observations in the General Care Units ........................................................................ 6
- Conducted Interviews in the General Care Units ........................................................................... 6
  - Team Leader Interviews ............................................................................................................. 6
  - Nursing Contact Interviews ....................................................................................................... 6
- Distributed Employee Surveys ....................................................................................................... 7
  - Bedside Nurse Surveys ................................................................................................................ 7
  - Physician Surveys ....................................................................................................................... 7
  - Case Manager Surveys ................................................................................................................ 7
  - Social Worker Surveys ................................................................................................................ 8
- Distributed Patient Surveys to Previous Patients ......................................................................... 8
- Collected and Analyzed Existing Data .......................................................................................... 8
  - Patient Care Data ....................................................................................................................... 8
  - Employee Satisfaction Data ........................................................................................................ 8
- Cost Data ......................................................................................................................................... 9

**Findings** ....................................................................................................................................... 9

- Literature Search: Team Leader Positions are Beneficial .............................................................. 9
- Observations: There is Variation Between the Four General Care Units ......................................... 9
  - Unit 12E ....................................................................................................................................... 9
  - Unit 12W .................................................................................................................................... 10
  - Unit 11W .................................................................................................................................... 10
  - Unit 7E ....................................................................................................................................... 10
- Interviews: Team Leader Position Responsibilities Benefit Multiple Groups ................................. 10
- Interviews: Each General Care Unit Has Different Nurse Staffing Practices ............................... 11
- Nurse Surveys: Team Leaders Allow Bedside Nurses to Focus More on Patients ....................... 12
- Bedside Nurse Weekend/Night Surveys: Bedside Nurses Able to Attend Rounds ...................... 13
Physician Surveys: Nurse Representative is on Rounds Most Frequently on Unit 12E ........13
Case Manager Surveys: Case Managers Know Nursing Contacts on Units 12E and 12W ......15
Social Worker Surveys: Not Conclusive .................................................................16
Patient Surveys: Sample Size Not Sufficient .......................................................16
Existing Data: Patients on Unit 12E Felt Most Ready for Discharge .....................16
Existing Data: Employee Satisfaction is Highest on Unit 12E .................................18
Existing Data: Cost Data Obtained is Not Relevant to Project .................................18

Conclusions .............................................................................................................18

Each unit has different staffing practices ..............................................................18
Team Leader position is beneficial to Unit 12E .....................................................18
Same positions across units have different responsibilities .................................19
Similar Team Leader position exists on Unit 12W ..............................................19

Recommendations .................................................................................................19

Implement Similar Team Leader Position on Units 11W and 7E .................................19
Standardize staffing practices across four general care units ..............................19

Expected Impact ....................................................................................................20

References ...............................................................................................................21

Appendix ................................................................................................................22

Appendix A: Interview Questions for Team Leader ................................................22
Appendix B: Nursing Contact Interviews Staff Responsibility Matrix ....................23
Appendix C: Nursing Contact Interview Staff Responsibility Allocation Sheets ........25
Appendix D: Beside Nurse Weekday Day Shift Survey .........................................29
Appendix E: Bedside Nurse Weekend/Night Shift Printed Survey .........................33
Appendix F: Bedside Nurse Weekend/Night Shift Electronic Survey .......................34
Appendix G: Physician Electronic Survey ...............................................................35
Appendix H: Case Manager Electronic Survey .......................................................37
Appendix I: Social Worker Electronic Survey .........................................................39
Appendix J: Patient Experience Electronic Survey ..................................................40
Appendix K: Current Team Leader Responsibility Distribution Matrix ..................43
Appendix L: Bedside Nurse Day Shift Survey Results ............................................44
Appendix M: Physician Electronic Survey Results .................................................46
Appendix N: Future team Leader Responsibility Distribution Matrix ......................47
List of Tables and Figures

Table 1: Summary of Benefits of Team Leader Position to Different Groups ........................................11
Figure 1: Subset of Current Team Leader Responsibility Distribution .............................................12
Figure 2: Frequency of Bedside Nurses and Nursing Representatives on Physician Rounds ...............12
Figure 3: Nurse Response Whether Team Leader or Similar Position Impacts Bedside Nurses’ Ability to Focus on Patients .........................................................................................................................13
Figure 4: Physician Response on Whether Nurse Representative is Always Present on Rounds 14
Figure 5: Physician Response on Whether Team Leader and Nursing Care Coordinator Improve Communication ..........................................................................................................................15
Figure 6: Case Manager Response on Whether They Know Nursing Contact in Each Unit .............16
Figure 7: Patient and Family Readiness for Discharge Across the Four General Care Units ............17
Figure 8: Average Patient Length of Stay in General Care Units .......................................................17
Figure 9: Employee Satisfaction Data Across the General Care Units ..........................................18
Executive Summary

C. S. Mott Children’s Hospital in the University of Michigan Health System wanted to determine the value of the Nurse Rounder model on Unit 12 East (12E). Mott administration would like to know the effectiveness of this model and whether or not it would be feasible to implement it in the other general care units. Additionally, there is a lack of standardization of roles and responsibilities across the four units. As a result, the hospital has asked an Industrial and Operations Engineering (IOE) 481 team to study staffing practices across the four general care units. The team has completed a literature search, observations, interviews, surveys, and existing data analysis. Furthermore, the team has developed recommendations regarding implementing the Nurse Rounder model in the other general care units and standardizing nurse staffing across the four general care units.

Background

Nurses on Unit 12E found it difficult to attend physician rounds for all of their patients. This is because they are caring for multiple patients, and often more than one physician group rounds at the same time. To address this issue, Unit 12E created the Team Leader position. This position makes up the Nurse Rounder model, which has not yet been quantitatively evaluated. Therefore, Mott administration is interested in the effectiveness of the model before moving forward on making it policy throughout the hospital.

This project was focused on patient and employee satisfaction regarding the Nurse Rounder model on Unit 12E. The other general care units evaluated were Unit 12 West (12W), Unit 11 West (11W), and Unit 7 East (7E), in order to identify the impact of the Team Leader role. All units other than the four general care units were outside of the project scope. In addition, the team did not include data prior to 2011, when the hospital moved to its new location.

The following key issues are driving the need for this project:
• The effectiveness of the Nurse Rounder model on Unit 12E has not yet been evaluated
• An analysis of the impact of the Team Leader is needed to establish hospital-wide policy

Methods

The team used numerous data collection methods to gather data for the project analysis.

Literature search

The team used three academic papers from the University of Michigan Library database and a previous IOE 481 Senior Design report to form the approach for assessing the Team Leader role. The articles allowed the team to benchmark the Team Leader position to other hospitals.
Observations
The team completed 45 hours of observations on the four general care units to understand the Team Leader role on Unit 12E, and how responsibilities are distributed amongst the four units.

Interviews
The team interviewed the two Team Leaders on Unit 12E, asking questions that clarified the role and responsibilities of the Team Leader. The team also interviewed the nursing contact for each general care unit. The nursing contact for Units 12E and 7E was their Clinical Nurse Specialist, while the nursing contacts for Units 12W and 11W were the Nursing Care Coordinator and the Nurse Educator, respectively. During the interviews, the nurse contacts provided insight to how the responsibilities of the Team Leaders are distributed in each of the general care units.

Surveys
The team administered surveys to 65 bedside nurses. Surveys were also sent to physicians, case managers, and social workers who work on the four general care units to determine the impact of the Team Leaders on Unit 12E and the Nursing Care Coordinator on Unit 12W on their work. Patient surveys included questions regarding patient and family satisfaction with discharge, parent and family education, rounding practices, and communication between the patient and the hospital staff.

Patient Care Data
The team received patient satisfaction data from January 2012 to June 2015 with overall satisfaction ratings across the four general care units as well as results from specific questions. The team analyzed results from specific questions pertaining to the Team Leader position. The team also obtained patient length of stay data for the four general care units.

Employee Satisfaction Data
The team obtained employee satisfaction data for the four general care units across four different domains: Employee Domain, Manager Domain, Engagement Indicator, and Organization Domain. This data was used to determine staff satisfaction on units with and without the Team Leader position.

Cost Data
The team met with a member of Mott administration to receive data including Hours Per Patient Day (HPPD), Full-Time Equivalent (FTE), and census data to assess the Nurse Rounder model. This data was not utilized in the final project analysis.

Findings, Conclusions, and Recommendations
The findings, conclusions, and recommendations from each method are summarized in Table E1 below. The team recommends that two Team Leaders be implemented in each general care unit along with standardization of the nursing roles and responsibilities.
<table>
<thead>
<tr>
<th>Method</th>
<th>Finding</th>
<th>Conclusion</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Literature Search</td>
<td>Nurse care coordinator positions, similar to the Team Leader position, reduce length of stay in other hospitals</td>
<td>Positions similar to the Team Leader are beneficial to patients and hospitals</td>
<td>Additional literature search should be done for a more extensive understanding of the impact of these roles</td>
</tr>
<tr>
<td>Observations</td>
<td>The four general care units cover different services and patients require different levels of care</td>
<td>The variation in each unit has resulted in staffing practices developed specific to that unit</td>
<td>Do not implement the exact Team Leader position in 12E across the four units without further analysis of each unit</td>
</tr>
<tr>
<td>Team Leader Interviews</td>
<td>The Team Leaders on 12E have six primary responsibilities aimed at ensuring clear communication and cohesiveness within the unit</td>
<td>Team Leaders help bedside nurses focus their time on direct care and are helpful as a communication liaison</td>
<td>Implement a similar Team Leader role on each of the four general care units</td>
</tr>
<tr>
<td>Nursing Contact Interviews</td>
<td>The distribution of the Team Leader responsibilities differs greatly across the four general care units</td>
<td>The nurse responsibilities should be standardized to provide the highest level of care possible</td>
<td>Standardize the responsibilities of nurses across the four general care units</td>
</tr>
<tr>
<td>Bedside Nurse Day Surveys</td>
<td>The bedside nurses on Units 12E and 12W find that the Team Leaders and Nursing Care Coordinator allow them to focus more on their patients</td>
<td>Unit 12W has a similar Team Leader position while Units 11W and 7E do not</td>
<td>Implement a similar Team Leader role on Units 11W and 7E</td>
</tr>
<tr>
<td>Physician, Social Worker, Case Manager Surveys</td>
<td>All staff knew their nurse contacts on Units 12E and 12W but not all staff knew their nurse contacts on Units 11W and 7E</td>
<td>The Team Leaders and Nursing Care Coordinator help improve communication</td>
<td>Implement a position in 11W and 7E aimed at improving communication</td>
</tr>
<tr>
<td>Patient Care Data</td>
<td>Patients and families on Units 12E and 11W felt the most ready for discharge</td>
<td>Units 12E and 11W have an effective discharge responsibility distribution</td>
<td>Redistribute the responsibility of discharge in the three other general care units to be similar to Units 12E and 11W</td>
</tr>
<tr>
<td>Employee Satisfaction Data</td>
<td>All four general care units have high employee engagement</td>
<td>Employee engagement is the highest on Unit 12E, which may be partially attributed to the presence of the Team Leader position</td>
<td>Create a position in each of the other general care units that reduces the workload of nurses</td>
</tr>
<tr>
<td>Cost Data</td>
<td>The cost data was analyzed but no relevant findings to this analysis were discovered</td>
<td>The cost data will not be utilized in the analysis of the Team Leader position or staffing practices</td>
<td>Further analysis should be conducted without time or access constraints to pull relevant data</td>
</tr>
</tbody>
</table>
Introduction
Unit 12 East (12E) at C.S. Mott Children’s Hospital is a pediatric general care unit that treats children with needs across various medical and surgical services. Unit 12E has had the Nurse Rounder model in place for 17 years in which two “Team Leaders” round with the physician teams to improve care coordination and communication. The main responsibilities of the Team Leaders are ensuring clear communication, attending physician rounds, managing family relationships, coordinating discharge, educating patients and families, and making follow-up discharge phone calls. There has been positive verbal feedback from patients and employees on Unit 12E about the Team Leader position.

Mott administration would like to know the effectiveness of this model and whether it would be feasible to implement in the other general care units. Effectiveness, for the purpose of this project, is defined as level of patient care, employee satisfaction, and cost impact. The hospital asked an Industrial and Operations Engineering (IOE) 481 student team (Team 5) from the University of Michigan to evaluate the model by comparing Unit 12E to the other general care units in Mott. The purpose of this report is to present the data collection, analysis, and recommendations for this project.

Background
The renovated C.S. Mott Children’s Hospital at the University of Michigan Health System has been open since December 2011. Recently, the hospital and health system have undergone changes in the area of care coordination. There are multiple physician groups that round on Unit 12E including General Pediatric Medicine, Pediatric Gastroenterology, Pediatric Pulmonary, Pediatric Infectious Disease, Pediatric Surgery, Pediatric Plastic Surgery and Pediatric Otolaryngology Surgery. Due to multiple services rounding at the same time, Unit 12E found it difficult for the bedside nurse to attend every time a physician group was rounding on the unit while caring for their multiple patients. To address this issue, Unit 12E created the Team Leader position.

Two Team Leaders are on staff during the day shifts Monday through Friday. The Team Leaders are experienced nurses that oversee approximately four bedside nurses each. At full capacity, each bedside nurse cares for four patients, as there are 32 beds in the unit. The Team Leader is responsible for up to 16 patients. The role is supplemented by a core group of staff nurses who fill in when a regular Team Leader is not available.

Although positive verbal feedback from patients, nurses, and physicians regarding the Team Leader position exists, this model has not yet been evaluated. Therefore, hospital administration is interested in a data analysis on the effectiveness of the model to move forward on making it policy throughout the hospital. For the purposes of this project, employees include Team Leaders, nurses, physicians, case managers, and social workers.
Key Issues
The following key issues are driving the need for this project.

- The effectiveness of the Nurse Rounder model on Unit 12E has not yet been evaluated.
- An analysis of the impact of the Team Leader is needed to establish hospital-wide policy.

Goals and Objectives
The primary goal of this project was to evaluate the effectiveness of the Nurse Rounder model on Unit 12E and identify how the Team Leader responsibilities are distributed among the four general care units. If this model was determined to be an effective way to deliver care to patients, then it may be implemented hospital wide.

To accomplish this, the student team performed the following tasks:

- Determined how the Nurse Rounder model affects patient care
- Assessed the effect of the model on employee satisfaction
- Performed a cost analysis of the Nurse Rounder model
- Created current and future state diagrams of nurse responsibilities

Project Scope
This project was primarily focused on patient and employee satisfaction regarding the Nurse Rounder model on Unit 12E. Other general units in the hospital were evaluated to compare employee and patient satisfaction, and costs pertaining to this model. The other general care units are Unit 12 West (12W), Unit 11 West (11W), and Unit 7 East (7E).

All units other than the four general care units were outside of the project scope. Any nurse or physician activities not related to rounding were also not included in this project. Specifically, details related to administering medical treatment were not in the project scope. In addition, the team did not including data prior to 2011, when the hospital moved to its new location. This was done to eliminate an external factor that may have affected satisfaction data.

Methods
The team employed various data collection methodologies to gather the necessary data for the project analysis. These methods include a literature search, observations, interviews, surveys, and existing data analysis.

Performed a Literature Search
The team used three academic papers from the University of Michigan Library database and a previous IOE 481 Senior Design report to develop an approach for evaluating the Team Leader position. The first article discussed the introduction of a Pediatric Nurse Practitioner Care Coordinator (PNP-CC) position, which is similar to the Team Leader role [1]. The article showed metrics such as length of stay as well as time for different services to consult patients to be improved.
The second article discussed a Family Care Coordinator (FCC), which is a very similar role to the Team Leader [2]. This article allowed the team to benchmark the Nurse Rounder model by comparing the performance of the hospital with an FCC to Unit 12E with Team Leaders. This lead the team to also interview nursing contacts in the four general care units to gather comments, as the testimonials in the article were very effective in showing the importance of the FCC.

The third article found that physician rounding teams fail to include many items during rounds that may be significant value, including specific aspects of patient care, interprofessional communication, and leader-centered education [3]. The article allowed the team to focus attention on the ability of the Team Leader to address interprofessional communication on Unit 12E.

Additionally, the team looked at an IOE 481 Final Report from April 2015 that showed surveys pertaining to Family Care Conferences that the Team Leader initiates [4]. These surveys helped the team develop survey questions relating to the Team Leader.

**Conducted Observations in the General Care Units**
The team has collectively observed on Unit 12E (15 hours), Unit 12W (10 hours), Unit 11W (10 hours), and Unit 7E (10 hours). The observations allowed the team to understand the role of the Team Leaders in the Nurse Rounder model. Additionally, the team gained insight into how other units coordinate care through communication between nurses, patients, and physicians.

**Conducted Interviews in the General Care Units**
The team interviewed the Team Leaders on Unit 12E and the nursing contacts in each of the four general care units. The nursing contact for Units 12E and 7E is the Clinical Nurse Specialist on each unit, while the nursing contacts for Units 12W and 11W are the Nursing Care Coordinator and the Nurse Educator, respectively.

**Team Leader Interviews**
The team interviewed the two Team Leaders on Unit 12E in person. The interviews consisted of ten questions that clarified the roles and responsibilities of the Team Leader. The questions aimed to capture how the Team Leaders view the value of their position and potential areas for improvement for the role. The interview documentation can be found in Appendix A.

**Nursing Contact Interviews**
The team conducted interviews with the nursing contact for each unit to gather information regarding the responsibilities of the positions in each of the four general care units. The interviews consisted of a written portion and an oral portion. The written part included a template of a matrix with the responsibilities of the Team Leaders listed on the left and the different positions in the unit along the top. The nursing contact would mark 0 for each position and
responsibility if that position never performs that responsibility, 1 if it is a secondary responsibility, and 2 if it is a primary responsibility. The box would be left blank if a position did not exist in a unit. The matrix template can be found in Appendix B. During the oral part of the interview, the team discussed the main responsibilities of each position in the contact’s respective unit. The documentation used to record data in the oral part of the interviews can be found in Appendix C.

**Distributed Employee Surveys**
Team 5 administered surveys to bedside nurses, physicians, case managers, and social workers who work in the four general care units.

*Bedside Nurse Surveys*
The team administered a survey to weekday day shift bedside nurses in all four general care units and to weekend and night nurses on Unit 12E. The weekday day shift bedside nurse survey was verbally administered by the team to 10 bedside nurses in each of the four general care units. These nurses work from 8:00 am to 4:00 pm. The weekend and night bedside nurse survey was created on Qualtrics and also printed on paper, so that the nurses could take the form most convenient to them. This survey was distributed to weekend day shift bedside nurses and night shift bedside nurses. The project manager and project client approved both surveys, and the project client distributed the weekend and night nurse survey. The Bedside Nurse Weekday Day Shift Survey can be found in Appendix D, the Bedside Nurse Weekend/Night Paper Survey in Appendix E, and Bedside Nurse Weekend/Night Electronic Survey in Appendix F.

*Physician Surveys*
The team created a Qualtrics survey for physicians who round on the four general care units. These surveys were approved by the project manager and client and were electronically distributed to physicians by the project client. The survey questions were designed to determine how communication and nurse presence on physician rounds differs among the four general care units. Additionally, the team asked questions regarding the Team Leaders’ and Nursing Care Coordinator’s impact on communication on Units 12E and 12W, respectively. The physician survey can be found in Appendix G.

*Case Manager Surveys*
The team created a Qualtrics survey for case managers who work on the four general care units to determine the difference in communication between the four general care units and the impact of the Team Leaders and Nursing Care Coordinator on Units 12E and 12W, respectively. The project client emailed the survey to case managers, and the survey was approved by the project manager and project client. The case manager survey can be found in Appendix H.
Social Worker Surveys
The team created a Qualtrics survey for the social workers on each of the four general care units to compare their experiences, satisfaction, and level of communication with the nursing staff on each unit. The survey also included questions about the impact of the Team Leaders and Nursing Care Coordinator on Units 12E and 12W, respectively. The project client emailed the survey to case managers, and the survey was approved by the project manager and project client. The social worker survey can be found in Appendix I.

Distributed Patient Surveys to Previous Patients
The team created patient surveys on Qualtrics to compare patients’ experiences across the four general care units. The survey included questions regarding patient and family satisfaction with discharge, parent and family education, rounding practices, and communication between the patient and the hospital staff. The surveys were approved and distributed to 500 Mott e-advisors by the Embedded Patient and Family Centered Care Coach at Mott Children’s Hospital. E-advisors are families of Mott patients that have elected to share their story and experience, most commonly through surveys, to improve the patient and family experience at Mott. This survey can be found in Appendix J.

Collected and Analyzed Existing Data
The team analyzed existing patient and employee satisfaction data to evaluate the effectiveness of the Nurse Rounder model on Unit 12E compared to the other general care units. Additionally, the team received cost data to determine if the model is cost effective.

Patient Care Data
The team received patient satisfaction data from January 2012 to June 2015. The first batch of data included overall satisfaction ratings across the four general care units. The team graphed and compared the results from four general care units; however, the overall satisfaction scores are affected by a large number of variables. It is difficult for the scores to be linked directly back directly to the Team Leader role. Some of the variables that influence patient satisfaction that would affect this data are patient diagnosis, prognosis, and length of stay in the hospital due to specific diseases or treatments. Next, the team obtained patient survey results from Mott administration with specific questions that pertained to the Team Leader position. The team also obtained patient length of stay data for the four general care units.

Employee Satisfaction Data
The team also obtained employee satisfaction data from March 2015 for the four general care units across four domains. The four domains are:
- Employee Domain: overall satisfaction
- Manager Domain: how happy the employees are with their leadership
- Engagement Indicator: the extent to which employees feel their voices are heard
• *Organization Domain:* how good of a job the employees feel the health system does as a whole

This data was graphed to compare employee satisfaction among the four domains across the four general care units.

*Cost Data*
The team met with a member of Mott administration to discuss the cost data that would help evaluate the impact of the Nurse Rounder model. Data received includes Hours Per Patient Day (HPPD), Full-Time Equivalent (FTE), and census data from 2014 and 2015.

*Findings*
Through the various methods of data collection, the team was able to evaluate the Nurse Rounder model and determine current state of staffing and responsibility distribution in each of the four general care units.

*Literature Search: Team Leader Positions are Beneficial*
The literature search revealed that nurse care coordinator positions, similar to the Team Leader position, are present in other hospitals. These positions are documented as beneficial to the patients and hospitals. Additionally, a previous IOE 481 project was done focusing on Unit 12E. This past project team also conducted surveys in the unit, which the team was able to reference when developing the survey documentation for this project.

*Observations: There is Variation Between the Four General Care Units*
Through the observations on the four general care units (Units 12E, 12W, 11W and 7E), the team found that each unit covers different services that require varying levels and types of care. The patients in each of these units have different needs due to their specific condition. The team found that the types of positions and number of employees in each position varied from unit to unit.

*Unit 12E*
Unit 12E primarily cares for surgery, gastroenterology, and pulmonary patients. On Unit 12E, the Team Leaders are responsible for rounding with physicians. The Team Leader is paged once before a physician group begins rounding, and then the Team Leader joins the physician team. Frequently more than one physician team is rounding, so the Team Leader must prioritize which patient needs the most attention or is closest to being discharged. The Team Leader position is heavily based on creating relationships with the patients, other nurses, and physicians and being the champion of communication between all individuals involved in the patient's care.
**Unit 12W**
Unit 12W cares for mostly pulmonary, renal, neurology, and rehabilitation patients. The team shadowed the Nursing Care Coordinator, which is similar to the Team Leaders on Unit 12E. However, the Nursing Care Coordinator is not as involved in patient and family education and does not develop as strong relationships with most patients and families because she is supporting all 32 beds in the unit. The Nursing Care Coordinator shares responsibilities with the Team Leaders such as coordinating discharge, rounding with physician teams, and communicating between nursing staff and families. Additionally, the employees on Unit 12W have a high level of expertise for the services they support. The bedside nurses are expected to attend rounds for their patients.

**Unit 11W**
Unit 11W cares for primarily cardiology and pulmonology patients. On Unit 11W, the team shadowed a Nurse Educator. This position shares some of the responsibilities of the Team Leader in 12E, including patient and family education and rounding. The bedside nurses in this unit are almost always able to attend rounds since the cardiology team rounds on almost all of the patients. It is easier for bedside nurses to attend rounds for their patients on Unit 11W because there are fewer physician groups that round on this unit. Additionally, the employees in this unit have been working together for over 20 years and have a strong sense of teamwork and cohesiveness on the unit. This may be an indicator of high patient and employee satisfaction in this unit.

**Unit 7E**
Unit 7E cares for mainly hematology and oncology patients. The team shadowed the physician rounding teams in this unit. On Unit 7E the bedside nurses must round with physicians as the physicians attend the bedside nurses’ patients. Uniquely, the nurses are contacted via phone and then, if available, meet with physicians during rounds. The patients on this floor have monthly visits to the hospital for treatment and build strong relationships with the physicians and nursing staff since they see them on a regular basis. Bedside nurses generally coordinate family meetings with patients with fatal prognoses.

**Interviews: Team Leader Position Responsibilities Benefit Multiple Groups**
By interviewing the two Team Leaders on Unit 12 East, the team determined that this position has six primary responsibilities:
- Ensure clear communication
- Attend physician rounds
- Manage family relationships
- Coordinate discharge
- Educate patients and families
- Make follow-up discharge phone calls
The interviews also offered valuable information on the benefits of having the Team Leader position. These include:

- Improving cohesiveness and consistency within the unit
- Providing patients with a specific contact person
- Being involved in care coordination from start to finish

The interviews also captured how different groups benefit from having the Team Leader positions. These findings are summarized in Table 1 below.

<table>
<thead>
<tr>
<th>Group</th>
<th>Benefit from having Team Leader position</th>
</tr>
</thead>
</table>
| Patients and families      | • Have someone looking at the whole picture of their care plan  
                              • Provided with emotional support  
                              • Have a familiar face to ask questions because bedside nurses rotate daily |
| Bedside nurses             | • Able to focus more on the direct care of their patients  
                              • Have a mentor to answer questions |
| Physicians                 | • Have a specific person to ask questions regarding patient care  
                              • Have a consistent nurse representative on rounds for each patient |

**Interviews: Each General Care Unit Has Different Nurse Staffing Practices**

The Nursing Contact interviews provided the team with insight on the different positions in each unit and the responsibilities for each position. The team captured the responsibility distributions of the different nursing positions, as well as social workers and case managers in each of the four general care units. The responsibilities evaluated were those of the Team Leader including ensuring clear communication, attending physician rounds, managing family relationships, coordinating discharge, educating patients and families, and making follow-up discharge phone calls.

A portion of the findings from these surveys can be seen in Figure 1 and the full findings can be seen in Appendix K. This figure shows the six primary responsibilities of the Team Leader down the vertical axis and the different nursing positions as well as the social worker and case manager across the horizontal axis at the top. Appendix C shows the entirety of positions collected. Additional details about responsibilities for certain positions were captured from the nursing contact template used that is shown in Appendix B.
This diagram visually demonstrates the variability of staffing across the four general care units. There is a lack of standardization concerning which roles exist on each unit and what their responsibilities are.

**Nurse Surveys: Team Leaders Allow Bedside Nurses to Focus More on Patients**
The nurse surveys administered across the four general care units revealed that Unit 11W had nurses present on physician rounds most frequently, with Unit 12E second to them. This is illustrated in Figure 2 below.

**Figure 1: Subset of Current Team Leader Responsibility Distribution**

**Figure 2: Frequency of Bedside Nurses and Nursing Representatives on Physician Rounds**
The team found that bedside nurses on Unit 12E and Unit 12W felt that the Team Leaders and Nursing Care Coordinator, respectively, allowed them to focus more on patients and made their workload more manageable. This is demonstrated in Figure 3 below.

Additional findings included the amount of time that bedside nurses spend on coordinating discharge logistics, which can be seen in Appendix L Figure L-1. The surveys captured how accessible bedside nurses found that information was to them. The team found that bedside nurses on Unit 12E felt the strongest that they could receive information missed on rounds. This can be seen in Appendix L Figure L-2. Bedside nurses felt the strongest that they had the resources needed to coordinate discharge, which can be seen in Appendix L Figure L-3.

**Bedside Nurse Weekend/Night Surveys: Bedside Nurses Able to Attend Rounds**

The team analyzed surveys from both weekend day shift nurses and night shift nurses. The survey responses showed that these two types of bedside nurses were approximately equally able to attend physician rounds. This may be due to fewer physician groups rounding during weekends and nights. On average, weekend day shift nurses responded that a nurse representative is always on physician rounds while night nurses only slightly agreed to this statement.

**Physician Surveys: Nurse Representative is on Rounds Most Frequently on Unit 12E**

The team surveyed physicians to determine if they perceive a nurse representative to be on rounds in each of the four general care units. As in seen in Figure 4, Unit 12E had a nurse
representative on rounds most frequently according to the physicians that round on the four units.

![Bar chart showing physician response on whether nurse representative is always present on rounds.](chart)

**Figure 4:** Physician Response on Whether Nurse Representative is Always Present on Rounds

The team found that having the Team Leaders on rounds improves communication between the clinical team and nursing staff more than the Nursing Care Coordinator according to the physicians. The results from this physician survey question can be seen in Figure 5 below.
Additional findings included that physicians felt that communication between the clinical team and nursing staff was more effective on Unit 12E compared to the other units. The results can be seen in Appendix M Figure M-1. Physicians also felt that Unit 7E most frequently had a bedside nurse present on rounds, which can be seen in Appendix M Figure M-2. This may be due to the fewer number of physician groups that round on Unit 7E, as the unit mostly cares for hematology and oncology patients.

**Case Manager Surveys: Case Managers Know Nursing Contacts on Units 12E and 12W**

The team surveyed case managers, who are service-based and may work on multiple units. The case managers responded that they all knew their primary nursing contact on Units 12E and 12W, while not all were sure of their nursing contacts on Units 11W and 7E. These findings are illustrated in Figure 6 below.
Social Worker Surveys: Not Conclusive
Ten total responses were received from the Social Workers: four from Unit 7E, two from Unit 11W, three from Unit 12W, and one from Unit 12E. The team determined that the responses were not conclusive enough to make an appropriate conclusion due to inadequate sample size.

Patient Surveys: Sample Size Not Sufficient
There were 11 total responses were received from the patient surveys distributed to e-advisors: two from Unit 7E, three from Unit 11W, three from Unit 12W, and four from Unit 12E. The team determined that the number of responses was not large enough to make a significant conclusion.

Existing Data: Patients on Unit 12E Felt Most Ready for Discharge
The patient survey covered a multitude of topics. The team chose to only look at the question pertaining to discharge, which is most closely impacted by the Team Leader role. This patient care data revealed that Unit 12E is the most effective at coordinating discharge along with Unit 11W, seen in Figure 7 below. The specific survey question asked patients and families how ready they felt for child discharge. Unit 11W is a very close second by 0.34 of a point out of 100.
The team also received patient length of stay data for the four general care units. This data was graphed and can be seen in Figure 8 below. Since each of the general care units covers different services, patients are expected to stay in the hospital for varied lengths of time. Therefore, this data was not utilized in the final analysis.

**Figure 7: Patient and Family Readiness for Discharge Across the Four General Care Units**

**Figure 8: Average Patient Length of Stay in General Care Units**

Source: Mott General Care Units Dates: 6/1/14-6/28/2015
Sample Size: 12E- 2677, 12W- 3173, 11W- 2437, 7E- 2781
Existing Data: Employee Satisfaction is Highest on Unit 12E
Employee satisfaction data was gathered across the four general care units in C.S. Mott Children’s Hospital. The team graphed this data and it was found that Unit 12E ranked higher than the three other general care units across all four employee domains as seen in Figure 9.

![Employee Satisfaction Data](image)

**Figure 9: Employee Satisfaction Data Across the General Care Units**

Existing Data: Cost Data Obtained is Not Relevant to Project
The team identified and analyzed the cost data pertaining to the Team Leader Position. However, the team was not able to relevant findings pertaining to the project objective.

Conclusions
The team used the findings and drew conclusions about the Team Leader position and staffing practices across the four general care units.

Each unit has different staffing practices
Through the initial observations of each general care unit and the nursing contact interviews, the team concluded that the different services covered resulted in different staffing practices in each unit to meet their specific needs. The staffing of each unit has adapted over time.

Team Leader position is beneficial to Unit 12E
From the observations on Unit 12E and Team Leader interviews, the team concluded that the Team Leader position is beneficial to Unit 12E. The bedside nurse surveys provided quantitative data to support this conclusion. The Team Leaders provide support for the bedside nurses and
patients. This is also shown by the employee satisfaction data, in which Unit 12E ranked highest across all four domains. The patient satisfaction data pertaining to discharge also indicated the highest satisfaction on Unit 12E.

**Same positions across units have different responsibilities**

Through the Nursing Contact interviews, the team was able to capture the variability not only in the different positions, but also in the different responsibilities of each position across the four units. The team concluded that nurse responsibilities should be standardized to provide the highest level of care by utilizing best practices across the general care units.

**Similar Team Leader position exists on Unit 12W**

The Bedside Nurse survey revealed that there is a similar Team Leader position on Unit 12W, the Nursing Care Coordinator. This position also makes the bedside nurses’ workload more manageable and allows them to focus more on caring for their patients. The Nursing Care Coordinator coordinates discharge, attends physician rounds, ensures clear communication within the unit, and manages patient and family relationships. There is only one Nursing Care Coordinator on Unit 12W while there are two Team Leaders on Unit 12E. Therefore, the Nursing Care Coordinator is responsible for all 32 beds on the unit as opposed to 16. While the Nursing Care Coordinator does improve communication and manages family relationships, these responsibilities are not carried out to the same degree as the Team Leaders because the Nursing Care Coordinator has nearly double the responsibility.

**Recommendations**

The team has made recommendations based on conclusions about the Team Leader position and staffing practices across the four general care units.

**Implement similar Team Leader position on Units 11W and 7E**

The team recommends that there are two similar Team Leader positions implemented on Unit 11W and Unit 7E, similar to the Team Leaders on Unit 12E. This position would have the primary responsibilities of coordinating discharge, attending physician rounds, ensuring clear communication within the unit, and managing patient and family relationships. Patient and family education would be a secondary responsibility of the position. Additionally, making follow-up discharge phone calls will be a primary responsibility of the Team Leaders only if the unit needs that task to be completed. The addition of the Team Leader position to these two units will improve patient and employee satisfaction. Finally, the Nursing Care Coordinator position should be renamed to “Team Leader” to standardize the role across the general care units.

**Standardize staffing practices across four general care units**
The team recommends that the four general care units standardize the positions and responsibilities across the units. Ideally, each unit should have the same positions with the same responsibilities. However, because each unit covers different services, this is not completely feasible because of the different needs of each unit. The team has primarily used observations in the four general care units and nursing contact interviews to consider the needs of each unit in creating a future state staff responsibility allocation diagram. The recommended future state staff responsibility matrix can be seen in Appendix N Figure N-1.

**Expected Impact**

The expected impact of this project is standardization of positions and responsibilities across the four pediatric general care units in C.S. Mott Children’s Hospital. The standardization of the positions across units will help reduce confusion for hospital staff as well as patients and families. The implementation of the Team Leader position across the four general care units will allow best practices to be adopted to provide the highest level of care to patients.

Additionally, implementing a Team Leader position on Units 11W and 7E may increase employee satisfaction because the position will allow the nurses to focus more on the direct care of their patients. The implementation of the position may improve patient satisfaction because patients will then have the Team Leader as a single point of contact and specific person to reach out to for questions and support.
References


Appendix A: Interview Questions for Team Leader

Date:
Interviewer:
Team Leader:

Interview Questions for Team Leaders

1. Could you provide a breakdown of your day by activity and percent of the day doing that activity?

2. If no team leaders were put on staff for a day, what are some of the problems that would arise?

3. What resources, if any, do the team leaders have available to them that other nurses do not have?

4. What is the process that occurs when the team leader and bedside nurse both miss rounds?

5. (If applicable) Based on your experience working on units with and without this nurse rounder model, can you speak to the advantages and disadvantages, if any, to working in both units?

6. What are some examples of feedback from patients about your role as team leader?

7. What are some examples of feedback from physicians about your role as team leader?

8. What are some examples of feedback from other nurses about your role as team leader?

9. Do you have any suggestions for improving the team leader position?

10. How would you describe the value of the team leader position?
## Appendix B: Nursing Contact Interviews Staff Responsibility Matrix

### Staff Responsibility Allocation
**IOE 481 Nurse Rounding Senior Design Project**

<table>
<thead>
<tr>
<th>Staff Position</th>
<th>Team Leader</th>
<th>Bedside Nurse</th>
<th>Charge Nurse</th>
<th>Nurse Manager</th>
<th>Nurse Educator</th>
<th>Nursing Care Coordinator</th>
<th>Case Manager</th>
<th>Social Worker</th>
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**IOE 481 Nurse Rounding Senior Design Project**

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# Staff Responsibility Allocation

**IOE 481 Nurse Rounder Senior Design Project**

## Unit 11 West

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# Staff Responsibility Allocation

**IOE 481 Nurse Rounder Senior Design Project**

## Unit 7 East

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### Appendix C: Nursing Contact Interview Staff Responsibility Allocation Sheets

#### Staff Responsibility Allocation
IOE 481 Nurse Rounder Senior Design Project

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Unit 12 East
Staff Responsibility Allocation
IOE 481 Nurse Rounder Senior Design Project

Bedside Nurse

Charge Nurse

Nurse Manager

Nurse Educator

Nursing Care Coordinator

Case Manager

Social Worker
Staff Responsibility Allocation
IOE 481 Nurse Rounder Senior Design Project

Unit 12 West

Bedside Nurse

Charge Nurse

Nurse Manager

Nurse Educator

Nursing Care Coordinator

Case Manager

Social Worker
Staff Responsibility Allocation
IOE 481 Nurse Rounder Senior Design Project

Bedside Nurse

Charge Nurse

Nurse Manager

Nurse Educator

Nursing Care Coordinator

Case Manager

Social Worker
Appendix D: Bedside Nurse Weekday Day Shift Survey

Name: ____________________________ Date: ____________________________
Position this shift: ____________________________ Unit: ____________________________

Unit 12 East Employee Survey

Please answer the following questions to the best of your ability:

How many hours during a shift do you spend coordinating discharge logistics?

__________ hours

How many hours during a shift do you spend on patient and family education?

__________ hours

How many hours do you spend making discharge phone calls during a shift?

__________ hours I don’t make discharge phone calls

How many Family Care Conferences/Team Meetings do you attend per month (approximate)?

__________

I am always present on physician rounds for my patients

<table>
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<tr>
<th>Never</th>
<th>Almost Never</th>
<th>Sometimes</th>
<th>Half the time</th>
<th>Often</th>
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A nursing representative is always on physician rounds for my patients

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<tr>
<th>Never</th>
<th>Almost Never</th>
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<th>Half the time</th>
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Please indicate how much you agree/disagree with the following statements:

If unable to attend rounds, I always have the ability to get the information I missed

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I have the resources I need to effectively coordinate discharge

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Having the Team Leader position allows me to focus more on my patients

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Why: ____________________________

Having the Team Leader position makes my workload more manageable

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Why: ____________________________
Name: ___________________  Date: ________________
Position this shift: ______________  Unit: ______________

Unit 12 West Employee Survey

Please answer the following questions to the best of your ability:

How many hours during a shift do you spend coordinating discharge logistics?

______ hours

How many hours during a shift do you spend on patient and family education?

______ hours

How many hours do you spend making discharge phone calls during a shift?

______ hours  I don’t make discharge phone calls ______

How many Family Care Conferences/Team Meetings do you attend per month (approximate)?

______

I am always present on physician rounds for my patients

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A nursing representative is always on physician rounds for my patients

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Please indicate how much you agree/disagree with the following statements:

If unable to attend rounds, I always have the ability to get the information I missed

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I have the resources I need to effectively coordinate discharge

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Having the Nursing Care Coordinator position allows me to focus more on my patients

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Why: ______________________

Having the Nursing Care Coordinator position makes my workload more manageable

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Why: ______________________
Name: _______________________________ Date: ________________
Position this shift: ____________________ Unit: ________________

Unit 11 West Employee Survey

Please answer the following questions to the best of your ability:

How many hours during a shift do you spend coordinating discharge logistics?

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How many hours during a shift do you spend on patient and family education?

________ hours

How many hours do you spend making discharge phone calls during a shift?

________ hours  I don’t make discharge phone calls ________

How many Family Care Conferences/Team Meetings do you attend per month (approximate)?

________

I am always present on physician rounds for my patients

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A nursing representative is always on physician rounds for my patients

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<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

I have the resources I need to effectively coordinate discharge

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<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Slightly Disagree</td>
<td>Neutral</td>
<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
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</tbody>
</table>

Having the Nurse Educator position allows me to focus more on my patients

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<td>Strongly Disagree</td>
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<td>Slightly Disagree</td>
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<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
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</table>

Why: ________________________________

Having the Nurse Educator position makes my workload more manageable

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<tr>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Slightly Disagree</td>
<td>Neutral</td>
<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

Why: ________________________________
Unit 7 East Employee Survey

Please answer the following questions to the best of your ability:

How many hours during a shift do you spend coordinating discharge logistics?

______ hours

How many hours during a shift do you spend on patient and family education?

______ hours

How many hours do you spend making discharge phone calls during a shift?

______ hours  I don’t make discharge phone calls ______

How many Family Care Conferences/Team Meetings do you attend per month (approximate)?

______

I am always present on physician rounds for my patients

1 2 3 4 5 6 7
Never Almost Sometimes Half the time Often Almost Always

A nursing representative is always on physician rounds for my patients

1 2 3 4 5 6 7
Never Almost Sometimes Half the time Often Almost Always

Please indicate how much you agree/disagree with the following statements:

If unable to attend rounds, I always have the ability to get the information I missed

1 2 3 4 5 6 7
Strongly Disagree Slightly Neutral Slightly Agree Agree Agree
Disagree

It would be helpful to a nurse who attends physician rounds and could relay the information to me

1 2 3 4 5 6 7
Strongly Disagree Slightly Neutral Slightly Agree Agree Agree
Disagree

I have the resources I need to effectively coordinate discharge

1 2 3 4 5 6 7
Strongly Disagree Slightly Neutral Slightly Agree Agree Agree
Disagree

It would be helpful to have a nurse who is responsible for coordinating discharge

1 2 3 4 5 6 7
Strongly Disagree Slightly Neutral Slightly Agree Agree Agree
Disagree
Appendix E: Bedside Nurse Weekend/Night Shift Printed Survey

Name: ____________________________ Date: ____________
Position this shift: _______________ Unit: ______________

Unit 12 East Employee Survey

Please answer the following questions to the best of your ability:

How many hours during a shift do you spend coordinating discharge logistics?

__________ hours

How many hours during a shift do you spend on patient and family education?

__________ hours

I am always present on physician rounds for my patients

<table>
<thead>
<tr>
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<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>Almost Never</td>
<td>Sometimes</td>
<td>Half the time</td>
<td>Often</td>
<td>Almost Always</td>
<td>Always</td>
</tr>
</tbody>
</table>

A nursing representative is always on physician rounds for my patients

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<th>5</th>
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<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>Almost Never</td>
<td>Sometimes</td>
<td>Half the time</td>
<td>Often</td>
<td>Almost Always</td>
<td>Always</td>
</tr>
</tbody>
</table>

Please indicate how much you agree/disagree with the following statements:

If unable to attend rounds, I always have the ability to get the information I missed

<table>
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<th>7</th>
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</thead>
<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Slightly Disagree</td>
<td>Neutral</td>
<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>

I have the resources I need to effectively coordinate discharge

<table>
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<tr>
<th>1</th>
<th>2</th>
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<tbody>
<tr>
<td>Strongly Disagree</td>
<td>Disagree</td>
<td>Slightly Disagree</td>
<td>Neutral</td>
<td>Slightly Agree</td>
<td>Agree</td>
<td>Strongly Agree</td>
</tr>
</tbody>
</table>
Appendix F: Bedside Nurse Weekend/Night Shift Electronic Survey

Q8
- Have you taken a Weekend/Night Shift Responsibility Survey in the past week?
  - Yes
  - No

Q7
- Please answer the following questions in regards to your experiences working either weekend days/leaves or when working nights.
- If you work mostly days/leaves, please answer the following questions in relation to working weekends.
- If you work mostly nights, please answer the following questions in relation to working nights.
- I currently have more experience working the following shifts:
  - Weekend (Saturday or Sunday, day/evening shift)

Q1
- How many hours during a shift do you spend coordinating discharge logistics?
  
Q2
- How many hours during a shift do you spend on patient and family education?
  
Q3
- I am present on physician rounds for my patients
  - Never
  - Almost Never
  - Sometimes
  - Half of the time
  - Often
  - Almost Always
  - Always

Q4
- A nursing representative (other than myself) is on physician rounds for my patients
  - Never
  - Almost Never
  - Sometimes
  - Half of the time
  - Often
  - Almost Always
  - Always

Q6
- If unable to attend rounds, I always have the ability to get the information I missed
  - Strongly Disagree
  - Disagree
  - Slightly Disagree
  - Neutral
  - Slightly Agree
  - Agree
  - Strongly Agree

Q7
- I have the resources I need to effectively coordinate discharge
  - Strongly Disagree
  - Disagree
  - Slightly Disagree
  - Neutral
  - Slightly Agree
  - Agree
  - Strongly Agree
Appendix G: Physician Electronic Survey

Question 1/3
Which of the following most accurately describes your medical specialty?

- Anesthesiology
- Cardiovascular Surgery
- Emergency medicine
- Family practice
- General Pediatrict
- General Surgery
- Hematology/Oncology
- Family practice
- Neonatology
- Neurology/neurosurgery
- Obstetrics/gynecology
- Otolaryngology
- Ophthalmology
- Orthopedic/surgery
- Pathology
- Plastic surgery
- Psychiatry
- Radiology
- Thoracic Surgery
- Urology
- Other

Question 2/3
Which units do you round in? Please select all that apply

- Unit 12 East
- Unit 12 West
- Unit 11 West
- Unit 7 East
### Q3

Please answer these questions based on your rounding experience in **Unit 12 East**

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Slightly Disagree</th>
<th>Neutral</th>
<th>Slightly Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is always a bedside nurse (the nurse assigned to the patient) present on rounds</td>
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<tr>
<td>There is always a nurse representative on rounds (Team Leader/care coordinator)</td>
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<tr>
<td>Having the Team Leader position (Liz and Jane) improves communication between clinical team and nursing staff</td>
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<tr>
<td>There is good communication between the clinical team and nursing staff in this unit</td>
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</tbody>
</table>

### Q4

Please answer these questions based on your rounding experience in **Unit 12 West**

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Slightly Disagree</th>
<th>Neutral</th>
<th>Slightly Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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<tr>
<td>There is always a bedside nurse (the nurse assigned to the patient) present on rounds</td>
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<td>There is always a nurse representative on rounds (Team Leader/care coordinator)</td>
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<tr>
<td>Having the Nursing Care Coordinator position (Trina) improves communication between clinical team and nursing staff</td>
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<tr>
<td>There is strong communication between the clinical team and nursing staff in this unit compared to the other general care units I round in</td>
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### Q5

Please answer these questions based on your rounding experience in **Unit 11 West**

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Slightly Disagree</th>
<th>Neutral</th>
<th>Slightly Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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<tr>
<td>There is always a bedside nurse (the nurse assigned to the patient) present on rounds</td>
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<tr>
<td>There is always a nurse representative on rounds (Team Leader/care coordinator)</td>
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### Q6

Please answer these questions based on your rounding experience in **Unit 7 East**

<table>
<thead>
<tr>
<th>Question</th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Slightly Disagree</th>
<th>Neutral</th>
<th>Slightly Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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<tr>
<td>There is always a bedside nurse (the nurse assigned to the patient) present on rounds</td>
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Appendix H: Case Manager Electronic Survey

Q1
Which unit(s) do you work in?
- Unit 7 East
- Unit 11 East
- Unit 12 East
- Unit 12 West

Q2
Unit 7 East
Please answer these questions based on your experience in this unit:

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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Q2.1
I knew my primary nursing contact in this unit
- Yes (Please list first name of primary nursing contact)
- Not sure
- No

Q3
Unit 11 West
Please answer these questions based on your experience in this unit:

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Agree</th>
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Q3.1
I knew my primary nursing contact in this unit
- Yes (Please list first name of primary nursing contact)
- Not sure
- No

Q4
Unit 12 East
Please answer these questions based on your experience in this unit:

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
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<th>Agree</th>
<th>Strongly Agree</th>
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Q4.1
I have the assistance I need from the nursing staff in this unit to effectively coordinate discharges
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<thead>
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<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
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There is clear communication regarding coordinating discharge within the unit

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<th>Strongly Disagree</th>
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<th>Agree</th>
<th>Strongly Agree</th>
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Having the Team Leader position (Liz and Clare) improves communication between myself and the nursing staff

<table>
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<th>Strongly Disagree</th>
<th>Disagree</th>
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<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Agree</th>
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**Unit 12 West**

Please answer these questions based on your experience in this unit:

<table>
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<tr>
<th></th>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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</thead>
<tbody>
<tr>
<td>I have the assistance I need from the nursing staff in this unit to effectively coordinate discharges</td>
<td></td>
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</tr>
<tr>
<td>There is clear communication regarding coordinating discharge within this unit</td>
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<tr>
<td>Having the Nursing Care Coordinator position (Tnna) improves communication between myself and the nursing staff</td>
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**Q30**

I know my primary nursing contact in this unit

- **Yes** *(Please list first name of primary nursing contact)*
  - [ ]
- **Not sure**
- **No**
Appendix: I: Social Worker Electronic Survey

Unit 12 East
Please answer these questions based on your experience in this unit:

| The Team Leaders (Liz and Diane) improve communication between myself and the nursing staff. |
| The patients and families appear to have a strong relationship with the nursing staff in this unit. |

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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Unit 12 East
Please answer this question based on your experience in this unit:

I know my primary nursing contact in this unit

○ Yes (Please indicate first name of nursing contact below)

○ Not Sure

○ No

What benefits do you see to having the Team Leader role (Liz and Diane) on this unit?

Unit 12 West
Please answer these questions based on your experience in this unit:

| The Nursing Care Coordinator (Trina) improves communication between myself and the nursing staff. |
| The patients and families appear to have a strong relationship with the nursing staff in this unit. |

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neutral</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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Unit 12 West
Please answer this question based on your experience in this unit:

I know my primary nursing contact in this unit

○ Yes (Please indicate first name of nursing contact below)

○ Not Sure

○ No

What benefits do you see to having the Nursing Care Coordinator role (Trina) on this unit?
Appendix J: Patient Experience Electronic Survey

Thank you for taking the time to complete this survey. We know your time is valuable, and we appreciate your thoughtful insight.

Q1

Were you or your family member an inpatient on any unit(s) listed below? Please select all that apply:

- Unit 7 East
- Unit 11 West
- Unit 12 West
- Unit 12 East

Q22

When did you last stay on Unit 7 East?

- Less than 1 year ago
- Between 2 and 5 years ago
- More than 5 years ago

Q24

When did you stay on Unit 11 West?

- Less than 1 year ago
- Between 2 and 5 years ago
- More than 5 years ago

Q25

When did you stay on Unit 12 West?

- Less than 1 year ago
- Between 2 and 5 years ago
- More than 5 years ago

Q26

When did you stay on Unit 12 East?

- Less than 1 year ago
- Between 2 and 5 years ago
- More than 5 years ago
On Unit 12 East, there are two nurse Team Leaders that have several responsibilities:
- Attend physician rounds
- Help coordinate discharge
- Provide patient and family education
- Communicate between nursing staff, physicians, and patient
The Team Leader may have interacted with you during physician rounding or when special attention was needed.

During your time on Unit 12 East, did you meet the Team Leader?

- Yes
- Not Sure
- No

Did a nurse, other than the bedside nurse, come to visit your child?

- Yes
- Not Sure
- No

Please compare your experience on Unit 12 East and other other general care unit(s) you have stayed in:

How satisfied were you with the discharge process on each unit?

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<thead>
<tr>
<th>Unit</th>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>Somewhat Satisfied</th>
<th>Neutral</th>
<th>Somewhat Dissatisfied</th>
<th>Dissatisfied</th>
<th>Very Dissatisfied</th>
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How satisfied were you with the patient and family education on each unit?

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<th>Unit</th>
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<th>Somewhat Satisfied</th>
<th>Neutral</th>
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How satisfied were you with the communication between you and the hospital staff on each unit?

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Did you attend a Family Care Conference during any of your visits?

- [ ] Yes
- [ ] No

Please describe your experience with the Family Care Conference:
Appendix K: Current Team Leader Responsibility Distribution Matrix

Figure K-1: Staff Responsibility Allocation in Mott Pediatric General Care Units
Appendix L: Bedside Nurse Day Shift Survey Results

Figure L-1: Number of Hours Bedside Nurses Spend Coordinating Discharge Logistics

![Bar Chart showing the number of hours Bedside Nurses spend coordinating discharge logistics by General Care Unit.](chart1)

Sample Size: 12E-10, 12W-10, 11W-10, 7E-10

Figure L-2: Bedside Nurses Response on Ability to Get Information Missed if Unable to Attend Rounds

![Bar Chart showing Bedside Nurses' response to getting missed information by General Care Unit.](chart2)

Sample Size: 12E-10, 12W-10, 11W-10, 7E-10
Figure L-3: Bedside Nurses Have the Resources they Need to Effectively Coordinate Discharge
Appendix M: Physician Electronic Survey Results

Figure M-1: Physician Response to Bedside Nurses Always Present on Rounds

General Care Unit

Source: Qualtrics Physician Survey Dates: 11/20/15-12/1/2015
Sample Size: 12E- 11, 12W- 11, 11W- 12, 7E- 12

Figure M-2: Physician Response to Good Communication Between Clinical Team and Nursing Staff

General Care Unit

Source: Qualtrics Physician Survey Dates: 11/20/15-12/1/2015
Figure N-1: Future Staff Responsibility Allocation for Mott Pediatric General Care Units

Appendix N: Future Team Leader Responsibility Distribution Matrix