





Nurse Director Leaders Standard Work

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Introduction/Problem

Nurse Directors face multiple competing priorities on any given day. Because the nature of a large portion of their work is often unpredictable and time sensitive, nurse directors reported feeling like they were often unable to fully accomplish what they wanted and often left at the end of the day "not feeling like they had been able to get anything done". This was true for both seasoned nurse directors as well as those new to the role. A number of Nurse Directors expressed a desire to better examine the workload of a nurse director's in different areas and provide more structure and organization to their daily work.

In addition, there were a number of "best practices" currently being used in the Nursing Director role with limited forums to share and learn. In order to set up the Nursing Director role for success and the ability to increase employee and patient experience, more time back and structure was needed.

The intent of this project was to improve both the effectiveness and efficiency of Nurse Directors.

Aim/Goal

- Understand variation in current state of work day for Nursing Directors
- Improve proactivity in work day: To manage and prepare for the unexpected
- Create a visual management tool to compliment current scheduling and calendar tasks
- Find opportunities in the role to standardize processes in order to build time to respond to unplanned work
- Provide structure for incoming nursing directors through easy onboarding and availability of resources

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Team Member	Role	Title	Department		
Kim Cross	Team Leader	Nursing Director – Farr 5	Patient Care Services		
Sandra Sanchez	Team Leader	Nursing Director – Farr 7	Patient Care Services		
Denise Corbett-Carboneau	Core Team	Nursing Director – Farr 2	Patient Care Services		
Meghan Dalton	Core Team	Nursing Director – MBU	Patient Care Services		
Brid Walsh	Core Team	Nursing Director – 11 Reisman	Patient Care Services		
Alice Bradbury	Core Team	Nursing Director – CC7	Patient Care Services		
Claire Cruz	Core Team	Nursing Director – Stoneman 7	Patient Care Services		
Joseph Nammour	Lead Project Manager	Management Engineer II	Office of Improvement & Innovation		
Amanda Deftos	Support Project Manager	Management Engineer Co-op	Office of Improvement & Innovation		
Allison Wang	Project Oversight	Management Engineer III	Office of Improvement & Innovation		

The Interventions

- Held five workshops to discuss current state, create a future state vision, and design a calendar template
- Workshop 1: Review observations and data collection insights; mapped out and discussed current state
- Workshop 2: Reviewed job description and documented all tasks Nurse Directors do in any given day or week
- Workshop 3: Bucketed & prioritized tasks by have to do's vs. want to do's; created first iteration of template
- Workshop 4: Collected feedback on pilot of first calendar, iterated & created an alternative (electronic) option
- Workshop 5: Compared the piloted alternatives, determined feasibility of spreading to all in the role
- Presented at Nurse Leadership Council to share the work and invite all Nurse Directors to try the calendar

Results/Progress to Date



Swim lane diagram of the current state from Workshop 1. Nurse Directors mapped out all the tasks that take up their day, and the cluster on the right are all the tasks they didn't have time to fit into a "typical day".

For more information, contact:





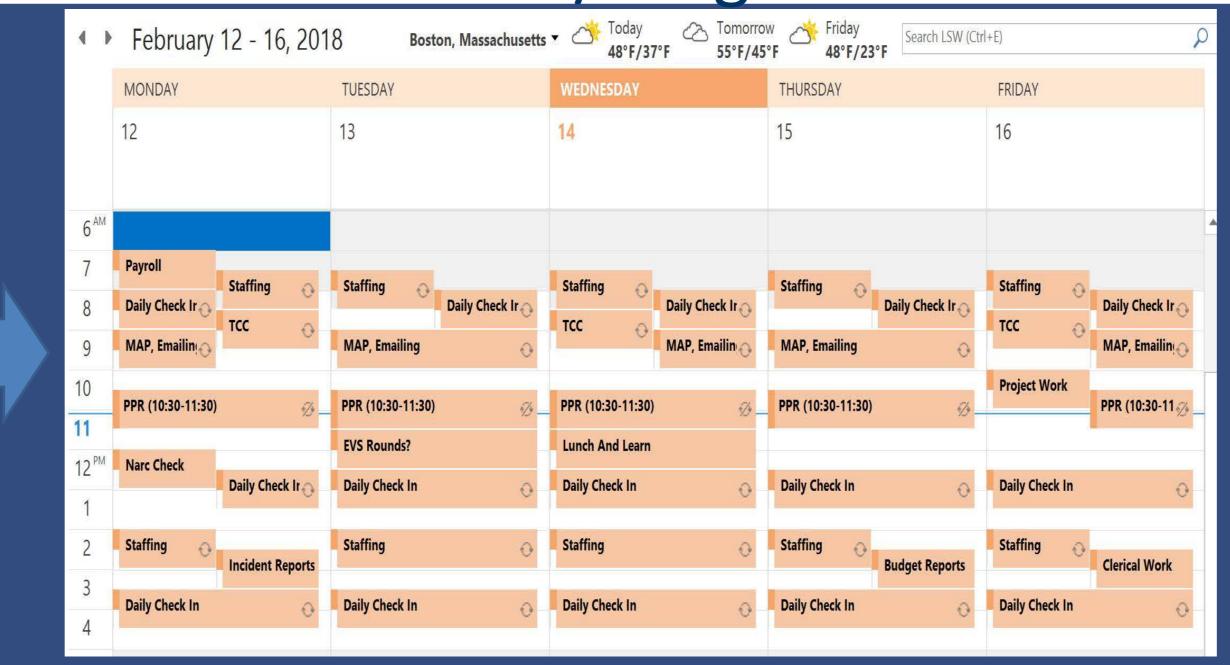
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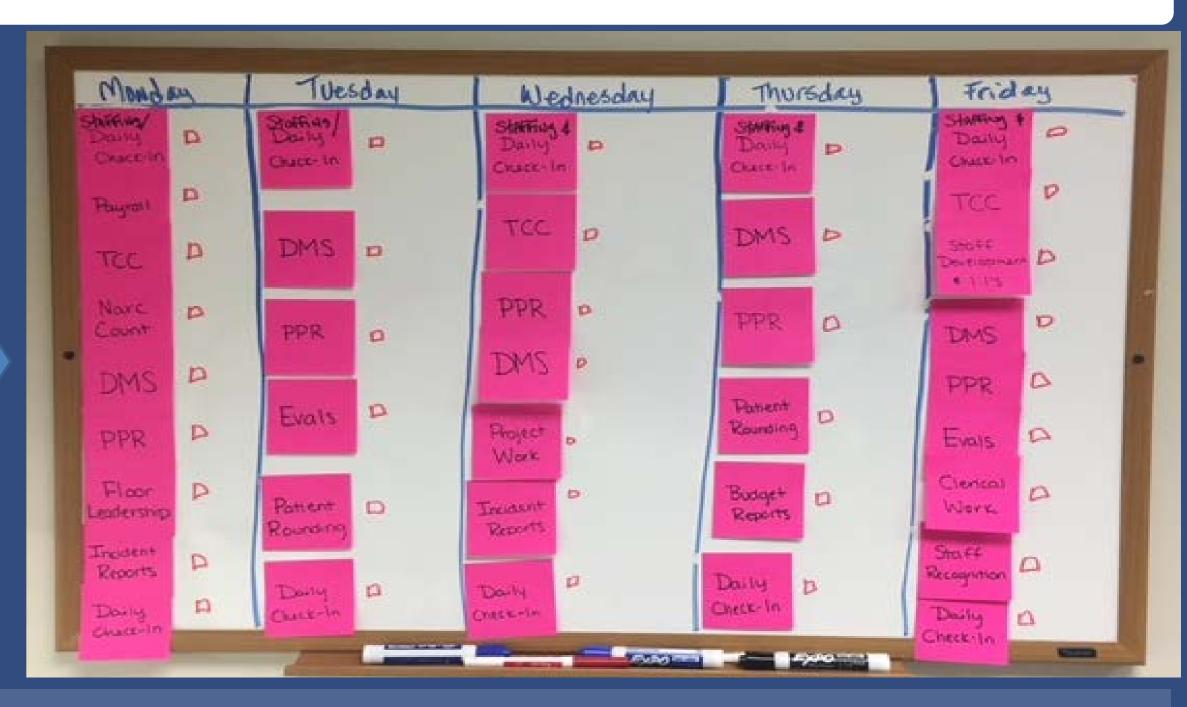
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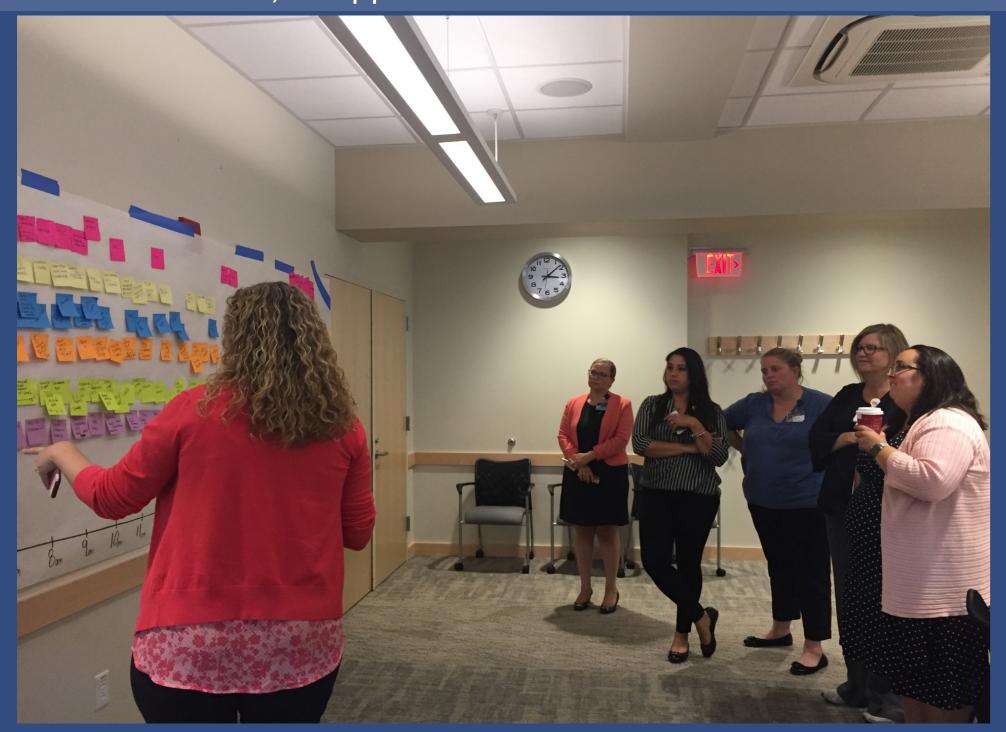
More Results/Progress to Date

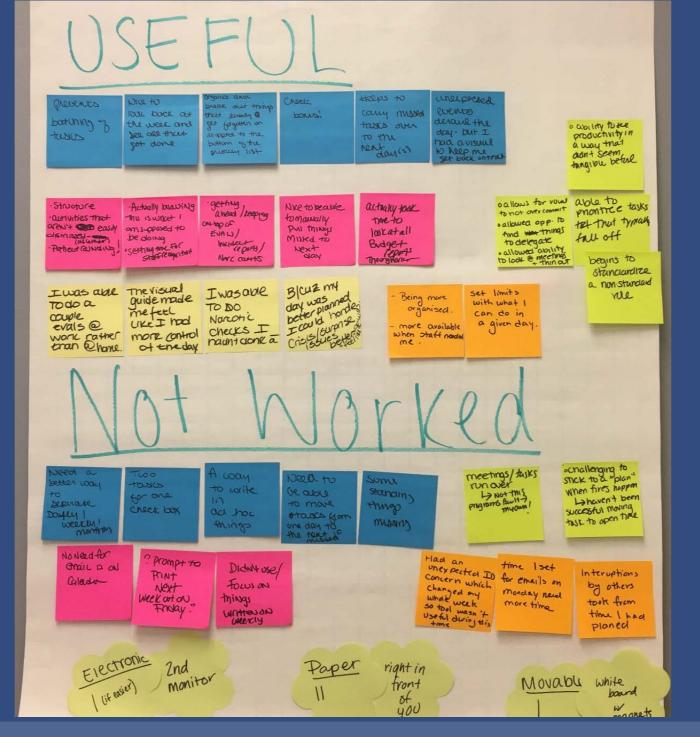
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Left: Iteration 1, a standard calendar paper template with times set aside for unscheduled priorities Middle: Iteration 2, a supplemental Outlook calendar to allow for mobile access and easy rescheduling





Right: Iteration 3, a whiteboard/piece of butcher block paper involving concepts from previous iterations. Time of day was removed from the far left, sticky notes allow for the versatility to move tasks around, and checkboxes are included.

Lessons Learned

- > The template had to have enough structure to be useful but maintain flexibility to appeal to each user.
- > The chaos of a "typical day" made it hard for Nurse Directors to find time to get their personal priorities done.
- Feedback from the workgroup included the following quotes:
- "It was rewarding to look back at the week and see all that I was able to get done."
- "Unexpected events derail every day, but I had a visual to help me get back on track."
- "I was able to take the time to do things I had not done in a while."

Next Steps

- > Update the Daily Management System (DMS) steering committee on workgroup progress
- Meet with Nurse Directors that expressed interest in piloting the template after Nurse Leadership Council
- Regroup with initial workgroup in two months to evaluate sustainment and discuss next steps

For more information, contact:

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