



TJC Blog: Utilizing Social Media to Engage and Educate

Jennifer Barsamian, MSN, RN, Ann Marie Darcy, MSN, RN, ACNS-BC



Introduction/Problem

The window for our medical center's Joint Commission (TJC) survey was approaching fast. It was recognized that, since the last survey, there were many people new to leadership roles on the inpatient units (Nursing Directors, Nurse Specialists, and Unit-based Educators). Both new and experienced nurse leaders had many questions about the survey and expressed anxieties about planning.

A preparation plan for the TJC visit had already been developed that would be executed closer to the survey window. There was a need for a more interactive forum in order to provide education that would engage nurse leaders. Further, this forum would afford an opportunity to ensure that everyone was receiving the same information.

Social media has more recently been explored in the literature as a teaching methodology for nursing education. The team utilized this platform for the first time in order to prepare for a TJC survey in a collaborative manner.

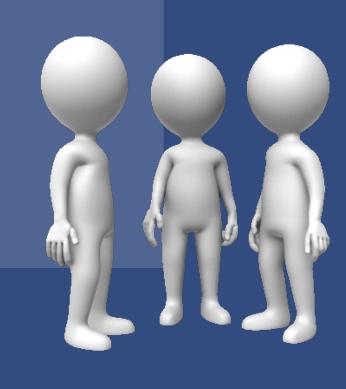
Aim/Goal

Over a period of 12 weeks, the team will engage as many nursing inpatient leaders as possible in preparing their units for the upcoming Joint Commission survey.

Identify any potential, centralized issues that could be resolved in real-time in order to help deliver a successful TJC survey.

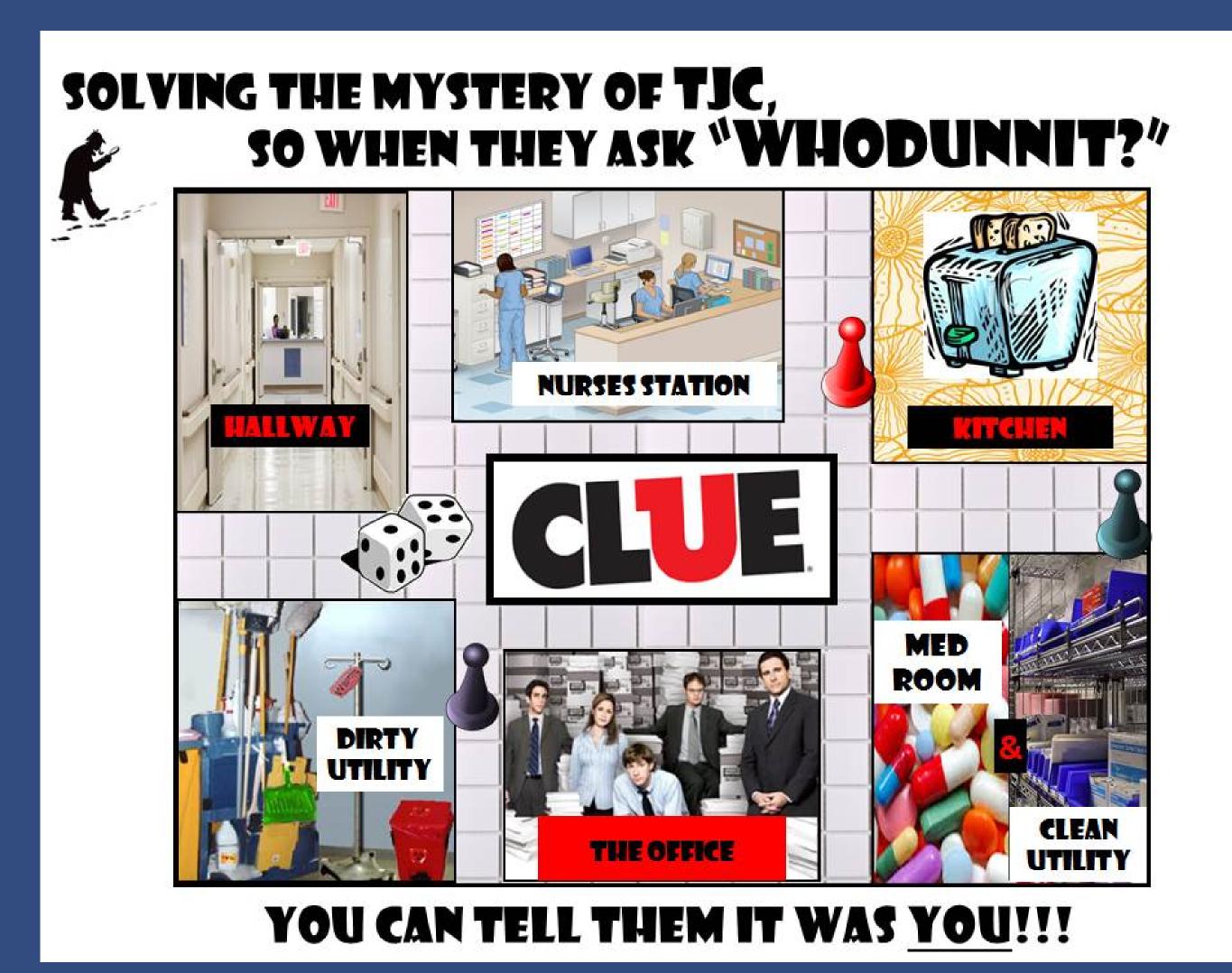
The Team

- > Jennifer Barsamian, MSN, RN, Nurse Specialist, Inpatient Surgery
- > Jean M. Campbell, MS, RN, Informatics Nurse Specialist
- > Ann Marie Darcy, MSN, RN, ACNS-BC, Nurse Specialist, Inpatient Medicine
- > Jamie Levash, MSW, Project Manager, QI & Professional Development
- > Kim Sulmonte, DNP, MHA, RN, CPHQ, Associate Chief Nurse, Operations, Quality & Safety



The Interventions

- Nursing and informatics team members partnered to develop a secure and private social media platform via myPATH.
- In the format of a blog, posts were published every 2-3 weeks. Each tackled the assessment of a different room on the unit. Participants were encouraged to post questions and photos.
- Blog posts continued from June 2018- August 2018.
- Interactive learning was facilitated by Nurse Specialists.
- Prizes were awarded to participants for creative posts.

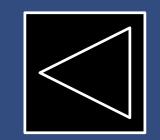


For more information, contact:

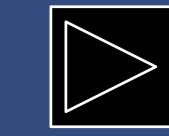
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Results



Storage of Hemoccult Developer



Tube Feed
Delivery and
Storage



Food "Best By" Dates



Reference Binders



Inpatient Welcome Guides

Multi-dose Vials



Preventative Maintenance Stickers



18" Lines



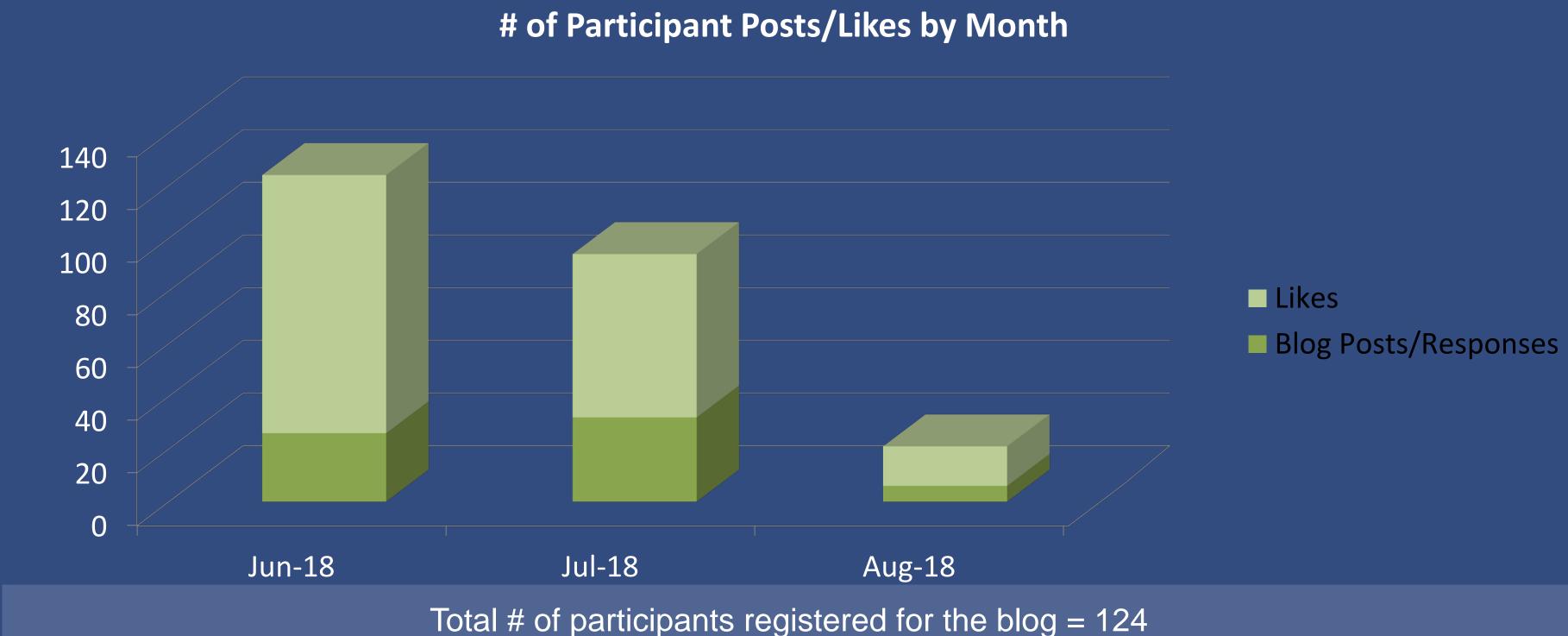
Contact List for Soiled Utility Issues



Labeling of Patient-Specific Food Items



Issues Identified by Participants and Resolved



Lessons Learned

Total posts/likes = 239

- Social media can be a fun and interactive learning platform and is a generalizable teaching methodology for various education topics.
- > A social media platform is familiar to most participants and, therefore, easy to navigate.
- Setting guidelines for participation at the beginning ensure that all posts by learners adhere to an established etiquette.
- In order to keep learners engaged, facilitators are required to be active participants, and blogs should be kept to brief timelines.

Next Steps

- Continue follow-up on any pending issues that were identified by units.
- Explore the use of this blog format for other methods of education and support. Target groups include Unit-based Educators and nurse preceptors for professional development and growth.

For more information, contact:

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Now We're Cooking!

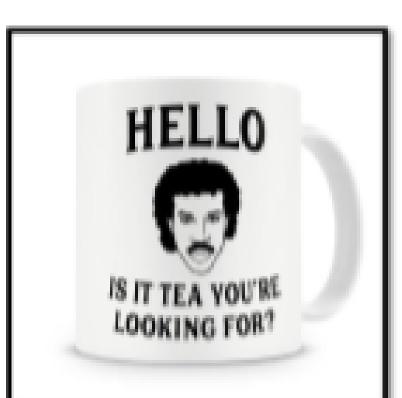
Today we're talking about your unit's kitchen/nutrition room.

TJC is pretty picky about this space (well, most spaces, if we're being honest...) and here are a few things to look out for:

- Make sure there's nothing stored under the sink! (Rationale: This is area is considered a soiled environment and nothing a patient or staff member wears, ingests, or is treated with should be stored under the sink.)
- Nothing stored <18" from the ceiling. (Rationale: This could potentially obstruct sprinklers in the event of a
- The fridge: everything in here should be single use only, sealed, and within their expiration date. Patient specific food items should be labeled with the patient's name, room number and the date, no staff food in the patient. fridge. (Rationale: patient specific food should be reserved for a specific patient. This also makes it easier to toss out any lingering forgotten items.) Make sure there
 - is a "Patient Food Only" sticker on the fridge door. There should also be a Refrigerator Temperature Log posted on/near the fridge - if not, please notify Food Services.

-+CALM+

Drawers/cabinets: A place for everything, and everything in its place. Utensils and food items should be wrapped and single use only. Any open packages should be discarded. (Rationale: Open stock has potential to become contaminated.)



- Is your ice machine clean and in good repair? If not contact EVS or Maintenance respectively.
- While you're in here, you may want to unplug your toaster and clean out the crumbs. Nobody wants to be the unit with a Code Red for English muffin related issues.

Any major issues or concerns you uncover should be addressed with our colleagues in the kitchen, nutrition, EVS, maintenance, or distribution.





Knack, knack!

Who's there? Orango.

Orange who?

Orange you glad it's not another kitchen related pun?

INTERACTIVE:

Let us know your burning (see what I did there?) kitchen questions in the comments below!



