

# Pulse Check: A Tool for Real-Time Monitoring and Managing Nursing Workflow

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# Background

- 2019 transition from small 24-bed semi-private unit to a spacious 32 bed, all private room unit (Miller 5).
- Staff felt isolated and unable to find help when it was needed
- The Miller move correlated with lower NDNQI scores across most categories
  - Miller 5 Unit Based Council focused a project on teamwork, specifically targeting RN to RN interactions

# Background

- Organizational psychology research indicates employees who are able to cope with daily job demands are
  - Better able to cope with negative events
  - More productive
  - More committed to the organization
  - Less prone to burnout and turnover
- Pulse checks are typically deployed at interdepartmental and managerial level.

# Purpose

This abstract describes how we apply pulse checks to improve nurses' coping with daily job demands and manage workflow on a busy inpatient oncology unit.

- A **Pulse Check** is a brief targeted survey conducted at frequent intervals and allows for a more dynamic measurement and response cycle.

# The Pulse Check

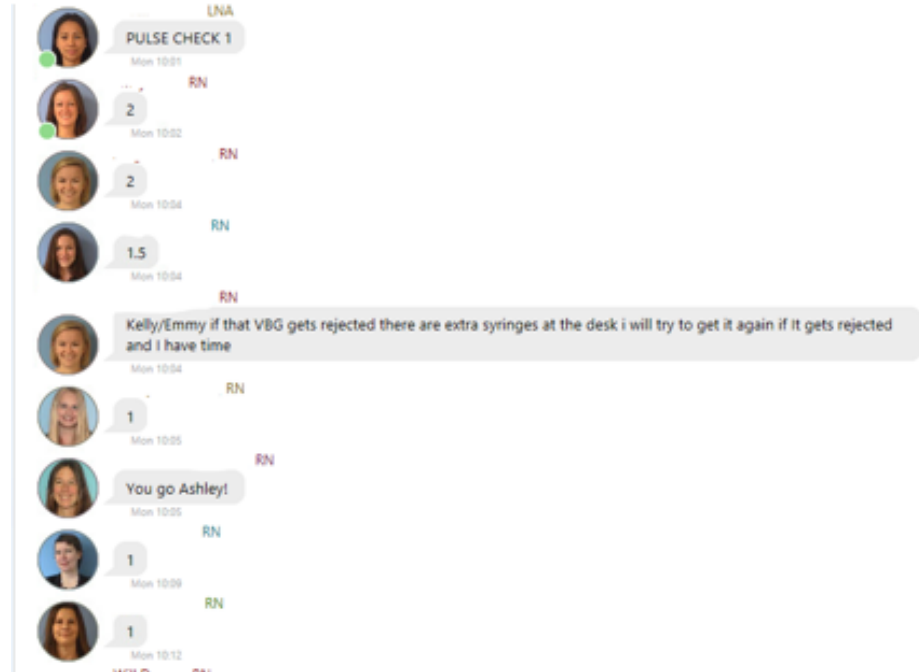
## Stress Level:

- 1) I'm good and managing well.
- 2) I'm busy but ok. I can manage things on my own.
- 3) I'm busy and need help. **Staff with lower stress levels to seek out those with stress level 3.**
- 4) I'm overwhelmed and am unable to meet the needs of my patients. **All hands on deck. Charge to escalate as necessary to acquire needed resources.**

PRN Pulse Check: Please report a stress level of 3 or 4 as soon as possible, at any time of day, regardless scheduled pulse check times.

# Implementation

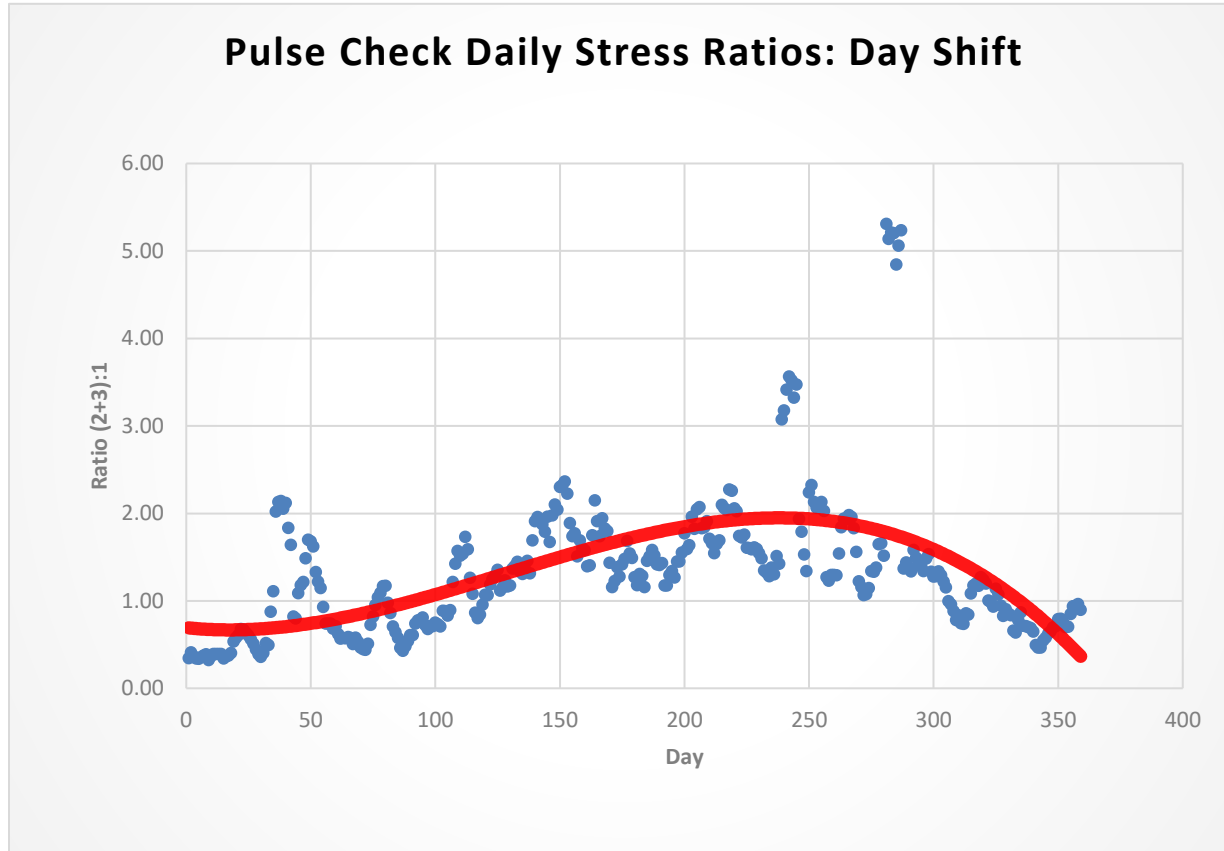
- Charge Nurse enters "Pulse Check" into our group chat at designated Pulse Check times
- We check in with *every* member of our staff: nurses, LNAs, unit secretary
  - Every 4 hours: 1000, 1400, 1800, 2200, 0200, 0600



# Implementation

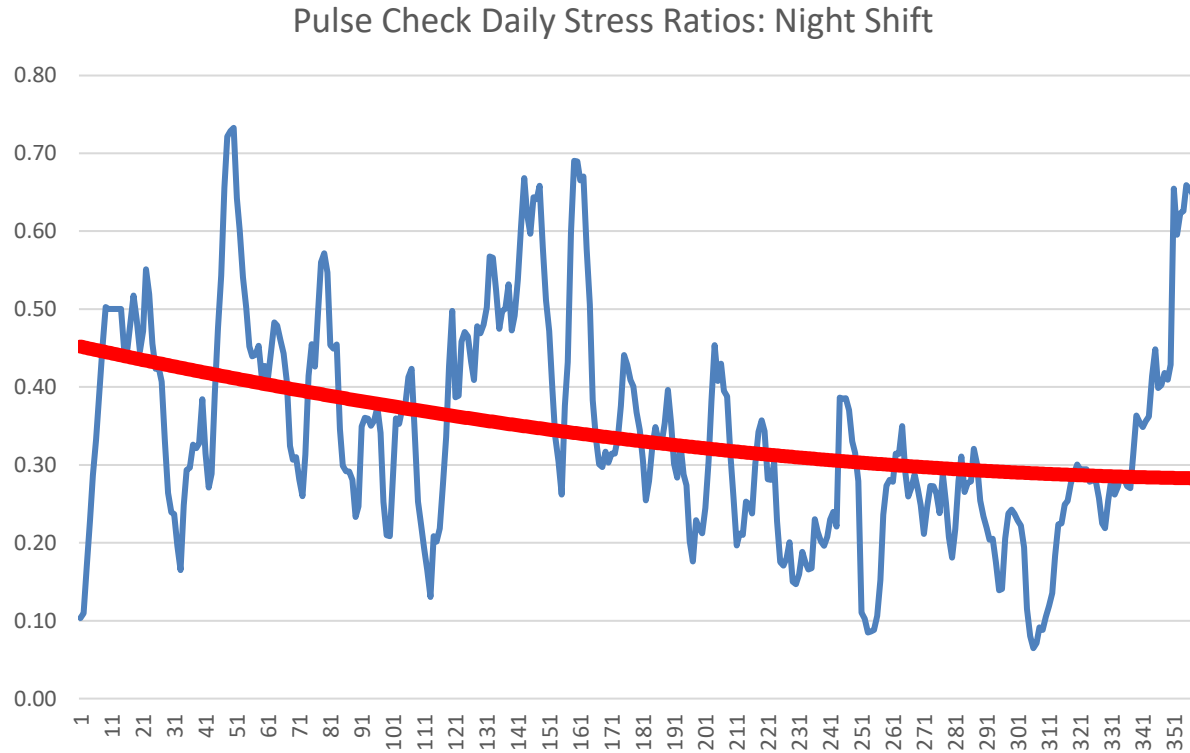
- Some examples of when one might ask for help:
  - Nursing
    - "I'm really behind on documentation. Can you please give 1400 meds to 104?"
    - "It's 1400 and I haven't had anything to eat or used the bathroom. Can you please reassess pain in 310?"
    - "I need to work my patient up for a neutropenic fever. Can you please pass meds for 118?"
    - "I need to give chemo premeds and blood for two different patients at the same time. Can you please premedicate 114 while I hang blood for my other patient?"
  - LNA
    - "I'm behind on vital signs, can you please answer 105's call light so I can get them done?"
  - Unit Secretary
    - If the unit secretary is a 2 or greater, the charge nurse or circulator might be sure they are at the desk and answer all the phone calls.

# Pulse Checks Over Time: Day Shift





# Pulse Checks Over Time: Night Shift

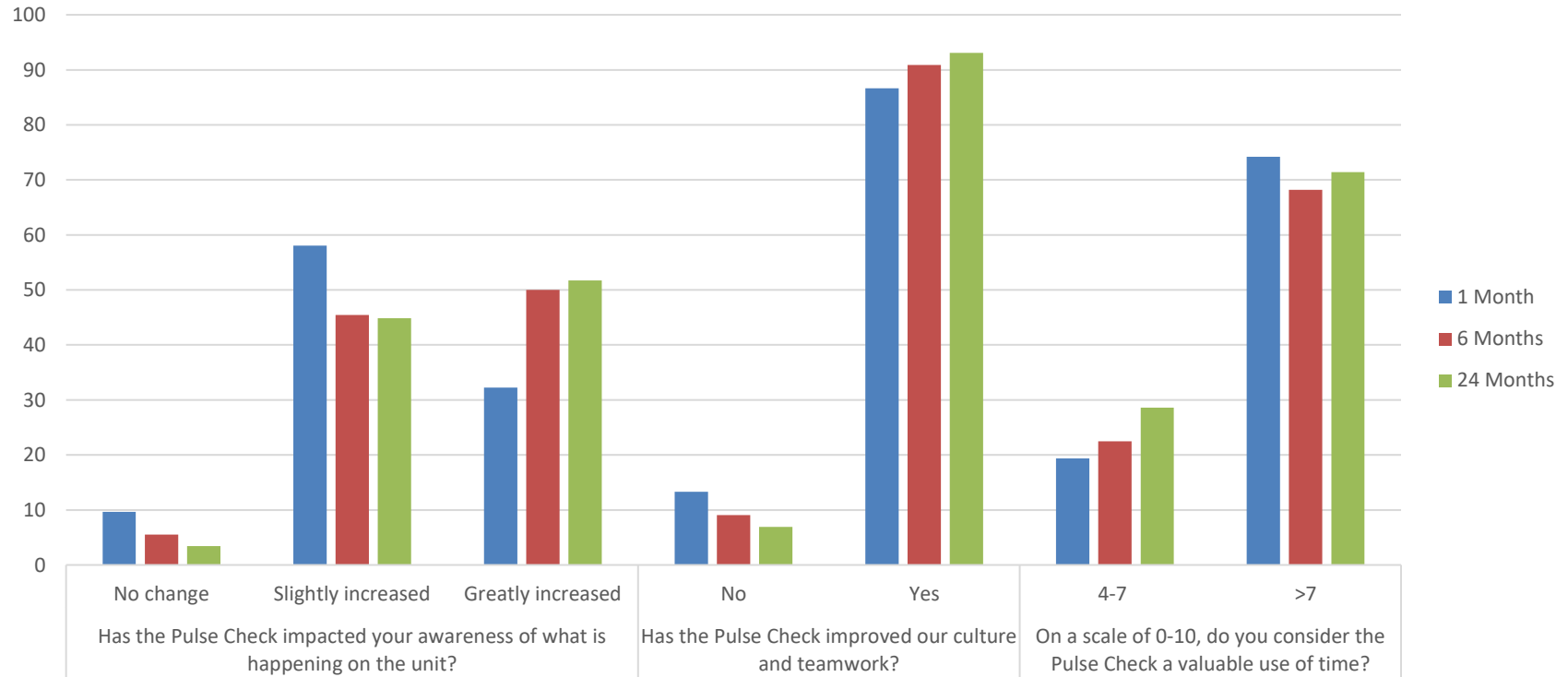


# Evaluation

- Staff surveyed at one month and six months to determine how they perceived pulse checks affected their work.
  - 45% and 73% of staff rated pulse checks as extremely valuable at one and six months respectively.
  - 95% of staff felt pulse checks increased their awareness of unit work flow
  - 91% of staff felt pulse checks greatly improved teamwork
  - 86% of staff felt pulse checks improved response times when they needed help

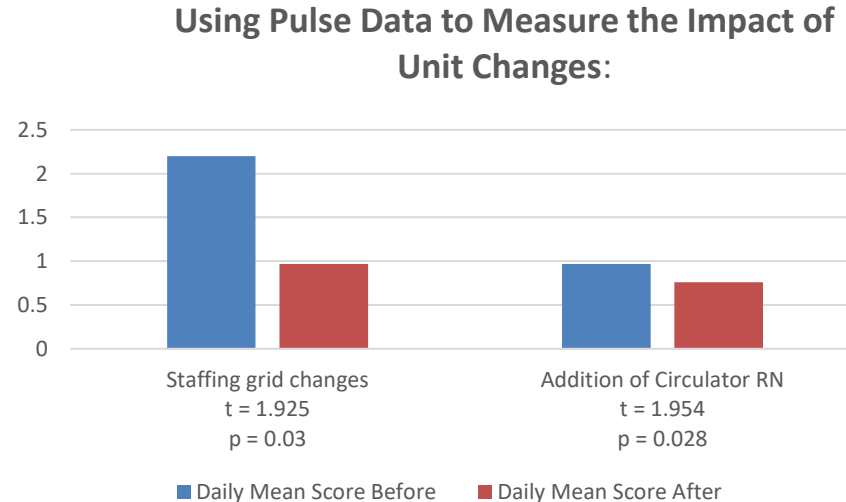
# Staff Response

## Staff Survey Results

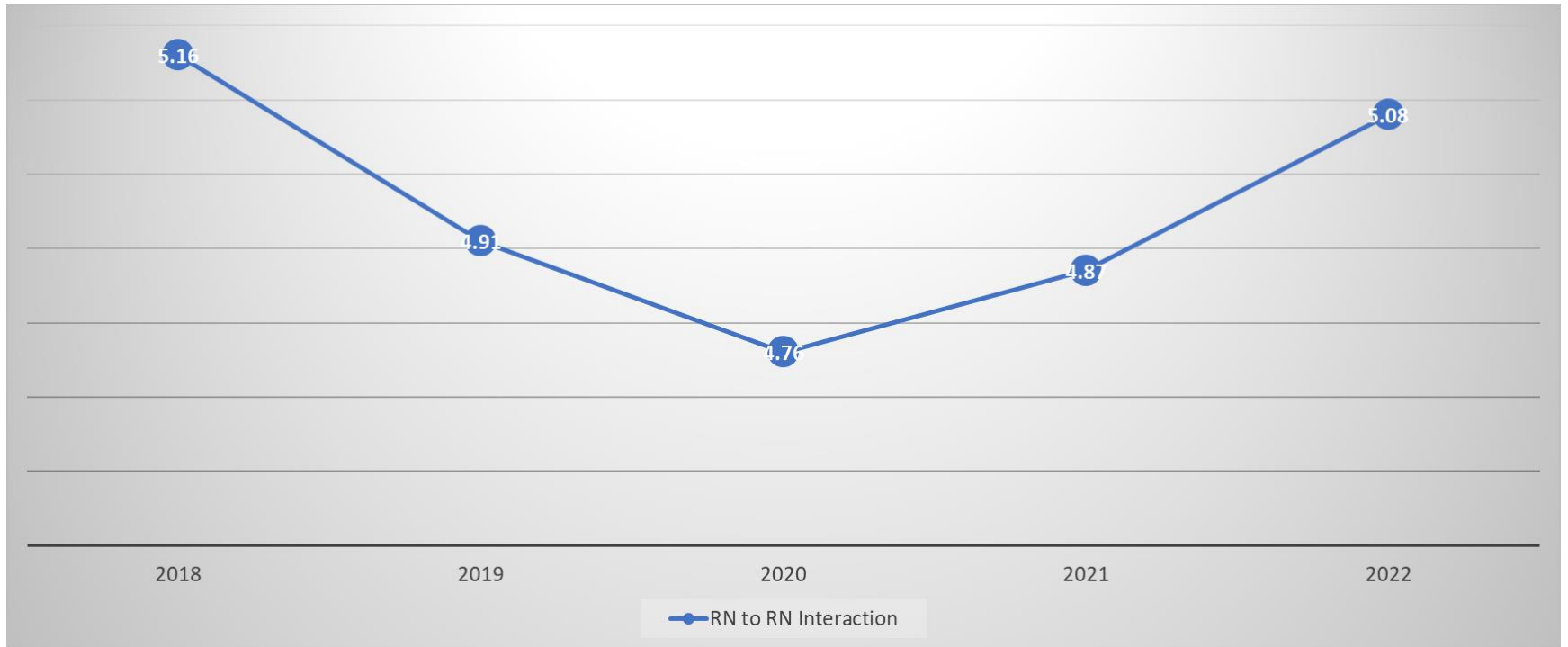


# Response to Key Staffing Grid Changes

- Pulse check scores have quantitatively demonstrated the impact of staffing changes within a few weeks and are statistically significant at  $p=0.05$ .



# NDNQI RN to RN Interaction



# Things Heard On Our Unit

- In the group chat: "I'm a 1 if anyone needs anything!"
- Between two nurses: "My patients are good. What can I do to help you?"
- From a floor nurse to the charge nurse: "I'm all caught up. Are you aware of anyone who is really busy?"

# Lessons Learned and Future Directions

- Pulse checks allow for real time measurement of nurses' stress.
- Allow team resources to be deployed efficiently and quickly to reduce the overall stress level of the unit.
- Allow for accelerated evaluation of workplace changes.
- Ongoing analysis to optimize data collection intervals and explore relationships with nursing sensitive patient outcomes may yield more benefits.

# References

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