

Summarizing Findings and Developing the Plan of Action

Objectives for This Module

- ❖ **Synthesize information into the plan of action**
- ❖ **Practice writing (and reviewing) problem/strength statements**
- ❖ **Develop statements of best clinical practices**

I've Investigated the Care Provided to My Agency's Patients That Contributed to the Target Outcome—Now What?

What is a Plan of Action?

- ❖ **Corresponds to one target outcome**
- ❖ **Identifies recommended care processes**
- ❖ **Includes implementation approaches**

Handout 1: Sample Plan of Action

Characteristics of Successful Plans of Action

- ❖ Focus on patient care
- ❖ Include specific aspects of care

Next Steps:

- ❖ **State problem (or strength) and**
- ❖ **Prioritize best clinical practices**

**The Statement of Problem (or
Strength) Describes Your Target Care
Behavior or Process.**

**Successful Plans of Action Include
Specific, Clearly-Worded Statements
of Problem (or Strength) in Current
Care Delivery.**

Good Problem (or Strength) Statements

- ❖ Describe specific aspects of care
- ❖ Focus on patient care issues
- ❖ Use concrete and specific wording
- ❖ Address issues within the agency's control
- ❖ Focus on more than documentation
- ❖ Sometimes need boundaries

Criteria to Evaluate Problem/Strength Statements

- ❖ **Clarity**
- ❖ **Specificity**
- ❖ **Overall Utility**

Handout 2: Problem/Strength Statements

Statement:

Care plans for postoperative orthopedic patients do not include teaching for pain management during activity or exercise.

Statement:
**Inadequate SOC assessment of
speaking ability in patients with
neurologic diagnoses.**

Statement:

**For patients with pressure ulcers,
nutritional risk factors are poorly
assessed.**

Statement:

Inconsistent definition of anxiety, so similar assessment data are not consistently interpreted. When anxiety is present, no specific interventions occur. Lack of continuity of staff adds to patient anxiety.

Exercise 1: Writing Problem/Strength Statements

Moving From the Problem/Strength to Best Clinical Practices

- ❖ Exactly what should the clinician do?
- ❖ When and how should it be done?

**Successful plans of action include
specific, clearly-worded best
practices desired of clinical staff.**

- ❖ **Patient care focused**
- ❖ **Within agency control**

Characteristics of Good "Best Practice" Statements

- ❖ **Precise clinical activities or processes**
- ❖ **Specifically address the stated problem (or strength)**
- ❖ **Identify actions desired of all clinical staff**
- ❖ **Address activities beyond documentation**

Criteria to Evaluate Best Practice Statements

- ❖ Clarity
- ❖ Specificity
- ❖ Clinical behaviors

Handout 3: Statements of Best Practices

Best Practices:

- ❖ RN will include teaching for pain management during activity in all care planning for post operative orthopedic patients
- ❖ RN teaching content should include pre-medication, appropriate frequency and duration of exercises, deep breathing, prescribed warm-up and cool down

Best Practices:

- ❖ **At SOC, RN will request speech evaluations on patients with a primary neurological dysfunction**
- ❖ **Thorough evaluation for patients with long-standing diagnoses (e.g., CVA, Parkinson's disease, etc.)**

Best Practices:

- ❖ **Nutritional risk factors for patients with pressure ulcers will be assessed at SOC and monthly until discharge**
- ❖ **Nutritional risk factor assessment will follow the Braden Scale guidelines**

Best Practices:

- ❖ **Staff will use a consistent definition of anxiety in analyzing assessment data**
- ❖ **When anxiety is present, staff will intervene**
- ❖ **Continuity of nursing staff**

Exercise 2: Writing Best Practice Statements

Exercise 2 (continued) Prioritizing Best Practice Statements

Where Are We in Developing the Plan of Action?

- ❖ Target outcome selected
- ❖ Outcome for remediation
- ❖ Problem statement written
- ❖ Best practices specified