

PRIMARY CARE TEAM

Professional Practice Model

SETON'S PRIMARY CARE TEAM (PCT) PROFESSIONAL PRACTICE CARE MODEL is founded on the principles that:

- Every patient deserves an experienced RN
- Every novice nurse deserves mentoring from an experienced RN
- Every patient deserves the opportunity to participate in the planning of their care
- Every team member is committed to meet the needs of every patient assigned to the team
- Each Primary Care Team member functions within their defined scope of practice/expertise
- Work intensity decreases with improved work distribution processes and team support
- The model of nursing care delivery is an important element in patient safety and patient, staff and physician satisfaction

ESSENTIAL COMPONENTS:

I. **Enhanced Patient Partnerships**

The RN Care Manager and his/her team forms a partnership with the patient/family in order to know the patient's most important needs and prioritize these desired outcomes into the patient's plan of care.

- The RN Care Manager sits at the patient's bedside and interviews the patient in order to hear the patient's priority needs and support his/her participation in the plan of care – "What is the most important thing that we can do for you this shift?"
- Progress in meeting the patient's expressed needs is evaluated with the patient throughout the shift

II. **Differentiated Nursing Practice**

The RN Care Manager who has clinical expertise for assigned patients and patient processes leads the Primary Care Team. Support staff persons who work with her to care for an assigned group of patients include one or more of the following persons:

- RNs functioning in the provider role (new graduate, new to department post orientation, travel, per diem, float, etc.)
- LVN(s) functioning in the provider role
- Clinical Assistants functioning in the assistive role
- Other (families, volunteers, students)

III. **Enhanced Accessibility of the Experienced Registered Nurse**

Care Coordination/Communication:

The RN Care Manager provides oversight to ensure care coordination with the other disciplines directly involved in the patient's care.

- Makes introductory rounds to meet the patient and make a quick initial update of patient status
- Oversees plan and evaluation of patient's primary expressed needs (Pt's PEN)
- Meets with his/her team twice a shift for the purposes of prioritization and work distribution
- Shares identified and desired outcomes with team members (all disciplines)
- Uses outcome focus in giving shift report
- Provides increased RN accessibility to physicians (physician rounds)
- The RN Care Manager will provide oversight particularly to the initial assessment and discharge process for each of their assigned patients.

IV. **A Unique Team Model**

Patient Assignments

Made to RN Care Manager who then manages the care provided by his/her team for the achievement of patient outcomes through:

- Care coordination
- Assignment making
- Work distribution
- Direct care provision
- Staff supervision and delegation
- Mentoring

Mentoring for Novice to Expert:

The RN Care Manager will mentor RN and LVN Providers, Clinical Assistants and students during the shift.

- Mentor RN Provider to competencies of the RN Care Manager
- Mentor RN and LVN Provider and CA along novice to expert continuum
- Mentor for improved critical thinking skills

“Managerial Rounds”:

The Clinical Manager/Director will coach and mentor members of the care team through regularly scheduled “managerial rounds”.

- Mentor
- Reinforce positive behaviors
- Evaluate Care

V. **Shared Responsibility for Meeting Patient Needs**

Each member of the care team incorporates “Back to Basics” caring behaviors into care provision:

- Calls each patient by his or her preferred name
- Introduces self and explains role in care that shift/day.
- Make notations of name and role on white board in each patient’s room.
- Uses a handshake or touch on the arm
- Uses direct eye contact when communicating to patients/families

Each team member responds to needs of each patient on the team when it is within their scope of practice to do so.

VI. **Improved Work Distribution Practices**

Work Distribution

Within the team, work is distributed in a manner that

- Uses each member’s skills to the fullest extent, freeing the RN Provider and RN Care Manager to do those things that only the RN can do.
- Incorporates the principles of matching the right person to the right job at the right cost for the desired outcome
- Persons contribute their diverse talents to a team effort and appreciate the distinctive contributions of others

Team Meetings

- Scheduled team meetings allow for a review of work distribution and patient needs at critical times during the day. (IE: mid morning and two hours prior to end of shift)
- Any member of the team can call a team meeting at any time during the day if patient care and/or work load needs to be re-evaluated.