

# Assignment 5: Change Management and Patient Advocacy

written by

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## Experience Overview

### Assignment 5: Change Management and Patient Advocacy Digital Clinical Experience Score



# 92.0%

The DCE score represents a weighted score based on all learning activities in this assignment. Some learning activities have been assigned greater value than others. This score may not be your final grade if your instructor chooses to include additional components, such as rationales or time spent.

## Activity Scores

**92.0/100 points**

Team Delegation	15.0/15 points
Interprofessional Communication	29.0/30 points
Prioritizing Individual Patient Needs	13.0/20 points
Prioritizing Delivery of Care	35.0/35 points

## Interprofessional Communication Score: 29.0 out of 30

Time: 1055

Angela: Hey, I heard Mr. Liu was left hanging this morning waiting to be discharged. Any idea what happened?

Angela: Hm. That's an unfortunate mix-up. OK, well, thanks for the update.

How should you respond?

**I believe this type of miscommunication is liable to happen again if a standard procedure isn't codified into the Toolkit.**

Angela: Interesting.

You scored

**1.0 out of 1**

The correct answer is:

**I believe this type of miscommunication is liable to happen again if a standard procedure isn't codified into the Toolkit.**

You scored

Why is this the most appropriate statement?

**As opposed to an "unspoken rule", a procedure being in the Toolkit best ensures that staff understand its non-negotiability and how to carry it out.**

Angela: My only concern is that, with my recent push to improve Handoffs, I've already given the staff enough to focus on for now. Why don't we discuss this again in a few days.

What is the most appropriate response?

**While I share your concern for the staff's workload, not addressing this gap in policy leaves us open to fumble another patient discharge, and only would require a minor effort of staff.**

Why is this an appropriate statement?

**A streamlined discharge policy is an important enough outcome to warrant the small cost of staff reading a line in the Toolkit and being mindful of it when arranging discharges.**

Angela: Before we agree on anything, can you tell me more about the change you'd like to be codified?

How should you respond to Charge Nurse Angela?

**The Toolkit should say that if a nurse provides discharge teaching at night, and subsequently has to hand over care**

**1.0 out of 1**

The correct answer is:

**As opposed to an "unspoken rule", a procedure being in the Toolkit best ensures that staff understand its non-negotiability and how to carry it out.**

You scored

**1.0 out of 1**

The correct answer is:

**While I share your concern for the staff's workload, not addressing this gap in policy leaves us open to fumble another patient discharge, and only would require a minor effort of staff.**

You scored

**1.0 out of 1**

The correct answer is:

**A streamlined discharge policy is an important enough outcome to warrant the small cost of staff reading a line in the Toolkit and being mindful of it when arranging discharges.**

You scored

**1.0 out of 1**

The correct answer is:

**The Toolkit should say that if a nurse provides discharge teaching at night, and subsequently has to hand over care**

**of the patient due to their shift ending, then they should inform the new nurse of the need to arrange the physical discharge.**

Angela: I can see that working.

Why is this the best policy to suggest?

**You minimize the chance of error by necessitating communication between nurses and clearly designating responsibilities.**

Angela: OK, I have to go -- one of my patients has a heart rate on a rapid decline. Talk later.

How will you respond to Charge Nurse Angela?

**OK!**

Why is this an appropriate response?

**A current patient's need for physiological care takes priority over a discussion of policy, which only influences the comfort of future patients.**

**of the patient due to their shift ending, then they should inform the new nurse of the need to arrange the physical discharge.**

You scored

**1.0 out of 1**

The correct answer is:

**You minimize the chance of error by necessitating communication between nurses and clearly designating responsibilities.**

You scored

**1.0 out of 1**

The correct answer is:

**OK!**

You scored

**1.0 out of 1**

The correct answer is:

**A current patient's need for physiological care takes priority over a discussion of policy, which only influences the comfort of future patients.**

Time: 0600

Angela: Alright everyone, let's huddle up for a second.

Angela: So, here's the deal, folks: I've been noticing a lot of inconsistencies in our Bedside Shift Reports: people missing pieces of information, whether in the in-person handoffs or in the EHR. Now, this stuff can really affect a patient -- you know, you miss one medication in your Background, and boom, we've got a problem. Alright? And I want this to be a team effort. If you see someone missing

You scored

**0.5 out of 1**

The correct answer is:

**That works for**

something, you tell them. You tell them to look at their Toolkit and freshen up on the SBAR aspects. Sounds good? I know I'm nitpicking, but folks, it really matters. Alright, that's all for now.

Angela: I just wanted to say, your work is of such a consistent quality that I really don't find myself worrying about you. So I want you to be extra on the lookout for ways to help the team with Bedside Shift Reports. Don't be afraid to give them constructive criticism, let some of the newer folks shadow you, review EHRs, whatever you think works. Sounds good? I'm counting on you.

How will you respond to Charge Nurse Angela's request?

**As opposed to in-person discussions, the course of action that seems to me least liable for awkwardness is to review nurses EHRs after Handoffs.**

As opposed to in-person discussions, the course of action that seems to me least liable for awkwardness is to review nurses EHRs after Bedside Shift Reports.

Angela: EHRs aren't the only thing that we need help improving.

**That works for me. I'll let you know how it goes.**

Angela: Awesome. Looking forward to it.

Why have you accepted an appropriate level of responsibility?

**All Shadow General staff are expected to be change agents, no matter the situation or the ranking of the parties involved.**

Angela: Great. Now, I want you to sync up with Nurse Ben at some point and run through a practice SBAR. He's had problems in the past with missing whole aspects of the Bedside Shift Report. I tried doing one with him, but he seemed nervous around me, as usual. Anyway, you're not the charge nurse, so I don't think he'd be as intimidated with you.

How should you respond?

**Sounds good. I'll talk with Ben soon about practicing the SBAR.**

**me. I'll let you know how it goes.**

You scored

**1.0 out of 1**

The correct answer is:

**All Shadow General staff are expected to be change agents, no matter the situation or the ranking of the parties involved.**

You scored

**1.0 out of 1**

The correct answer is:

**Sounds good. I'll talk with Ben soon about practicing the SBAR.**

Angela: Great, thanks for your help!

Which of the following rationale statements is **false**?

**It is in your jurisdiction to accept this task from Charge Nurse Angela, even though only she is normally responsible for staff teaching.**

Angela: Thanks for your help! Let's check in soon.

Ben: Hi, what's up?

What is the most appropriate response?

**Let's practice the SBAR.**

Ben: Wait, what? Why? My SBARs are fine. [AUDIO COMING SOON]

**Charge Nurse Angela said that you were having a difficult time with Bedside Shift Reports, specifically missing some aspects of the SBAR, so she's asked me to run you through a practice SBAR.**

Ben: OK, I guess that's fine.

Which of the following rationale statements is **false**?

**You inform Ben that he will be receiving disciplinary action for his mistake.**

Ben: I just think that this whole thing is not as big a deal as she's saying. Like, we all went to school, I think we all know it's not a big deal to leave out like, oh, this patient who's in the hospital for a foot scrape has an allergy to cats. When

You scored

**1.0 out of 1**

The correct answer is:

**It is in your jurisdiction to accept this task from Charge Nurse Angela, even though only she is normally responsible for staff teaching.**

You scored

**0.5 out of 1**

The correct answer is:

**Charge Nurse Angela said that you were having a difficult time with Bedside Shift Reports, specifically missing some aspects of the SBAR, so she's asked me to run you through a practice SBAR.**

You scored

**1.0 out of 1**

The correct answer is:

**You inform Ben that he will be receiving disciplinary action for his mistake.**

You scored

**1.0 out of 1**

The correct answer is:

would that even matter?

How should you respond to Ben?

**I understand it can feel tedious and sometimes pointless, but conducting Bedside Shift Reports thoroughly helps build that skill, and is mandated by hospital policy. It also ensures without a doubt that staff has access to all information that may be needed, however unlikely.**

Ben: Yeah, no, I get it.

Which of the following rationale statements is **false**?

**Allowing colleagues to practice independently and per their own styles is the top priority, due to its positive effect on morale and interprofessional relationships.**

Ben: OK. So, Arun Patel . . . Arun Patel is a 38-year-old male who is on his third day at Shadow General. He's had nausea, vomiting, and diarrhea, related to hyperglycemia. How's that?

How will you respond to Ben's Situation statement?

**That was great; the only thing you missed was telling me Mr. Patel's provider, as is standard in the Situation stage. If you need to reference the Toolkit, don't be shy.**

**I understand it can feel tedious and sometimes pointless, but conducting Bedside Shift Reports thoroughly helps build that skill, and is mandated by hospital policy. It also ensures without a doubt that staff has access to all information that may be needed, however unlikely.**

You scored

**1.0 out of 1**

The correct answer is:

**Allowing colleagues to practice independently and per their own styles is the top priority, due to its positive effect on morale and interprofessional relationships.**

You scored

**1.0 out of 1**

The correct answer is:

**That was great; the only thing you missed was telling me Mr. Patel's provider, as is standard in the Situation stage. If you need to reference the Toolkit, don't be shy.**

Ben: Oh dang, right, the provider. OK, let me just check . . . yep, I see that in the Toolkit here. Sweet.

Why is this an appropriate response?

**Reminding Ben of the resourcefulness of the Toolkit will lead to more precise Bedside Shift Reports in the future.**

Ben: Thanks for your help. I'm sorry I was a bit defensive . . . I get worried that people will think I'm this terrible nurse. But your advice was super helpful, so thank you, again.

**Time: 1045**

Samuel: Hey, sorry to bother you -- but I've been waiting here for at least two hours. Do you know if I can get dressed and leave yet?

How will you respond to Samuel's request?

**Yes, you have been cleared to discharge, so I can wheel you out now. Someone should have come to discharge you, but I'm not sure what happened; I apologize for the mix-up.**

Samuel: OK. I guess it's no big deal. Let's get out of here. [AUDIO COMING SOON]

Why is this an appropriate response?

**No patients can discharge on their own; they require a wheelchair and the assistance of a member of the Shadow General healthcare staff.**

**Time: 0715**

Dr. Tremblay: Hi there, how can I help?

You scored

**1.0 out of 1**

The correct answer is:

**Reminding Ben of the resourcefulness of the Toolkit will lead to more precise Bedside Shift Reports in the future.**

You scored

**1.0 out of 1**

The correct answer is:

**Yes, you have been cleared to discharge, so I can wheel you out now. Someone should have come to discharge you, but I'm not sure what happened; I apologize for the mix-up.**

You scored

**1.0 out of 1**

The correct answer is:

**No patients can discharge on their own; they require a wheelchair and the assistance of a member of the Shadow General healthcare staff.**

You scored

What is the most appropriate statement?

**It's about Debbie O'Connor, the 55-year-old woman who is at Shadow General Hospital, Room 202, bed 1. She has had a change in her respiratory status with increasing difficulty breathing and decrease in her oxygen saturation.**

Dr. Tremblay: OK. Let's talk Background.

Why is this an effective Urgent Situation?

**The patient's name, gender, age, hospital, chief complaint, and the reason for your call are all part of the Situation stage, whether in a standard or Urgent SBAR.**

Dr. Tremblay: OK. Bring me up to date on her background.

How should you respond to Dr. Tremblay?

**Mrs. O'Connor has a history of COPD and was admitted yesterday with an exacerbation. Yesterday, she was on O2 2L and had a drop in O2 saturation, so you increased her to the venturi mask at 28% O2 concentration, but regardless, her O2 saturation stands at 78%. She is having difficulty breathing, and her cough and production of green sputum continues.**

Dr. Tremblay: OK, let's move on.

Why is this an effective Urgent Background?

**1.0 out of 1**

The correct answer is:

**It's about Debbie O'Connor, the 55-year-old woman who is at Shadow General Hospital, Room 202, bed 1. She has had a change in her respiratory status with increasing difficulty breathing and decrease in her oxygen saturation.**

You scored

**1.0 out of 1**

The correct answer is:

**The patient's name, gender, age, hospital, chief complaint, and the reason for your call are all part of the Situation stage, whether in a standard or Urgent SBAR.**

You scored

**1.0 out of 1**

The correct answer is:

**Mrs. O'Connor has a history of COPD and was admitted yesterday with an exacerbation. Yesterday, she was on O2 2L and had a drop in O2 saturation, so you increased her to the venturi mask at 28% O2 concentration, but regardless, her O2 saturation stands at 78%. She is having difficulty breathing, and her cough and production of green sputum continues.**

You scored

**1.0 out of 1**

**Even though Dr. Tremblay is familiar with Mrs. O'Connor's case, you remind her of all relevant information: in Mrs. O'Connor's case, the history of the present illness, and her relevant treatments and their effects.**

Dr. Tremblay: Thanks for the refresher -- what's your assessment of her condition? [AUDIO COMING SOON]

What is the most appropriate statement?

**Mrs. O'Connor's O2 saturation is at only 78%. Her blood pressure is 118 over 74, her heart rate is 110, and her respiratory rate is 34 breaths per minute. Her COPD exacerbation is worsening, and she is not responding to the increase in oxygen via the venturi mask. Her shortness of breath is increasing, and I am afraid she is getting too tired breathing and her respiratory muscles are starting to fatigue. These factors together indicate that the patient's condition is deteriorating and becoming severe.**

Dr. Tremblay: I see.

Why is this the most effective statement?

**Your Urgent Assessment includes relevant vitals and your impression of the patient's condition, just as you would in the standard SBAR Assessment.**

Dr. Tremblay: What do you recommend for Mrs. O'Connor?

What is the most appropriate statement?

The correct answer is:

**Even though Dr. Tremblay is familiar with Mrs. O'Connor's case, you remind her of all relevant information: in Mrs. O'Connor's case, the history of the present illness, and her relevant treatments and their effects.**

You scored

**1.0 out of 1**

The correct answer is:

**Mrs. O'Connor's O2 saturation is at only 78%. Her blood pressure is 118 over 74, her heart rate is 110, and her respiratory rate is 34 breaths per minute. Her COPD exacerbation is worsening, and she is not responding to the increase in oxygen via the venturi mask. Her shortness of breath is increasing, and I am afraid she is getting too tired breathing and her respiratory muscles are starting to fatigue. These factors together indicate that the patient's condition is deteriorating and becoming severe.**

You scored

**1.0 out of 1**

The correct answer is:

**Your Urgent Assessment includes relevant vitals and your impression of the patient's condition, just as you would in the standard SBAR Assessment.**

You scored

**1.0 out of 1**

**With your permission, I think we should transfer the patient to the ICU immediately for non-invasive ventilation via BiPap.**

Which of the following is the best rationale statement?

**A Recommendation is an appropriate place to ask a provider to order a care plan that is not in your scope of practice.**

Dr. Tremblay: . . . If I can be frank with you, I recently got -- maybe scolded isn't the right word . . . informed by an ICU supervisor that we've been too liberal with our transfers, that their staff is overloaded, et cetera. Essentially, if a patient doesn't absolutely need the ICU, they shouldn't get it. So while I acknowledge the gravity of Mrs. O'Connor's condition, my official orders are to keep her on her current care plan in this unit and wait for the exacerbation to subside. [AUDIO COMING SOON]

You will now use CUS Words to respond to Dr. Tremblay's statement.

**Mrs. O'Connor's resistance to our current interventions is a concern to me. The severity of her vitals and her continued deterioration make me uncomfortable not escalating her care. I believe she would only be safe at a higher acuity of care.**

Dr. Tremblay: I see where you're coming from. On second thought, I agree with you.

The correct answer is:

**With your permission, I think we should transfer the patient to the ICU immediately for non-invasive ventilation via BiPap.**

You scored

**1.0 out of 1**

The correct answer is:

**During a Recommendation, you inform the provider of your decisions for the patient's care plan, in case they have recommendations for its execution.**

You scored

**1.0 out of 1**

The correct answer is:

**Mrs. O'Connor's resistance to our current interventions is a concern to me. The severity of her vitals and her continued deterioration make me uncomfortable not escalating her care. I believe she would only be safe at a higher acuity of care.**

You scored

**1.0 out of 1**

Why is this an appropriate use of CUS Words?

**You reiterate your recommendation and its basis within a structure of your own perspective.**

The correct answer is:

**You reiterate your recommendation and its basis within a structure of your own perspective.**

## Prioritizing Individual Patient Needs Score: 13.0 out of 20

Time: 0930

### Description of Activity

Assess and prioritize patient needs for a patient with increased pain at nephrostomy tube site.

### Student Response

Change Dressing Around Nephrostomy Tube Site.

Call Provider and Request Antibiotics for Infection.

### [Transcript](#)

### [Subjective Data Collection](#)

## Subjective Data Collection: 6 of 6 (100.0%)

### Subjective Data

- 

***Finding:***

Assessed patient status

- 

***Finding:***

Assessed pain

- 

***Finding:***

Followed up on pain

- 

***Finding:***

Assessed medication side effects

- 

***Finding:***

Assessed patient outputs

- 

***Finding:***

Assessed patient needs

## Prioritizing Delivery of Care Score: 35.0 out of 35

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Time: 0900

### Description of Activity

Prioritize care between multiple patients.

### Student Responses

Omar Haddad

## Model Response

Patient with physiologic needs should be prioritized over patients with non-physiologic needs. While the other patients' needs will be met in a timely manner, they can be seen to at a later time or delegated to an appropriate staff member.

Time: 0700

## Description of Activity

Prioritize care between multiple patients.

## Student Responses

Debbie O'Connor

## Model Response

In accordance with Maslow's hierarchy of needs, the patient with the most urgent physiological needs should be prioritized first. An important aspect of the physiologic needs are airways, breathing, circulation, and differential diagnosis (ABCs). These needs are highly time-sensitive and not treating them could lead to negative outcomes for the patient's health.