ACE UNIT IMPLEMENTATION OF RELATIONSHIP BASED CARE IMPROVING OUTCOMES

Laura Cartner, RN*
Teresa Michaels, MSN, RN-BC
Kathy Long, BSN-BC, FNGNA
(*contact author)

North Carolina Baptist Hospital
Medical Center Boulevard
Winston-Salem, NC 27157 USA
lcartner@wfubmc.edu
336/713-8150
336/713-8151 (fax)

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By Laura Cartner, RN; Teresa Michaels, MSN, RN-BC;
and Kathy Long, BSN-BC, FNGNA

Background:
Every hospital seeks ways to improve patient care. With the adoption of Relationship Based Care (RBC) as our professional practice model at North Carolina Baptist Hospital (NCBH), the Acute Care for the Elderly (ACE) Unit embraced this opportunity to advance care of our geriatric patients.

Purpose:
With RBC implementation, we desire partnership with our patients/families to improve patient outcomes. Simultaneously, we also seek to know ourselves and our own purpose as healthcare workers thus improving our ability to provide excellent patient care.

Goals/Measures:
Our overall goal is to improve patient outcomes, while also decreasing fall rates and hospital-acquired pressure sores. In conjunction, we hope to increase staff satisfaction and retention.

Method of Implementation:
Using the vehicle of Unit-Based Shared Governance, ACE unit staff began a six-month developmental and implementation period to create a plan for how RBC would work best on the ACE unit, while also adopting best practices. Caring Guidelines were established for each of the three tenets of RBC: Care of Patient/Family, Care of Team and Care of Self.

Results:
Initial patient feedback has been very positive. Patients have expressed more ownership in their care and their outcomes due to increased involvement and interaction with staff. Unit fall rates and acquired pressure sore rates remain below hospital averages.

Implications:
The building of relationships between caregiver and patient and among caregivers themselves provides endless possibilities. Patient/family involvement in care promotes positives outcomes and reduces length of stay. Caring Guidelines are ever-evolving and grow with the ACE unit staff.

Keywords: geriatric nursing, relationship based care