Servant Leadership In The Emergency Room

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Clinical Question

The Picot question is "In the emergency department how does staff and leaders using servant leadership style compared to not using the servant leadership style influence two of the major Press Ganey scores; 1. Keeping me informed and 2. wait time over an eight to twelve week period (Joyner, 2015)".

Practice Problem

Emergency room nurses are trained to handle a wide spectrum of illnesses and injuries in rapid succession. This rapid treatment and turnover tends to leave little time for communication leaving the patients feeling like a number or a disease. The combination of these results in poor patient satisfaction and a bad experience for many patients. The wait time can be related to the actual time in the department or to the time waiting for testing. By using servant leadership and serving the patient we can help improve the patients experience in the emergency department and in turn change the culture of patient care (Smith, 2005).

Project Evaluation

The first month the Press Ganey results for communication and wait time improved to 91%. The second month (which had a large N sample) the cores rose to 94% for both categories and with the exception of a small 1% drop over the holidays has remained steadily above 93%.
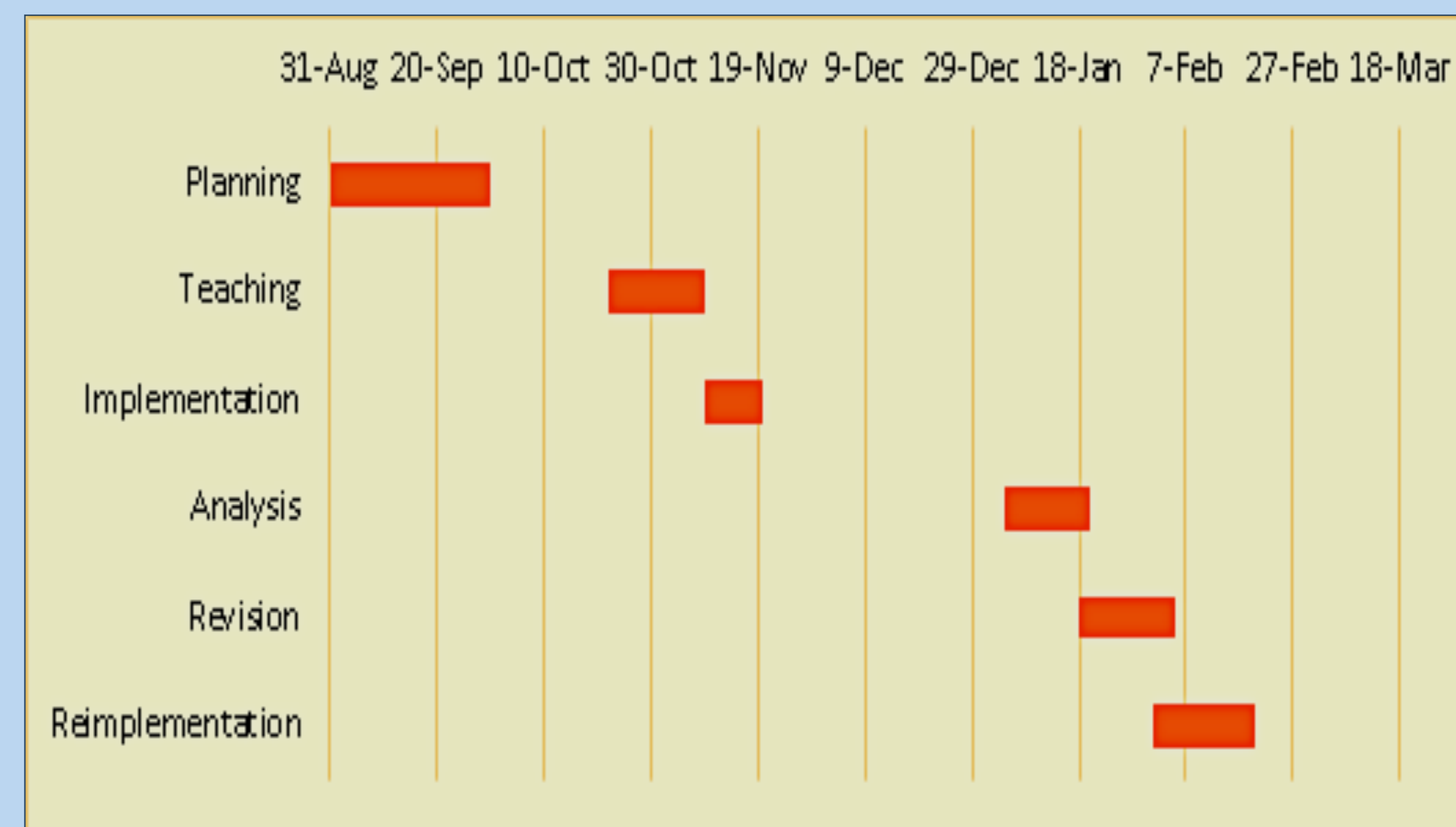
Nursing and Healthcare Implications

This project can help change the culture of how patients are treated in the emergency room. Changing it from an experience of just basic service to that of service plus an exceptional experience. Many facilities are chasing service metrics. This project is built on a new culture. Instilling the new culture will change how patients are cared for and in return will improve all service metrics not just one or two (Berkowitz, 2014).

Project Description

1. Project manager is the DNP student.
2. Conduct a SWOT analysis.
3. Collaborate with leadership to set a budget.
4. Evaluate current data metrics for baseline.
5. Teach leaders and frontline staff how to implement the culture of servant leadership.
6. Implement new culture utilizing servant leadership.
7. Monitor data metrics for progress.
8. Provide in the moment feed back and coaching.
9. Evaluate data over a 6 month time frame.
10. Present project progress to leadership.

Conclusions

Doing business the same way as we did 10 years ago is no longer acceptable and will not meet the patient needs of today. Current medicine must be based on solid evidence and provide cutting edge resources and education to meet patient needs. Changing culture to one of and excellent experience coupled with great service will become the norm not the exception. It is important to remember patient satisfaction is measured from the patients view not administration of staff. A culture is not an end goal but an ever evolving process that strives to ensure the patient is kept first in the practice.

References

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