Improving Our Safety Culture
Mercy Children’s Hospital, St. Louis, MO, USA

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Setting: Mercy Children’s Hospital is a children’s hospital within a large community hospital. Our level III NICU
is a 98 private bed unit divided into 8 pods. The annual hospital birth rate is ~9,000. The annual NICU
admission rate is ~1,200 yielding an average daily census of 72. Our multidisciplinary team includes
neonatology, nurse practitioners, surgeons, a large devoted nursing staff, clinicians, therapy, pediatric
transport team, pharmacists, family advocate and NICUPS(parents support group), and a large support staff.

Aim: We aim to improve culture of safety by incorporating our families and multidisciplinary healthcare team in
process improvement work. Improvement will be measured by our PRC(Professional Research Consultants,
Inc.) score of ≥ 80% and a 10% increase in teamwork, and safety climate scores on our follow up culture of
safety survey by April 2015.

Mechanisms: Hospital wide culture of safety survey revealed low Mercy Children’s Hospital participation and
overall hospital staff perception that our culture of safety needed improvement.

Methods: A baseline culture of safety survey was completed by our multidisciplinary team. The results of the
survey and VON Safety Homeroom project was shared with staff at an education blitz. Based on survey
results, a “MER (Mercy Event Reporter) Dashboard” was created to display safety events by category, top
reported events and total events reported per month. The dashboard will be updated monthly, posted on unit
MDI board and discussed at huddles. In effort to improve rounding and improve family participation and
communication among the healthcare team and the family, an expert video was created to exemplify this
process. In September, the video will be shown to staff; each staff member will participate in a rounding
simulation and debriefing session. The SBAR tool RN’s use to give report is updated to include goals and
family communication. The tool will also be implemented in September. Ongoing chart audits for procedural
checklist compliance are completed.

Measures: Improvement in culture of safety will be measured with a repeat survey next year, increase in MER
reporting as evidenced by MER dashboard. Rounding improvement will be measured by percentage of staff
who participated in initial simulation and debriefing, number of debriefs completed, bi-weekly family and RN
surveys to measure multidisciplinary rounds, safety rounds & PRC scores. Monthly chart audits evaluate
checklist compliance.

Results: A culture of safety survey has been completed, is guiding our interventions, MER dashboard
complete and posted on MDI board, will await several months of data to evaluate efficiency and efficacy,
expert video complete and will be shown during huddles, simulation and debriefing to be completed at next
education blitz, updated SBAR tool will also be implemented at next education blitz. PRC scores for last
quarter: Overall Quality Nursing Care: 70%, Nurses communication with patient and family: 77% & Nurses
Instructions/Explanations: 96%.

Discussion: Improving culture of safety is continual, ongoing process. Much preparation has been completed
to implement measures we believe will improve our culture of safety, address staff concerns on culture of
safety survey and improve handoff and rounding communication for families and staff. We hope to continue to
see improved PRC scores to demonstrate these improvements.