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# Setting CHOC Hospital, part of Rady's Children's Health (3 hospital system) Magnet Designated Children's Hospital Medical Unit 48 beds Patient population: endocrine (i.e. new onset diabetics), metabolic, pulmonary (CF, respiratory viruses, asthma), gastrointestinal diseases, rheumatological conditions Primary daily lab draw time - 6am

3

imagine THE POSSIBILITIES

## **Objectives**

- Identify the gaps in use of pain interventions during lab draws
- List the main barriers for effective use of pain management on the medical unit
- · Describe education put in place for process improvement
- Describe key interdisciplinary communication changes that were implemented
- Identify outcomes from implementing workflow changes and education



1

# **Background / How it Started**

- · Child-life specialist advocate
- Inconsistent use in pain relief interventions (Girgin, et al., 2023)
- · Escalation to manager
- Unit Clinical Practice Council (CPC) ownership to initiate quality improvement project using the Institute of Healthcare Improvement (IHI) methodology with PDSA cycles



5

# **Problem Statement**

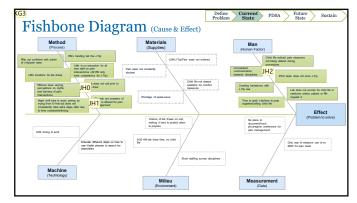
In FY22, the medical unit was not consistently using pain medications prior to IV lab draws and IV insertions, which can lead to patient trauma and undue stress (Hedén, von Essen, & Ljungman, 2019)

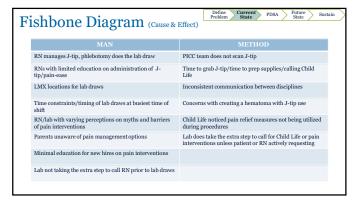


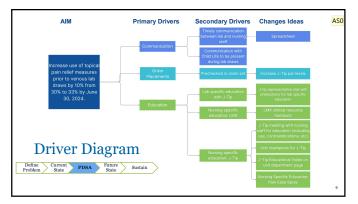
## Slide 6

JH0	Standardize the font used throughout the presentation Jennifer Hayakawa, 2025-03-27T21:39:15.432
JH1	Consider adding a slide ahead of this or after this to describe that this was a QI project and identify the methodology  Jennifer Hayakawa, 2025-03-27T21:40:26.978
AS2	Discuss current state process

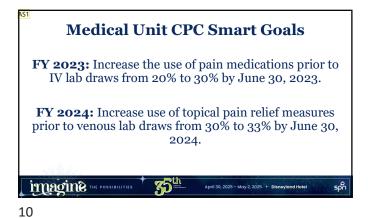
# AS2 Discuss current state process Ani Simonoff, 2025-03-28T04:27:07.335







JH0	Consider softening some of this language "ie. RN/Lab has limited education on"  Jennifer Hayakawa, 2025-03-27T21:16:48.692
JH1	Here is another example, soften to "not consistently taking the extra step" Jennifer Hayakawa, 2025-03-27T21:20:16.990
JH2	Limited communication or inconsistent communication Jennifer Hayakawa, 2025-03-27T21:22:06.181
KG3	i tried to just edit it so the yellow wasn't so vibrant. not sure if this makes it easier to read / stand out with the green Kristen Ann Gamboa, 2025-04-03T05:27:57.985
AS3 0	I love it! Ani Simonoff, 2025-04-03T14:41:18.284
Slide 9	
AS0	What do you think about taking out this wording"in order to do this" and all that. If I take that out, I can make the diagram large which will make it more readable  Ani Simonoff, 2025-04-01T22:28:56.289
KG0 0	yeah we can totally take out the top part so the diagram can stretch bigger :) i think the top is more for our reference Kristen Ann Gamboa, 2025-04-03T05:12:56.197
AS0 1	ok, i adjusted the size and colors to fit better with the other charts, but also make the words readable.  Ani Simonoff, 2025-04-03T14:49:35.641
KG0 2	i think in the initial box it says "meeting date and time" before listing the goal. i think you may have forgot to delete that part :p Kristen Ann Gamboa, 2025-04-03T20:40:59.199
AS0 3	fixed! and added the headings Ani Simonoff, 2025-04-03T22:12:48.071



PDSA: Education

"Poke Plan" Education Board

Vendor Education for J-tip

Uploaded J-tip video from vendor on unit department page

Super Users

Designated RNs to reinforce and educate on J-tip administration in real time

Annual Skills Fair

Multidisciplinary Meetings and Conversations in Real-Time

Handouts for J-tip Education

New Hire Competency

11

# PDSA: Communication & Workflow Highlights • Established relationship between Nursing/Phlebotomy for education across both teams • Created Phlebotomy Request Sheet • Addressed changes in staff meetings, via email, safety huddles, and in real time during shifts • Improved admission history questionnaire to include pain relief preferences • Stressed importance of communication with child life specialist with venous lab draws and IV insertions • Increased par levels on J-tip for increased availability

## Slide 10

JHO Why were these goals selected, ie are these consistent with benchmarks etc?

Jennifer Hayakawa, 2025-03-27T21:31:21.794

**AS1** We did not identify benchmarks in our literature review, so we developed a goal that would be measurable and attainable

Ani Simonoff, 2025-03-28T04:31:00.301

### Slide 11

JH0 Are these evidence-based interventions?

Jennifer Hayakawa, 2025-03-27T21:31:45.613

JH1 Do you have permission to use this? You need to cite it.

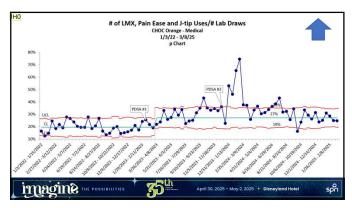
Jennifer Hayakawa, 2025-03-27T21:41:38.702

AS1 0 I created this hand out for the unit 😉

Ani Simonoff, 2025-03-28T04:42:17.359

417-01									
			Yes	No	J-Tip	DMX	Pain-Ease	Sweet-Ease	NONE
417-02									
418-01									
418-02									
419									
420									
421							_		
422									
423-01									
423-02									
424-01									
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426-02				_	_	_	_		
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432-01			-	_	-	-	-		
432-02		E FILE SHEET IN BI			11		_		
Please tube a COP									
Prease tube a COP		e section, write "No L					tervention	is needed.	
OTES:	in the nam	e section, write. No L	abs for inpo	ibents who	o do not nav	e labs.			
UTES.									

13



14

# Key Takeaways Maintained increased usage of pain relief measures Night shift nurses surveyed with positive result Verified importance of continuous education for both new and experienced staff Continue to follow-up on practice deviations Collaboration with ancillary departments

imagine the possibilities



Please make sure that Brittney Anderson or Juleah Walsh review the data and how its JH0 being presented (they want to ensure a consistent approach as we learn) Jennifer Hayakawa, 2025-03-27T21:35:56.724



# JHO Provide in-text APA citations on the slides

Jennifer Hayakawa, 2025-03-27T21:37:13.078