Business CONSULT

Four key ingredients make up the recipe for effective team meetings

By Jeri Lundgren, BSN, RN, PHN, CWS, CWCN

ost of us have had days when we jump from meeting to meeting and at the end of the day wonder, "Did I get anything accomplished or am I more behind than ever?"

Many clinicians tell me that although their wound team meets regularly, the meetings aren't meaningful enough, leaving the team still facing issues with their wound care program. As a consultant, when I review the wound team agenda, it's typically missing one or more of four key ingredients:

- appropriate member representation
- proactive approach that highlights prevention
- review of the plan of care and update of the medical record
- review of supplies and products. Here's a closer look at each of these ingredients.

Build a top team

Having the appropriate members on the wound care team is the first ingredient for success. A comprehensive, interdisciplinary team approach is the key to preventing skin breakdown and ensuring good clinical outcomes for residents with skin breakdown. Teams should include representation from nursing, dietary, and physical and occupational therapy, as well as a nurse practitioner or physician.



Nursing representation should include nurses from all three shifts and nursing assistants, who are too often missing from the team. Keep in mind that when it comes to preventing pressure ulcers, nursing assistants carry out most of interventions (for example, turning, incontinence management, heel lift). Even when a patient has a wound, the only intervention carried out by the nurses is the topical treatment; nursing assistants perform all other interventions necessary to ensure healing. Clinicians who empower nursing assistants to have a strong influence with the wound care team-and the programtend to have very successful prevention programs and good clinical outcomes.

Think prevention

The second key ingredient is prevention. Most wound team meetings only discuss the patients with wounds, missing the bigger goal of preventing wounds in the first place. Once the patients with wounds are discussed, the team should review all highrisk patients to ensure proper preventative measures are in place and care planned.

All patients should be quickly reviewed for evidence of:

- decline or change in mobility and activity
- new onset or change in continence status
- decline in nutritional status
- decline or change in cognition.

Any triggers in these areas should prompt a review of the plan of care to ensure they are being effectively addressed.

Review and update the plan

The third key ingredient for success is to use meeting time to review and update the plan of care. I've observed highly productive meetings and great discussions of the care the facility is providing. Then I review the medical record and discover that none of the interventions discussed are on the plan of care. Always review the patient's plan of care to ensure it's accurate, reflects all interventions, and is up to date. This will give you peace of mind that the medical record reflects all the good work you're doing and helps make the team meetings feel productive.

Discuss products and supplies

The fourth key ingredient is to take the time to quickly discuss current wound care supplies and products with the team. Ask the team if the current supplies are userfriendly, are adequate, provide good outcomes, and are in good working condition.

Many times staff will not say how they're struggling with, modifying, or not using something until they're asked. Remember that the most expensive product is the one that doesn't work or doesn't get used.

A recipe for success

Using these four key ingredients will lead you to a successful wound team meeting and a successful program. The mix may not solve your too-many-meetings days, but will give you peace of mind that at least one meeting is productive.

Jeri Lundgren is director of clinical services at Pathway Health in Minnesota. She has been specializing in wound prevention and management since 1990.

How to keep your communications professional

By Kathleen D. Pagana, PhD, RN

s clinicians, we're proud of the expert care we provide patients. But we also know that just doing our job isn't enough to advance our ca-

reers. Mastering good communication skills is essential for all clinicians at all career stages—especially with today's flatter organizational structures and more participatory management styles. Knowing how to communicate in a professional manner can give you the edge you need for career advancement.

Opportunity rarely knocks any more. Instead it may present as a phone call, voice mail, e-mail, or text message. Be sure to use proper etiquette with all communication forms.

Speaking with managers

When dealing with your manager, use a