No Pass Zone Quality Checking Tool

No Pass Zones are patient care areas where the expectation has been explicitly established that all staff will respond to call lights – as opposed to that responsibility being relegated to individuals in a specific role. Expanding this responsibility to any staff member who may be in the area at the time an individual is seeking assistance increases responsiveness to patients’ needs, reduces falls, and enables the team to better and more promptly identify changes in a patient’s condition. Despite these benefits, many teams struggle with implementation and maintenance of No Pass Zones. Common pitfalls include an overly-directive implementation approach and oversimplifying or missing the intent through games, videos and musical publicity that fails to meaningfully aid staff in identifying their role in the process. While having fun is important, it is equally important to be sure that creating a culture of responsiveness is understood as the goal!

This ten question Quality Checking Tool was developed by Planetree to support teams in assessing the current state of No Pass Zone program in their organization. To tabulate your rating:

- Give yourself 2 points for each “YES” statement.
- Give yourself 1 point for each “PARTIALLY IMPLEMENTED” statement.
- Give yourself 0 points for each “NO” statement.

Use the scoring legend to convert your score into a set of recommendations for improving the viability of your No Pass Zone in your organization.

<table>
<thead>
<tr>
<th>Statement</th>
<th>YES</th>
<th>PARTIALLY</th>
<th>No</th>
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<tbody>
<tr>
<td>Unit-based champions for the effort have been identified.</td>
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<tr>
<td>All staff is educated about the No Pass philosophy during new employee orientation, and this refresher education on the effort is provided for all staff at least annually.</td>
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<td>The No Pass Zone education offered to staff includes experiential exercises designed to support all staff in exploring how to respond to patients’ needs and clearly supports non-clinical staff in understanding their scope of practice.</td>
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<td>Patients are informed of the No Pass philosophy upon admission to emphasize the organization’s team approach to care and responsiveness.</td>
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<td>Goals are developed, tracked and shared related to staff responsiveness, e.g. the number of minutes a call light can go unanswered. (For example, all call lights will have an initial response within X number of minutes.) Effective systems are in place for measuring performance against these goals and the goals and outcomes are transparently shared with unit staff.</td>
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<td>Staff are empowered and coached on peer-to-peer accountability when the No Pass Zone is violated.</td>
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Expectations of the No Pass Zone philosophy are equal applied for front-line staff as well as executive and senior staff levels.

Systems are in place to seek out the perspectives of patients and families on the quality of the response time and staff interactions.

Staff feedback is solicited, at a minimum annually, on improvements, barriers or other educational needs related to No Pass Zone philosophy.

Responsiveness is integrated into a value-based employee evaluation program to emphasize the importance to the organization.
## If you scored

### 14-20 points

No Zone practices have been systematically embedded across the organization. Responsiveness is a core value that shapes leadership approaches, care delivery, operations and day-to-day interactions.

### Next Steps and Recommendations

Even in organizations with strong cultures with sustained programs can see challenges during difficult circumstances – for instance, when working with a challenging patient or family, during high volume times or when something unexpected occurs. When you receive feedback that negatively reflects responsiveness, be sure to dig into the why with staff, don’t dismiss it as an anomaly. Dig into it to understand what factors worked together to compromise responsiveness during the events. Share those findings to help guard against similar experiences. But at the same time, continue to celebrate successes. This keeps your No Pass philosophy top of mind for all staff and reinforces what makes your organization so special.

### 7-13 points

Given the heightened degrees of anxiety, dependence and vulnerability that patients often feel in healthcare settings, earning patients’ trust that staff will be responsive and prompt in tending to their needs is not only a measure of quality that can improve care, reduce falls and enable staff to more quickly anticipate more emergent needs. It is also an act of compassion that can calm patients’ (and family members’) nerves and bring them greater peace of mind. Efforts have clearly been made to address this responsiveness imperative within your organization, but there is opportunity to take additional steps to facilitate greater awareness and behaviors more systematically to enhance responsiveness across all caregivers, all disciplines, units, departments, shifts and settings.

### Next Steps and Recommendations

To embed responsiveness systematically into organizational processes and practice, try using experiential education techniques that will provide an opportunity for staff to connect with the emotions and fear associated with delayed responses. Additionally, using staff feedback to identify what the barriers to consist practice are and how to remove them. Identify with staff the champions of responsiveness and have them share their positive experience with other team members. Share and engage staff in conversations related to how to improve responsiveness and how to interact with each other to ensure a team approach. If champions are not in place, establish a process for identifying them and having them lead each unit to implement structures that support sustainability. There is an adage to “inspect what you expect.” If there is poor systemization of your No Pass Zone philosophy, use evaluation tools to identify gaps. Tools that focus on response time, team interaction and patient interviews can provide valuable insight to the gaps in the process. Moreover, the practice of continual learning should be in place so that the topic of responsiveness is “baked into” other education and training, including orientation.

### < 7 points

Current policy and practice are insufficient to cultivate a sustainable No Pass Zone culture of responsiveness within your organization. To deliver truly person-centered, high quality care, responsiveness must be recognized as an “all-in” endeavor, rather than specifically the responsibility of a

### Next Steps and Recommendations

You may find that departments see responsiveness not as a team concern, but as a nursing department concern. This must be addressed with explicit statements that, in your organization, high quality and top performance are predicated on not just WHAT is accomplished or achieved, but also HOW, i.e. with responsiveness, compassion, respect and empathy. Start your process with identifying champions that are unit based. Have these champions deliver...
A singular sector within the organization. In the absence of proactive practices to upregulate these types of behavior, responsiveness as an organizational attribute is left to happenstance, which undermines your organization’s ability to deliver care that yields optimal outcomes for your patients, their loved ones and your staff.

Interdisciplinary education that focuses on why responsiveness is important to the patient and to the organization. Focus the education efforts on creating a culture of responsiveness and not just a way to improve scores. Provide opportunities for non-clinical staff to explore and understand what is and is not within their scope when responding to patients. Additionally, provide clinical staff with support on how to receive information on patients’ needs from non-clinical staff. Plan to measure the success of your efforts and use a simple performance improvement methodology such as PDSA cycles to involve staff in rapid improvement.