

8-2021

Implementing a Standardized Lost and Found Procedure at Mayo Clinic

Andra Boyum
boyum.andra@mayo.edu

Follow this and additional works at: <https://openriver.winona.edu/leadershipeducationcapstones>



Part of the [Educational Leadership Commons](#), and the [Leadership Studies Commons](#)

Recommended Citation

Boyum, Andra, "Implementing a Standardized Lost and Found Procedure at Mayo Clinic" (2021).
Leadership Education Capstones. 67.
<https://openriver.winona.edu/leadershipeducationcapstones/67>

This Capstone Project is brought to you for free and open access by the Leadership Education - Graduate Studies at OpenRiver. It has been accepted for inclusion in Leadership Education Capstones by an authorized administrator of OpenRiver. For more information, please contact klarson@winona.edu.



Comprehensive Exam Project Presentation

Implementing a Standardized Lost and Found Procedure at Mayo Clinic

Andra Boyum

Master's Program Leadership Education

August 4th, 2021



Introduction

- A guideline has been in practice for completing patient personal property reports at Mayo Clinic that lacks clarity and standardization.
- Stakeholders are confused with the Lost and Found process which leads to frustration and varying outcomes for patients who want their belongings to be returned or reimbursed.



Purpose of the Project

The purpose of this project is to create standardization within the Lost and Found guideline so that stakeholders can utilize their resources with confidence.

Research Questions

The following questions guided this project:

RQ1: Where is non-standardization present within the Lost and Found process?

RQ2: Which piece of the Lost and Found process will benefit the most from standardization?



Research Methodology & Rationale

Methodology: Qualitative methodology guided this project.

Action Research

Rationale: Qualitative research can help researchers to access the thoughts and feelings of research participants, which can enable development of an understanding of the meaning that people ascribe to their experiences (Sutton & Austin, 2015).



Project Stakeholders

- Nursing Personnel
 - Nurse Managers
 - RN/LPN/PCA staff
 - Health Unit Coordinators
 - Support Services Coordinators
- Finance Personnel

Project Description

- A manual was created for the Support Services Coordinators to utilize while completing a patient personal property report related to items that have been lost at Mayo Clinic.
- The manual states the mandatory steps that need to be followed by Support Services Coordinators as well as resources for finding missing items and a detailed reimbursement procedure.

Research Question 1 Findings

RQ1: Where is non-standardization present within the Lost and Found process?

Themes: Inconsistency and Indecision, Knowledge gaps

Data Collection Methods:

Interviews, Observation

Data Analysis Methods:

Inquiry and Reflection

Non-Standardization is present within awareness, training, interpretation, enquiry, and the reimbursement procedure for all stakeholders involved in the Lost and Found process.

Research Question 2 Findings

RQ2: Which piece of the Lost and Found process will benefit the most from standardization?

Theme: Detailed Review

Data Collection Method:

Interviews

Data Analysis Methods:

Content Analysis, Reflection

The most influential piece of the Lost and Found process is where the most human interaction and decision making takes place.

Support Services Coordinators have enormous freedom in decision making, therefor need structure to follow while making decisions.

Project Outcomes Linked to Research

Project Outcomes	Research
<p>A clear standard operating procedure (SOP) will create standardization and alike outcomes for staff to follow.</p>	<p>The advancement and use of SOPs is a basic part of a successful quality system. It supplies individuals with the information to perform a job regularly and aids constancy in the quality and integrity of a product or end-result through constant implementation of a process or procedure inside the arrangement. (Akyar, 2012)</p>
<p>A Hospital lost and found policy that takes responsibility for missing property, leans towards finding missing property, or reimbursing for missing property will increase a patient’s satisfaction and emotional experience.</p>	<p>“Recent surveys of patients in New York and Cleveland, among other cities, indicate that there is substantial room for improvement in meeting patients' needs and preferences, particularly in the areas of emotional support. While pain tolerance management is a metric often analyzed upon patient discharge, we have seen that emotional experience is of equal importance to patients but neglected or overlooked. Reacquainting a patient with lost property, for example, was most often noted in patient discharge comments as a positive experience they recalled instead of a staff member attentiveness” (Rogut & Hudson, 1995).</p>

Leadership Implications

Core Course

Leadership Implications

Systems Thinking

Interdependence was common when speaking with stakeholders or while organizing data during a reflection period. Even the smallest actions had either a positive or negative effect on another piece of the process.

Change Leadership

Change Leadership meant being committed to creating change even when the work seemed overwhelming or impossible to complete. While some stakeholders were content with not changing anything about the lost and found process, I needed to inspire them to believe in the change and influence them to keep pushing forward.

Communications

Communicating is not always about speaking, but instead being able to listen. I actively listened to each of the stakeholders included within this project and therefor learned more than I could have if I was trying to input my own ideas or thoughts into the conversations.

Akyar, I. (2012). Standard operating procedures: What are they good for ? In www.intechopen.com. IntechOpen. <https://www.intechopen.com/chapters/37593>

Rogut, L., & Hudson, A. (1995). Meeting patients' needs: Quality care in a changing environment. Paper Series (United Hospital Fund of New York), 1–33.

<https://pubmed.ncbi.nlm.nih.gov/10164376/>

Sutton, J., & Austin, Z. (2015). Qualitative research: Data collection, analysis, and management. The Canadian Journal of Hospital Pharmacy, 68(3), 226–231.

<https://doi.org/10.4212/cjhp.v68i3.1456>