sentara nurse

Electronic Multidisciplinary Rounding Project

Glenn Sheffield, MSN, RN and Annette McVicker, RN, BSN, CPUR
Sentara Northern Virginia Medical Center

SENTARA®

BACKGROUND

In 2013, SNVMC targeted three diseases to improve processes that could lead to higher quality and more cost effective care. These three diseases were sepsis, heart failure, and pneumonia. The average length of stay (LOS) was 6.0 days for patients with sepsis, 4.0 days for patients with heart failure, and 3.5 days for patients with pneumonia.

SNVMC met the goal for heart failure Length of Stay (LOS) but not for pneumonia LOS and sepsis LOS. To meet all three goals a focused effort was implemented to reduce hospital length of stay by early identification of potential risk for delayed discharge.

A multidisciplinary team was established to brainstorm ways to improve the length of stay. The team consisted of the Charge Nurse Staff from Cardiac Telemetry, the Charge Nurse Staff from Medicine-Oncology-Hematology, the Care Coordination Team from Cardiac Tele and the Medicine Units, the Pharmacy Team on Cardiac Tele and Medicine Units, PT/ OT/ Speech staff, and a member of the Hospitalist Team.

OBJECTIVES

- Evaluate opportunities to decrease actual LOS.
- Create a Risk Stratification Tool to quickly identify patients in need of comprehensive discharge planning.
- Identify multidisciplinary responses to the three levels of risk stratification.
- Incorporate the Risk Stratification Tool into the electronic nursing assignment to help facilitate proactive discharge planning.

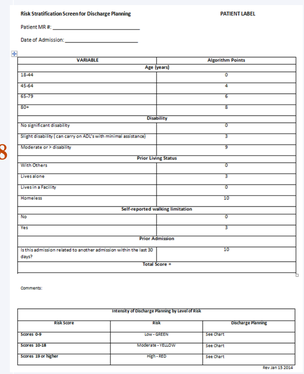
Risk Stratification Tool

Below is an example of the Risk Stratification Tool. The form is completed by the admitting nurse and then scanned into EPIC. The charge nurse enters the score low, medium or high risk in the nursing assignment tool. The score allows for early identification of potential problems.

Green Level = Score of 0-9

Yellow Level = Score of 10-18

Red Level = Score of 19 and Higher



Risk Stratification Screen for Discharge Planning — PATIENT LABEL

Patient MR #: _____

Date of Admission: _____

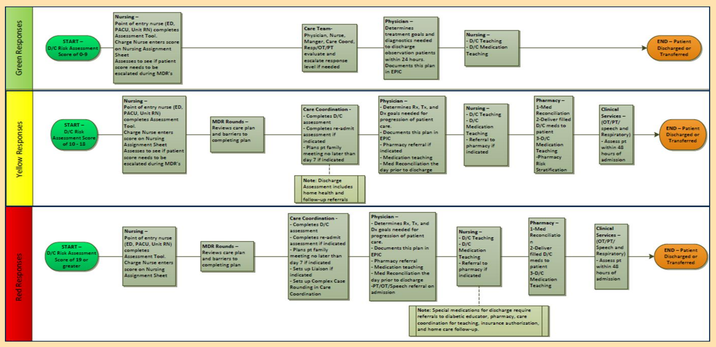
VARIABLE	Algorithm Points
Age (years)	
18-44	0
45-64	4
65-79	6
80+	8
Disability	
No significant disability	0
Slight disability (can carry on ADL's with minimal assistance)	3
Moderate or > disability	9
Prior Living Status	
With Others	0
Lives alone	3
Lives in a Facility	0
Homeless	10
Self-reported walking limitation	
No	0
Yes	3
Prior Admissions	
Is this admission related to another admission within the last 30 days?	10
Total Score =	

Comments:

Intensity of Discharge Planning by Level of Risk		
Risk Score	Risk	Discharge Planning
Scores: 0-9	Low – GREEN	See Chart
Scores: 10-18	Moderate – YELLOW	See Chart
Scores: 19 or higher	High – RED	See Chart

Rev Jan 15 2014

Discharge Planning Risk Assessment



Incorporating Assignment Tool with Risk Stratification

The hand written nursing assignment sheet was converted into an electronic version using an Excel spreadsheet made accessible in the hospital's Sharepoint site. This electronic assignment sheet captured important planning information made readily available to the charge nurse while rounding with unit staff. Below is an example of the tool.

CHARGE NURSE	Name	#	Pager #			Date:	3/25/14	Shift:	Evening (3p-11p)																
	Laura	32137	2786																						
Nurse	Phone # / Pager #	Room #	Attending	Patient Name - Age	Name Alert	Admit Date / Anticipate DC Date	Current Day of Stay / Admission	AND	DC Risk Score	Telemetry Box #	Potential Discharge	Restraints	CIWA	Isolation Type:	Foley	Lines	Drips	Admit Weight / Current Weight	Quality Measures
Jennifer	32290 5164	301	Dr. Houdsong	M, Mary		3/23/14	3		14										
Jennifer		302	Dr Voodard	S, Kulwant		3/24/14	2		8										
Jennifer		303	Dr. Mortazavi	H, Mary		3/25/14	1		12							xxx			
Jennifer		304	Dr Voodard	S, April		3/25/14	1		16										
Tara		308	Dr Voodard	W, David		3/25/14	1		8										
Jennifer	32290	309	Dr Voodard	P, Sidney		3/24/14	2		4										
Tara	32043	310	Dr Voodard	D, Edna		3/25/14	1		17										
Tara	32043	311	Dr. Voodard	J, Rebecca		3/24/14	2		6										
Tara	32043	312	Dr. Sinha	B, Nusrat		3/18/14	8		20										CVA
Rocio	32251 2805	313	Dr. Postelnek	H, Viola		3/25/14	1		24										
Tara	32043	314	Dr. Sinha	O, Marie		3/22/14	4		7	47									
Rocio	32251	315	Dr Nabi	G, Rosemarie		3/14/14	12		15	56									
Rocio	32251	316	Dr Voodard	G, Carlos		3/24/14	2		10										
Rocio	32251	318	Dr. Houdsong	G, Phillip		3/25/14	1												
Rocio	32251	320	Dr. Beze	J, Frankie		3/23/14	3		16	38			yes			xxx			

Electronic Nursing Assignment Sheets

- Identifies the nurse caring for the patient.
- Identifies the phone number and pager number for each staff member
- Prints out a worksheet with nurse assignment to assist nurses in preparing to update the charge nurse for multidisciplinary rounding.
- Print out is used by other departments with nurse contact information for each patient

Capturing MDR Data from Nurses

- Charge Nurse rounds on each nurse to update data
- The assignment sheet can be sorted by nurse to make updating easier
- Tool helps Charge Nurse mentor staff nurse on important items needed to assure safe/appropriate care
- Helps to identify issues for the MDR team to address to facilitate a timely discharge

Assignment Sheet

The assignment sheet is a key element for organizing the flow of MDR in the nursing unit. It can be sorted by different disciplines to facilitate rounding. It has an updated Discharge Risk Score, LOS, and core measure and quality metrics.

Columns Group By Disciplines

AND	DC Risk Score	Telemetry Box #	Potential Discharge	Restraints	1:1 Hours	CIWA	Isolation Type:
	8	16	In House	Safety	8	16	Contact
	16						

Physican/Nurse Care Team													
PNA Immunization? / FLU Immunication	Pain Management / Symptom Management	Pain Comments / Symptom Comments	Foley	Est D/C of Foley	Lines	Drips	Est D/C of Lines	Vital Signs needs adressing	Vital Signs Notes / Comments	Admit Weight / Current Weight	Quality Measures	Pertinent Pt Education Documented / Order Set Use	Pending Tests/ Treatments/Consults
Yes	Yes	8/10	Yes	3/27/14	PIV		3/28	Improved		180.0	CHF	Yes	-Cardiac Consult
No										178.0			T-PT/OT/Speech

Pharmacy			Ancillary Dept.				
Medication Issues? (Abx, abnormal lab values)	Medication Notes	Med Rec Complete	Diet addressed?	Activity	Current Orders for PT/OT Speech	Resp orders needed?	O2/ Airway
Yes	hypokalemia	Yes	No	Amb - walker	Yes	No	NC

Care Coordination					
Planned DC to ____?	Home Health Services Needed	Insurance Verification of Coverage Needed?	Discharge Transportation	Date Family Notified of DC / Time Family Notified of DC	Anticipated DC Date / Anticipated DC Time
Skilled Nursing	O2	PT/OT	Yes	Yes	3/24/2014 17:30	3/29/14 13:00
	Wound Care	Tele Health			

CONCLUSIONS/IMPLICATIONS

- In September 2013 the team started MDRs. By October MDRs were being done everyday with leadership rounding on the weekends. The electronic assignment tool was rolled out in March for PCU and Medicine.
- Usage of the Risk Stratification tool promoted early identification of patients who were most at risk for delayed discharge and possible readmission.
- The tool provided early identification of patients with complicated discharge needs and promoted multidisciplinary coordination of anticipated needs.
- MDR time to round on 50 patients was cut from 1 ½ to 2 hours to 45 minutes when the electronic tool was implemented. The electronic tool provided all needed data in one location.
- Eliminated 4 forms that the charge nurses have to complete into one comprehensive tool.

CONTACT INFORMATION

Glenn Sheffield, MSN, RN, Process Improvement Engineer Sentara Northern Virginia Medical Center gdsheffi@sentara.com
Annette McVicker, RN, BSN, CPUR, Quality Improvement Nurse, Sentara Northern Virginia Medical Center acmcvick@sentara.com

Team Members: Wendy Atkinson, RN – Sr. Director Nursing, Annette McVicker, RN – Quality Improvement Nurse, Glenn Sheffield, RN, Process Improvement Engineer,, Patricia Hill, RN – Sr. Director Nursing, Dr. David Schwartz- VPMA, Jean Coles, RRT- Respiratory Director, Shoshanna Williams, BSN, RN – Hospitalist Nurse Navigator, Yvette Dean, MBA, RN- ICU/ED Director and Barbara J. Beverage , MSN, MBA, RN – Quality Director.