

# Ironing Out the Wrinkles

## Creative Approaches to Implementing a Hospital-Wide Geriatric Initiative

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### BACKGROUND

- Nurses Improving Care for Healthsystem Elders (NICHE)
  - Program of Hartford Institute, New York University College of Nursing
  - Only national geriatric nursing program addressing needs of hospitalized older adults ([www.nicheprogram.org](http://www.nicheprogram.org))
  - Evidence-based
  - Identified resource supporting organization's goal of achieving excellence in geriatric care

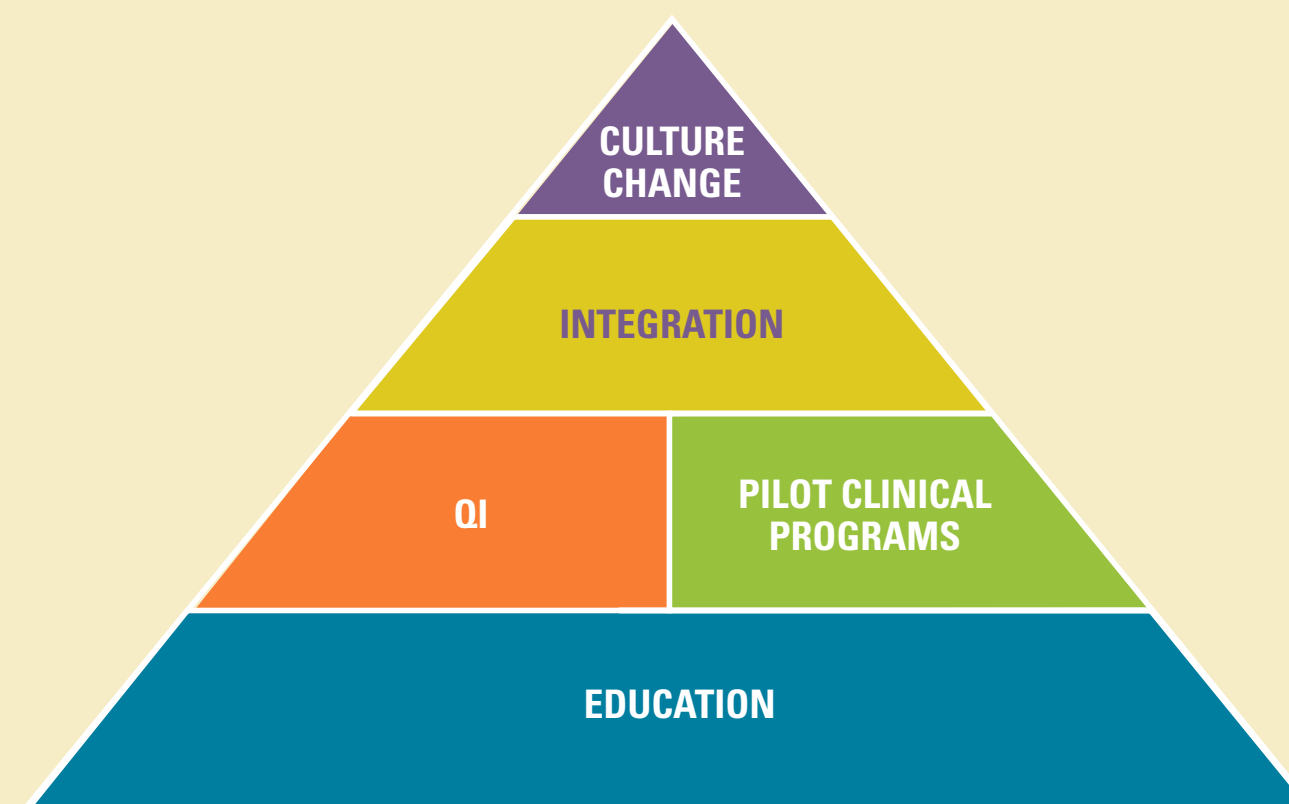
### PURPOSE

- To identify creative approaches for implementing evidence-based practice related to the older adult population

### SIGNIFICANCE

- Older adults are core consumer of health care (CDC & Merk Company, 2007)
  - Aultman: 45% of admitted patients are 65 or older
- 50% of older adult disability attributed to medical hospitalization (Covinsky, Pierluissi & Johnston, 2011)
- Historically, health care providers have little geriatric education
- Change requires creativity, improved collaboration between disciplines, and shifts in organizational culture (Grol & Grimshaw, 2003)

### PLAN FOR AULTMAN EXCELLENCE IN GERIATRICS



### STRUCTURE & RESOURCES

- Administrative support
  - NICHE program licensure fee
  - Resource allocation
- Steering committee
  - Clinical Nurse Specialist serving in educator role
    - Challenged to integrate NICHE program into practice
  - Nurse Administrator
  - Advanced Practice Nurse pursuing geriatric fellowship
  - Geriatric physician consultant
  - Doctoral nursing program student also representing local college
  - Staff nurse with paid time off

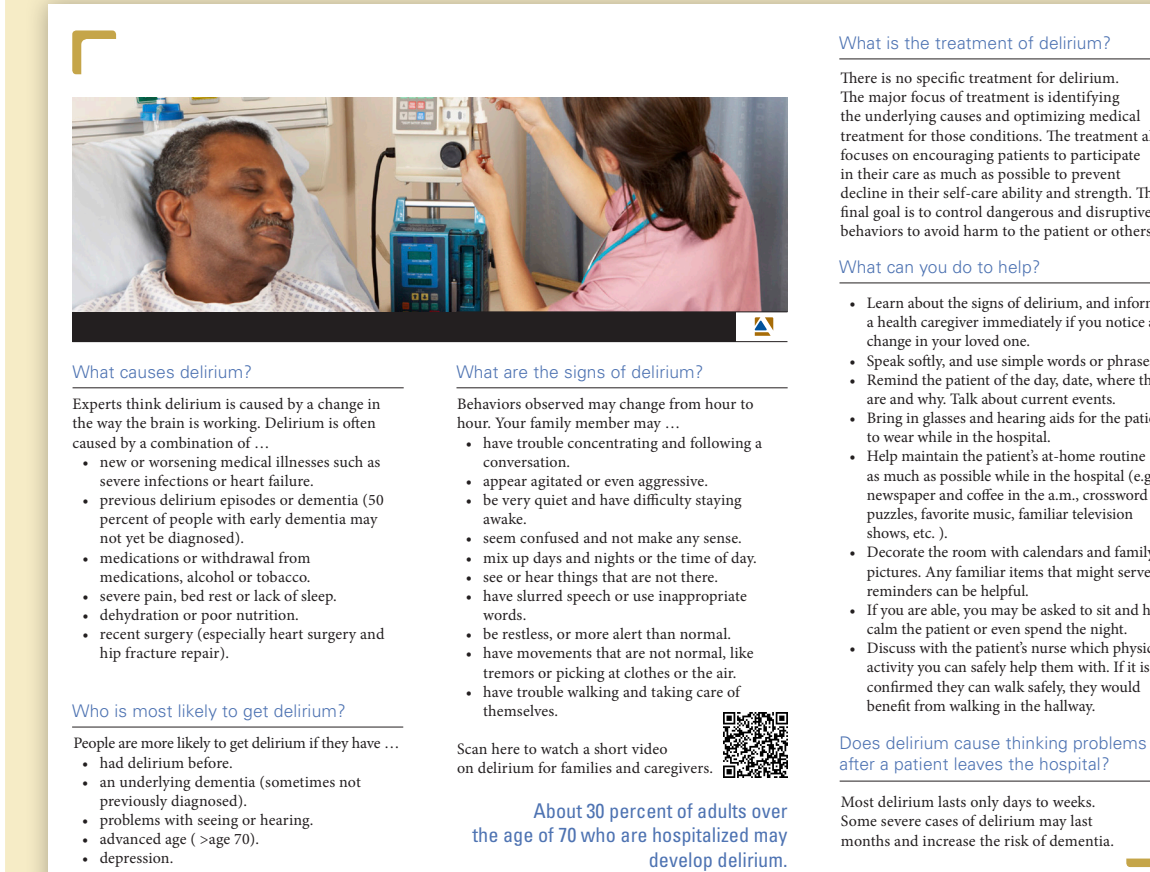
### INTERVENTIONS

- Participated in NICHE leadership training
  - 6 weeks, web-based
  - Completed vision, SWOT analysis, targeting priorities, action plan
  - Compiled system data
    - Cost, length of stay, admissions by age organizational-wide and by unit
- Increased awareness
  - Presentations at organizational and unit-based shared governance councils
  - Newsletter articles
  - One-on-one rounding
- Conducted Geriatric Institutional Assessment Profile (GIAP)
  - 2013 & 2014
  - Evaluated nurse knowledge, attitudes and perceptions toward care of older adults
  - Results directed Geriatric Resource Nurse education plan and pilot projects

### OUTCOMES

- NICHE designation attained 2013
  - Re-designation at progressive level 2014
- Geriatric Institutional Assessment Profile completed 2013 & 2014
  - Statistically significant increase in restraints, incontinence, and overall knowledge scores
    - Higher than peer benchmark
- Evidence-based geriatric education implemented
  - Geriatric Resource Nurse (GRN) model
    - Internal resources utilized
    - 3 cohorts completed
  - Pre-post test scores- 100% improvement demonstrated
  - 15 units across continuum of care represented
  - Critical care course module
  - Nurse Aide orientation module
  - Nursing collegiate education/Geriatric course in RN-BSN completion program
  - Education Symposium "Who Do You See When You Look at Me? Educating the Older Adult Patient"
  - Medical Residency rotation
- 100% increase in gerontological certified nurses
- Geriatric resources added to health sciences library
- Delirium project
  - Phase I
    - Pilot unit Coronary Care Unit
    - Training Confusion Assessment Method (CAM) and Mini-Cog
    - Baseline data collected
    - Computer documentation augmented
    - Algorithm outlined
    - Therapeutic activity/sleep promotion cart assembled
  - Phase II
    - Intervention education completed
    - Therapeutic activities implemented
  - Phase III
    - Data collection
- Mobility project
  - Phase I
    - Pilot Med-surg unit with chronic patient population
    - Chart audit
      - Inconsistent activity documentation and unclear activity orders
    - Tool selected
      - The Boston University Activity Measure for Post Acute Care (AM-PAC)<sup>TM</sup>
  - Phase II
    - Training- safe patient mobility and completion of tool
    - Data Collection- AM-PAC<sup>TM</sup> score on admission & discharge
    - Mobility level/intervention protocol outlined and approved by Med Exec Committee
  - Phase III
    - Education of mobility level/intervention protocol
  - 50% reduction in unit fall rate

### DELIRIUM BROCHURE



### FUTURE DIRECTIONS

- Continue GRN education
- Geriatric sub-committee of Practice Council
  - Ongoing support for established GRNs
  - Unit based project support
  - Incorporate geriatrics into existing policies
  - Journal club
- House-wide education
  - Delirium/Dementia
  - Mobility
  - Medications/Beers list
- Geriatric symposium
- Community HealthTalks
- Collaboration with:
  - Media
  - Aultcare
    - Insurance provider
  - Primetime
    - Medicare advantage program

Please scan the QR code for a reference list and author contact information

