

CONNECTED CARE TEAM: REDESIGNING ROLES FOR SAFETY, EFFICIENCY & ENGAGEMENT

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BACKGROUND

University Hospitals implemented the Connected Care Team, a whole-hospital model integrating redesigned bedside roles, interdisciplinary workflows, and EHR-embedded virtual caregivers. At UH Lake West Medical Center, the model spanned inpatient units, ICU, and the ED, deploying standardized workflows and virtual caregiver support in 100% of inpatient and ED rooms to strengthen communication, coordination, and patient safety.



PURPOSE

To evaluate the impact of a whole-hospital care model redesign, including virtual nursing and virtual observers, on patient safety, workforce well-being, and operational efficiency.

To demonstrate how transformational nursing leadership can design and scale innovative care delivery models that address workload, improve role clarity, and strengthen retention.

METHODOLOGY

Design: Mixed-methods, IRB exempt/reviewed evaluation using:

- Longitudinal, unpaired TEAMSTEPPS T-TPQ survey
- Surveyed up to 350 multidisciplinary caregivers
- Baseline + 12-week post implementation
- 6-month baseline vs. 12-week post operational, quality, and workforce metrics collected
- Human-centered design to guide development and iterative refinement



KEY FINDINGS

- **WHPPD remained stable with no additional FTEs**
- **74.6%** reduction in total falls
- Admissions completed virtually: **68%**
- Admission time reduced from 30 → 15 minutes
- **383** bedside nursing hours reclaimed in 3 months
- ~50% of discharges supported virtually
- 15-minute reduction per discharge
- Positive perceptions of supervisor/manager support increased from 71.9% pre-implementation to **89.4% post-implementation.**

CONCLUSION

Leadership-driven, scalable strategy across diverse acute care settings and presents a financially viable strategy for health systems navigating persistent staffing challenges.

WHAT LEADERS DID DIFFERENTLY

- Frontline co-design before standardization
- Maintained visible leadership presence
- Allowed iterative refinement
- Leaders monitored impact using nursing-relevant metrics (time reclaimed, falls, discharge flow)
- Efficiency gains were achieved through redesign, not labor expansion.



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