

- 3 The NICHE Program
- 4 Courses
- 16 Resources & Tools
- 50 Benchmarking & Measurement

NICHE Portfolios

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The NICHE Portfolio Series details each of the tools in the extensive collection of NICHE resources and curricula. Sections consist of an overview, features and benefits, application, topics or supporting resources, and real world elder care solutions implemented by NICHE hospitals and other healthcare organizations. All NICHE resources are designed to help nurses and other healthcare professionals achieve, evaluate, and sustain the NICHE program at their facilities.

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About NICHE

The NICHE Program

Improving interdisciplinary staff competence and driving system-level change is more important than ever to meet one of the most critical challenges of our times - quality care of older adults. Older adults are now the core consumers of hospital healthcare and nurses play a central role in providing care that results in positive outcomes.

NICHE is the leading nurse-driven program designed to help hospitals improve the care of older adults. The vision of NICHE is for all patients 65-and-over to be given sensitive and exemplary care. The NICHE mission is to provide principles and tools to stimulate a change in the culture of healthcare organizations to achieve patient-centered care for older adults.

NICHE, based at NYU College of Nursing, consists of hospitals and healthcare facilities in the U.S., Canada, Bermuda, and Singapore. NICHE engages hospitals and their affiliates in achieving and sustaining the NICHE designation. NICHE designation demonstrates a hospital's organizational commitment and continued progress in improving quality, enhancing the patient and family experience, and supporting the hospital's efforts to serve their communities.

The hospitals in the NICHE network have discovered

the NICHE program is a cost-effective solution for building and sustaining quality geriatric care programs. These programs have helped improve satisfaction levels for patients, caregivers, and hospital staff.

NICHE provides hospitals with...

- State-of-the-art training, tools, and resources including the online NICHE Knowledge Center
- Web-based Leadership Training Program (LTP)
- The Geriatric Institutional Assessment Profile (GIAP) and other benchmarking tools
- Shared information, knowledge, and expertise via the community of NICHE hospitals and affiliated geriatric experts

Following implementation of the NICHE Program, hospitals report...

- Enhanced nursing and interdisciplinary knowledge and skills in the care of older adult patients
- Improved clinical outcomes
- Greater patient and family satisfaction

Experience all that NICHE has to offer now.

Upon completion of the Leadership Training Program, the first step in implementing your NICHE Program will be to train your Geriatric Resource Nurses (GRNs). The GRN course is one of many NICHE Educational Courses in the NICHE Knowledge Center.

NICHE Educational Courses

Critical Care Nursing of Older

Adults Early mobility in older adult patients is recommended to prevent muscle breakdown and deconditioning, yet many patients in the ICU are placed on bed rest due to the severity of illnesses, staff fears of accidental removal of tubes and devices, and concerns over strain on patient status. See the Critical Care Nursing of Older Adults Portfolio on pages 5-6.

NICHE Geriatric Patient Care Associate Risk of delirium increases with age, but it is not a normal age-related change. 10%-40% of medically ill older patients develop delirium. See the Geriatric Patient Care Associate Portfolio on

NICHE Geriatric Resource Nurse

pages 7-8.

The Geriatric Resource Nurse (GRN) model originated at Boston's Beth Israel Hospital in the late 1980's, born from a belief that nurses who feel passionately about the care of older adult patients will excel in meeting the complex problems of this patient group. See the Geriatric Resource Nurse Portfolio on pages 9-10.

NICHE Introduction to

Gerontology Of the 2.2 million practicing RNs only 1% are American Nurses Credentialing Center (ANCC) certified as gerontological nurses and/or geriatric Advanced Practice Nurses. What's more, only a third of Bachelor of Science Nursing programs have a required course in geriatrics. **See the Introduction to Gerontology Portfolio on pages 11-12.**

Nursing Care of the Older Adult with Cancer The single greatest risk factor for developing cancer is aging. There is a two- to three-fold increase in incidence rates in people age 65-74. And cancer-related mortality rates have increased for individuals aged 65 years or older. See the Nursing Care of the Older Adult with Cancer Portfolio on pages 13-14.



Critical Care Nursing of Older Adults

Overview

The educational series, Critical Care Nursing of Older Adults, provides evidence-based guidelines for nurse clinicians working with older adults in critical care, step-down units, trauma and emergency departments, NICHE created the course in response to the fact that older adults overwhelmingly represent the majority of patients receiving critical care worldwide. Content is based on the book, Critical Care Nursing of Older Adults Best Practices (3rd ed.), edited by M. D. Foreman, K. Milisen, and T. Fulmer (published by Springer Publishing Company, 2010). Marie Boltz, PhD, GNP, BC, is the editor of the course. Julie Davey, MSN, RN, APRN, BC, served as consultant.

Features & Benefits

The educational series modules provide clinicians with the following guidance:

Feature: Understand the context for critical care nursing of older adults Benefit: Support the older adult's recovery and promote improved long-term functional status

Feature: Recognize infection, sepsis, and immune function in older adults

Benefit: Manage and mitigate infections in older adult patients

Feature: Understand and manage sleep disorders in older adult patients in the ICU

Benefit: Promote quality sleep patterns in the older adult patient

Feature: Use best nursing practice for the critically ill older patient with heart failure

Benefit: Promote comfort of the older adult experiencing heart failure

Feature: Understand acute respiratory failure and mechanical ventilation in the older adult

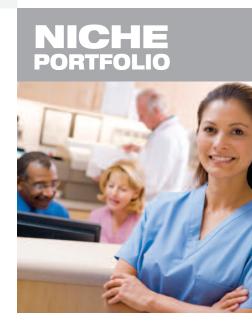
Benefit: Promote comfort of the older adult experiencing respiratory failure

Feature: Understand delirium in critical illness

Benefit: Help prevent and manage delirium in older adult patients

Applications

Designed for clinicians working with older adults in critical care, step-down-units, and trauma and emergency departments.



- Need to Know by NICHE Series: Communication
- NICHE for Patient+Family **Resources: Mobile App and Encyclopedia - Category,** Communication
- NICHE Solutions Series: Healthcare Environments, Emergency Department
- NICHE Online Connect Webinars: Safety, Function and Falls
- Try This Issue 13: Confusion Assessment Method (CAM)
- Try This Issue 25: Confusion Assessment Method for the Intensive Care Unit (CAM-ICU)
- NICHE Network News: The Critical Care File
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" Book (4th Edition, 2012). **New York: Springer Publishing**



Critical Care Nursing of Older Adults

NICHE Hospital Innovation

Environmental and Social Approaches to Improve Outcomes for the Hospitalized Older Adult

Author: Sandra Wright, RN, BSN, MS, Clinical Manager, The Christ Hospital, Cincinnati, Ohio

The 28-bed, NICHE - Gerontology unit of Christ Hospital used a series of environmental and social interventions to improve patient outcomes, specifically patient satisfaction, safety, and falls. The interventions were identified by staff and champions helped with the implementation.

Environmental interventions included:

- Installation of signs reminding patients to call for assistance getting to the bathroom
- Coloring the call light to improve visibility
- Raising the toilet seat
- Fall risk and other key points in care identified on white boards

Also, use of an electronic medical record with computer physician order entry and bar code medication administration was implemented.

Social interventions included:

- Including the patient and family on daily rounds
- Intensive volunteer involvement with patients
- Implementation of the SBAR (Situation, Background, Assessment, and Recommendation) method of standardizing communication

Results

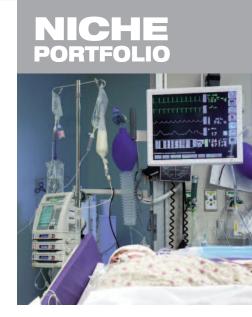
Over a twelve-month period from June 2008 to June 2009, the Press Ganey patient satisfaction scores increased from 82% to 86%. There was an 84-day period of time without any falls. Overall, the incidence of falls decreased by 25%. The coordinated interventions program stimulated overall improvement of outcomes on the unit. All members of the nursing staff were involved and accepted the challenge of finding other smaller approaches that, when combined with the program efforts, improved patient safety.

REFERENCES

1. Hart, B., Birkas, J., Lachmann, M., & Saunders, L. (2002). Promoting positive outcomes for elderly persons in the hospital: Prevention and risk factor modification. *AACN Clinical Issues*, 13(1), 22-33.

2. Thornlow, D.K., Anderson, R., & Oddone, E. (2009). Cascade iatrogenesis: factors leading to the development of adverse events in hospitalized older adults. *Int J Nurs Studies*, 46 (11):1528-35.

View the Critical Care Nursing of Older Adults. These resources are available only to NICHE member organizations.



- Need to Know by NICHE Series: Communication
- NICHE for Patient+Family **Resources: Mobile App and Encyclopedia - Category,** Communication
- NICHE Solutions Series: Healthcare Environments, Emergency Department
- NICHE Online Connect Webinars: Safety, Function and Falls
- Try This Issue 13: Confusion Assessment Method (CAM)
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- NICHE Network News: The Critical Care File
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" Book (4th Edition, 2012). **New York: Springer Publishing**



NICHE Geriatric Patient Care Associate

Overview

The Geriatric Patient Care Associate (GPCA) (2nd Edition) is a web-based course that supports the role of the patient care associate/patient care technician in providing best practice care to older adult patients. The seven GPCA modules address issues relevant to the healthcare worker, who plays a pivotal role in the older adult's recovery and comfort. In addition to these modules, the content is also provided in instructor led PowerPoints.

Features & Benefits

Feature: Describes age-related sensory lost and hospital-related sensory

overload, and sensory deprivation in the older adult patient

Benefit: Provides basis for minimizing the impact of sensory changes on the older adult patient

Feature: Describes iatrogenic illnesses in older patients, geriatric clinical syndromes and the effects of aging on different systems of the body

Benefit: Gives GPCAs the knowledge to deal with the four F's: Frailty, Function, Feeding, and Food

Feature: Identifies age-related changes in the skin and explains the importance of skin care in older adults

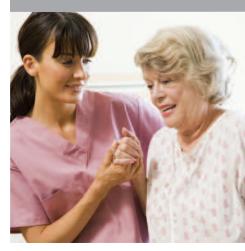
Benefit: Arms the GPCA with the knowledge to help prevent skin tears and pressure ulcers in older adult patients

Feature: Discusses the significance of and best practices for dealing with delirium, dementia, and depression in hospitalized older adults

Benefit: Provides the knowledge required to implement care interventions to help prevent and manage delirium, dementia, and depression

Application

The GPCA complements the 2nd edition of the NICHE Geriatric Resource Nurse (GRN) training program and the NICHE Introduction to Gerontology series designed for all hospital personnel. Combined, these curricula enable educators to deliver a comprehensive education program of evidence-based geriatric nursing care in their hospital.



- NICHE Organizational Strategy: Patient Family Advisory Councils
- Geriatric Resource Nurse (2nd Edition, 2012)
- Introduction to Gerontology (2nd Edition, 2012)
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New **York: Springer Publishing**
- NICHE Online Connect Webinars: Geriatric Care Interventions, Geriatric Practice
- NICHE Solutions Series: Geriatric Care Interventions, Geriatric Practice



NICHE Geriatric Patient Care Associate

NICHE Hospital Innovation

Nursing Assistant Geriatric Training: A Collaboration between an Academic Medical Center and a School of Nursing

Authors: Suzanne Purvis, MSN, RN, GCNS, Susan M, Heidrich, PhD, RN, Kim Walker-Daniels, RN-BC, CMSRN, University of Wisconsin Hospital and Clinics, Madison, Wisconsin

Improving care and outcomes for older adult patients has typically focused on increasing the knowledge and expertise of staff nurses. However, nursing assistants (NAs) also provide a significant amount of patient care. NAs may not be equipped with the specialized knowledge needed to improve care of older adult patients and understand their specialized needs.

The goal of the project at the University of Wisconsin Hospital and Clinics, a large, acute care academic medical center, was to improve care of older adult hospital patients through the education of NAs. The strategy employed to achieve the goal was the development of computer-based continuing education for NAs.

The project was a collaborative effort teaming the Geriatric Clinical Nurse Specialist, 26 NICHE Geriatric Resource Nurses (GRNs), and faculty and undergraduate students in the University of Wisconsin-Madison School of Nursing. The group developed 25 Geriatric Patient Care presentations. The topics for each of the presentations were randomly assigned to GRNs teamed with groups of nursing students taking a course in gerontological nursing. Each team developed a 15minute presentation on their topic geared to the educational needs of NAs. NAs reviewed the presentations, evaluated the modules, and received continuing education credits.

The GRNs evaluated the usefulness of the content, ease-of-use, and satisfaction with the presentation format. Twenty-five successful presentations are now being used as resources for NA education throughout the system. Six of these have been incorporated into a workshop for NAs, as well as NA orientation.

REFERENCES

- 1. Wertheimer, D. (2002). The Geriatric Nursing Assistant: The Most Important Team Player the Most Important Eyes. Baltimore: University of Maryland
- Calletter, T., Robinson, S.B., Henderson, L., & Anderson, K. (2005). Helping Hands: CNAs in Elder Care. Nursing Management, 36(4), 41-46.

NICHE-RELATED RESOURCES

1. NICHE Planning & Implementation Guide: Staff Development.

View the Geriatric Patient Care Associate. These resources are available only to NICHE member organizations.



- NICHE Organizational Strategy: Patient Family Advisory Councils
- Geriatric Resource Nurse (2nd Edition, 2012)
- Introduction to Gerontology (2nd Edition, 2012)
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New **York: Springer Publishing**
- NICHE Online Connect Webinars: Geriatric Care Interventions, Geriatric Practice
- NICHE Solutions Series: Geriatric Care Interventions, Geriatric Practice



NICHE Geriatric Resource Nurse

Overview

The Geriatric Resource Nurse (GRN) (2nd edition 2012) is designed for use by NICHE members who educate nurses in best practices for older hospitalized adults. The online curriculum contains the latest evidence-based practice content, and is designed for easy access and navigation. The GRN is based on the book Evidence-Based Geriatric Nursing Protocols for Best Practice.

Features & Benefits

Feature: Describes the process of normal aging and how it produces modifications in both the structure and function of organs in older adults

Benefit: Provides an educational component for incorporating into routine nursing care the clinical significance of age-related changes in communication, risk of disease, atypical presentation, and health of older adults

Feature: Discusses risk factors contributing to falls in older adults **Benefit:** Arms Geriatric Resource Nurses with knowledge to help educate nursing staff in identifying those with high fall risk, and the means to mitigate the risk and prevent patient injuries

Feature: Explains the safe and effective use of medication for older adult patients **Benefit:** Provides a basis for educating nurses regarding inappropriate medications for older adults and intervention measures to avoid adverse drug events

Feature: Describes the consequences of reduced mobility in older adults **Benefit:** Supports nurse education efforts for development of individualized care plan strategies that reduce deconditioning

Application

The Geriatric Resource Nurse is part of the NICHE Core Curriculum, that also includes the Geriatric Patient Care Associate (GPCA) for patient care associates, the Introduction to Gerontology for all personnel across all hospital departments, the Nursing Care of the Older Adult with Cancer, and the Critical Care Nursing of Older Adults. Combined, these curricula enable educators to deliver a comprehensive education program of evidence-based geriatric nursing care in their hospitals, and allow hospitals to elevate their NICHE programs to greater levels of success.



- NICHE Leadership Training (LTP) **Program**
- Introduction to Gerontology (2nd Edition, 2012)
- NICHE Planning & Implementation
- NICHE Hospitals Report Summary
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New York: Springer Publishing
- NICHE Online Connect Webinars: Implementing NICHE, GRN
- NICHE Solutions Series: Safety, Medication



NICHE Geriatric Resource Nurse

NICHE Hospital Innovation

Integrating Geriatrics with Patient & Family Centered Care on Medical Specialties

Author: Justin Montgomery, ARNP, MSN, Geriatric Nurse Coordinator, Dartmouth-Hitchcock Medical Center, Lebanon, New Hampshire

A multidisciplinary team at the Dartmouth-Hitchcock Medical Center implemented a multifaceted approach (Geriatric Resource Nurse and Geriatric Patient Care Associate roles, and transitional care initiatives) to better meet the unique care needs of their older adult patient group.

The team employed a number of initiatives to help transform the culture of geriatric care and achieve the greatest potential for the older adult patients and their families. These initiatives included:

- Creation of a Geriatric Nurse Coordinator position in the medical specialty line
- Formation of a geriatric steering committee
- Use of local and national resources, including...
 - NICHE Designation
 - Dartmouth Centers for Health and Aging partnership
 - Clinical Microsystems quality improvement processes

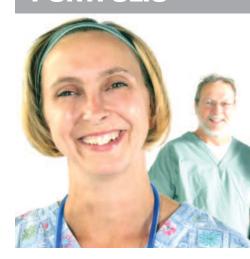
Specific action steps involved an "Ask the Nurse" community education program, follow-up phone calls, and ongoing internet-based education efforts. A Geriatric Resource Nurse and a Geriatric Patient Care Tech were also added to the staff.

In those areas that the program sought to improve outcomes for hospitalized older adults, results showed a 19% decrease in loss of functional status, 6-36% lower rates of delirium compared to reported levels, and pressure ulcers prevalence rates reduced by more than half from 6% to 2%.

REFERENCES

Bechtel, C. & Ness, D.L. (2010). If you build it, will they come? Designing truly patient-centered health care. Health Affairs, 29 (5), 914-20.
 Boltz, M., Capezuti, E., Bowar-Ferres, S. et al. (2008). Changes in the Geriatric Care Environment Associated with NICHE (Nurses Improving Care for Healthsystem Elders). Geriatr Nurs. 2008 May-Jun; 29(3):176-85.
 Havens, D.S., Vasey, J., Gittell, J.H. & Lin W.T. (2010). Relational coordination among nurses and other providers: impact on the quality of patient care. Journal of Nursing Management 18 (8), 926-937.

View the Geriatric Resource Nurse. These resources are available only to **NICHE** member organizations.



- NICHE Leadership Training (LTP) **Program**
- Introduction to Gerontology (2nd Edition, 2012)
- NICHE Planning & Implementation
- NICHE Hospitals Report Summary
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New York: Springer Publishing
- NICHE Online Connect Webinars: Implementing NICHE, GRN
- NICHE Solutions Series: Safety, Medication



NICHE Introduction to Gerontology

Overview

The Introduction to Gerontology (2nd Edition, 2012) is designed to increase hospital personnel's sensitivity to the aging process, improve the recognition of age-related changes in older adult patients, and enhance communication skills with older adult patients and their families.

Features & Benefits

Feature: Provides an understanding of the stages of aging and an awareness of ageism in society

Benefit: Helps prepare nurses and other staff to care for older adult patients in the best way possible and improve clinical outcomes

Feature: Describes iatrogenic illnesses in older patients, geriatric clinical syndromes, and the effects of aging on different systems of the body Benefit: Promotes understanding of the effects of aging so optimal care can be provided to older patients

Feature: Describes care strategies for declines in vision, hearing, taste/smell, and touch/sensation

Benefit: Supports health promotion related to functional decline, and agingsensitive interventions

Feature: Details the communication process and identifies verbal and nonverbal communication skills, as well as barriers to effective communication Benefit: Promotes effective communication with older adults and their families to support patient-centered care

Application

The Introduction to Gerontology is part of the NICHE Core Curriculum, which also includes the Geriatric Patient Care Associate (GPCA) for patient care associates and the Geriatric Resource Nurse (GRN) for clinical nurses. Combined, these curricula enable educators to deliver a comprehensive education program of evidence-based geriatric nursing care in their hospital.



- NICHE Organizational Strategy: **Certification Toolkit**
- NICHE Planning & Implementation **Guide:** Staff Development
- Geriatric Resource Nurse (2nd Edition, 2012)
- Geriatric Patient Care Associate (2nd Edition)
- NICHE "Evidence-Based Geriatric Nursing Protocols for Best Practice" (4th Edition, 2012). New York: **Springer Publishing**
- NICHE Online Connect Webinars: Geriatric Care Interventions, Geriatric Practice



NICHE Introduction to Gerontology

NICHE Hospital Innovation

Communication Tune Up: The Elderspeak Challenge

Author: Kristine Williams, RN, PhD, FNP-BC, FGSA, University of Kansas School of Nursing

Positive communication is of critical importance to older adult patients, yet persons who care for older adults in healthcare settings are often challenged to communicate effectively. Elderspeak, or simplified speech, is a common communication style in older adult patient care. Older adults find elderspeak patronizing, and it fails to improve older adults' ability to understand communication.

Dr. Williams' communication study involved:

- Identifying common communication barriers for older adults in healthcare settinas
- Increasing awareness of the importance of communication for older adults and persons with dementia (PWD)
- · Understanding elderspeak, it's negative messages, and recent research findings
- Identifying/practicing effective communication strategies for older adults and PWD

Strategies for Effective Communication

Verbal

- Address speaker by name
- Paraphrase
- Reflect speaker's feelings
- Ask for more information
- Respond on topic
- Modify speech only as needed

Non-Verbal

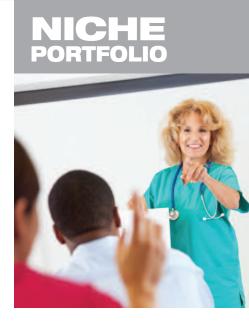
- Maintain eye contact
- Posture
- Be patient
- Assure a quiet environment

- Appropriate volume

Conclusions

- Affective messages of staff-resident interactions affect resident cooperation during care
- Communication using a controlling tone correlated with an increase
- Training staff to communicate in less controlling tones is needed

View the Introduction to Gerontology. These resources are available only to NICHE member organizations.



- NICHE Organizational Strategy: **Certification Toolkit**
- NICHE Planning & Implementation **Guide:** Staff Development
- Geriatric Resource Nurse (2nd Edition, 2012)
- Geriatric Patient Care Associate (2nd Edition)
- NICHE "Evidence-Based Geriatric Nursing Protocols for Best Practice" (4th Edition, 2012). New York: **Springer Publishing**
- NICHE Online Connect Webinars: Geriatric Care Interventions, Geriatric **Practice**



Nursing Care of the Older Adult with Cancer

Overview

The educational series, Nursing Care of the Older Adult with Cancer, provides the nurse clinician with practical information regarding the complexities and special considerations associated with caring for older adults with cancer in all practice settings. The content was derived from the book, An Evidence-Based Approach to the Treatment and Care of the Older Adult with Cancer, edited by Diane Cope, PhD, ARNP, BC, AOCNP, and Anne Reb. MSN, NP (published by the Oncology Nursing Society, 2008). This course is based upon original content that was revised in 2011. The six modules address: cancer demographics in older adults, age-related changes and cancer, nursing considerations related to radiation and chemotherapy. symptom management, and psychosocial issues. Editor: Diane G. Cope, PhD, ARNP, BC, AOCNP. Associate Editor: Marie Boltz, PhD, GNP, BC.

Features & Benefits

The educational series will enable clinicians to:

Feature: Recognize age-related changes in organ systems and molecular functions that may result in increasing susceptibility to cancer

Benefit: Support health promotion related to cancer, and aging-sensitive interventions

Feature: Use best nursing practices for older adults receiving radiation

Benefit: Promote therapeutic response and prevent complications in the older adult with cancer

Feature: Understand the option of chemotherapy for treating aging adults with

Benefit: Promote therapeutic response and prevent complications in the older adult with cancer

Feature: Understand the symptoms, instance rates, contributing factors, potential complications, assessment, and symptom management for cancer side effects Benefit: Promote comfort of the older adult with cancer

Feature: Understand the importance of psychosocial issues as they relate to the care of the older adult with cancer

Benefit: Promote patient and family self-direction, coping, and access to resources

Applications

Designed for Geriatric Resource Nurses and other clinicians working in all settings that provide care to older adults with cancer.



- Need to Know by NICHE Series: Communication
- NICHE for Patient+Family Resources: Mobile App and Encyclopedia -**Category, Communication**
- NICHE Solutions Series: Safety, Medication
- Try This Issue 7: Assessing Pain In Older Adults
- Try This Issue 27: General Screening Recommendations for Chronic Disease and Risk Factors in Older Adults
- NICHE Network News: The Oncology
- Cancer websites: Journal of Geriatric Oncology http://www.geriatriconcology.net



Nursing Care of the Older Adult with Cancer

NICHE Hospital Innovation

Use of the Clock Drawing Test (CDT) to Identify Early Signs of **Delirium in Post-Operative Older Oncology Patients**

Author: Heidi M. Yulico, RN, MSN, GNP-BC, Memorial Sloan-Kettering Cancer Center, New York, **New York**

Through an innovative approach to improving transitional care for geriatric oncology patients undergoing surgical interventions, the geriatric service team at Memorial Sloan-Kettering Cancer Center found that using a comparison of patients' pre-operative and post-operative clock drawings could predict which patients would go on to experience post-operative delirium (POD).

Delirium is a significant problem for post-operative older adult patients, and it usually triggers a cascade of events that culminate with increased morbidity and mortality. Unfortunately, early signs of delirium are often difficult to identify.

The Confusion Assessment Method (CAM) is a well-documented tool designed to assess patients for delirium. But by the time patients screen positive on the CAM they are already severely cognitively impaired. The Clock Drawing Test (CDT) is a validated test for assessing cognition, but few studies have used this test to screen for POD in cancer patients.

As part of a study at Memorial Sloan-Kettering Cancer Center conducted from September 1, 2010 to November 26, 2010, surgery patients over 74 were referred to the Geriatric Clinic for pre-operative assessment during which they completed the CDT. All of these patients were then seen in the hospital within three days of their surgery by the Geriatric Nurse Practitioner (GNP) to evaluate their general medical management. During this evaluation, the GNP used the CDT to screen for subtle changes in cognition.

Results

The study demonstrated that comparisons of the patients' ability to draw the clock provided a means of identifying patients who were at high risk of experiencing delirium. Using these results, recommendations could be made to the surgical team that is managing the patient on how to optimize their care. Now, when CDT changes are observed, specific interventions are instituted to prevent and/or treat delirium.

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- 1. Adamis D, Morrison C, Treloar A, et al. The performance of the clock drawing test in elderly medical inpatients: Does it have utility in the identification of delirium? *J Geriatr Psychiatry Neurol*. 1996:18(3):129-133.

 2. Ansaloni L, Catens F, Chattat R. Risk factors and incidence of postoperative delirium in elderly patients after elective and emergency surgery. *B J Surg.* 2010:97: 273-280.

 3. Bryson GL, Wyand A, Wozny D, Rees L, Taljaard M, Nathan H. The clock drawing test is a poor screening for postoperative delirium and cognitive dysfunction after aortic repair. *Can J Anaesth*. 2010 Dec 31. [Epub ahead of print] PubMed PMID: 21194015.

 4. Bush SH, Bruera E. The assessment and management of delirium in cancer patients. *The Oncologist* 2009:14, 1039-1049.

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- 506. 1953-1962, 175716.
 7. Inouye SK, Charpentier PA. Precipitating factors for delirium in hospitalized elderly persons. Predictive model and interrelationship with baseline vulnerability. J Am MeD Assoc. 1996:275: 852-857.

View the Nursing Care of the Older Adult with Cancer course. These resources are available only to NICHE member organizations.



- Need to Know by NICHE Series: Communication
- NICHE for Patient+Family Resources: Mobile App and Encyclopedia -**Category, Communication**
- NICHE Solutions Series: Safety, Medication
- Try This Issue 7: Assessing Pain In Older Adults
- Try This Issue 27: General Screening Recommendations for Chronic Disease and Risk Factors in Older Adults
- NICHE Network News: The Oncology
- Cancer websites: Journal of Geriatric Oncology http://www.geriatriconcology.net

Value Estimate: Cost and Benefits

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^{*} Unlimited Users

From the Leadership Training Program (LTP) through our library of NICHE Online Connect Webinars, the hundreds of NICHE Resources & Tools are available to all NICHE designated hospitals.

NICHE Resources & Tools

NICHE Annual Conference The 2015 Annual Conference attracted 830 nurses and other healthcare professionals. See the Annual Conference Portfolio on pages 17-18.

A Crosswalk: Joint Commission Standards and NICHE Resources

Cross-reference tool details NICHE resources available to help achieve compliance in nine standards categories. See the A Crosswalk: Joint Commission Standards and NICHE Resources on pages 19-20.

NICHE Clinical Improvement Models

The almost nonexistent use of physical restraint in the United Kingdom provides evidence of the feasibility of eliminating use of physical restraints in U.S. hospitals. See the Clinical Improvement Models Portfolio on pages 21-22.

NICHE Discussion Forums As of July 2015, the various NICHE Discussion Forum platforms were hosting nearly 550 discussions. **See the Discussion Forums Portfolio on pages 23-24.**

NICHE Education Briefs The Self-Neglect Brief reports that abuse affects 4% of the older adult population. **See the Education Briefs Portfolio on pages 25-26.**

NICHE Hospitals Reports Transitions Hospital Report details positive outcomes and innovative initiatives experienced at five NICHE hospitals. **See the NICHE Hospitals Reports Portfolio on pages 27-28.**

NICHE Leadership Training Program

The following titles have all been represented on hospitals' NICHE Steering Committees: CNO, Clinical Specialist, Geriatrician, Social Worker, Nurse Manager, Physician, Educator, Quality Control, Staff Nurse, and Physical Therapist. See the Leadership Training Program Portfolio on pages 29-30.

NICHE Media Kit & Marketing

Resources A NICHE banner and NICHE posters are supplied to hospitals upon designation. **See the Media Kit & Marketing Resources Portfolio on pages 31-32.**

Need to Know by NICHE Series

According to the Skin Care to Know, patients should change position at least every 2 hours to relieve pressure. See the Need to Know by NICHE Series Portfolio on pages 33-34.

NICHE Organizational Strategies

The Certification Toolkit Strategy identifies nurse certification as the formal process by which a certifying agency validates a nurse's knowledge, skills, and abilities. See the Organizational Strategies Portfolio on pages 35-36.

NICHE for Patient+Family App

Provides guidance in dealing with 24 older adult healthcare issues. See the NICHE for Patient+Family App Portfolio on pages 37-38.

NICHE for Patient+Family Encyclopedia Content is presented in six categories: Facilities, Safety, Support, The Basics, The Body, and The Mind. See the NICHE for Patient+Family

Encyclopedia Portfolio on pages 39-40.

NICHE Planning & Implementation

Guide The "Developing a Shared Vision for Improved Geriatric Care" worksheet documents the NICHE team's vision.. See the Planning & Implementation Guide Portfolio on pages 41-42.

NICHE Evidence-Based Geriatric Nursing Protocols for Best Practice

BOOK Protocols for each clinical condition described were developed by experts in that specific area. **See the Protocols Book Portfolio on pages 43-44.**

NICHE Solutions Series Over forty Solutions success stories in eight categories have been published. **See the Solutions Series Portfolio on pages 45-46.**

NICHE Online Connect Webinars

Over eighty NICHE Online Connect Webinars are available in the recorded webinar library. **See the Online Connect Webinars Portfolio on pages 47-48.**



NICHE Annual Conference

Overview

The annual NICHE Conference is a four-day event highlighting evidence-based innovations, research, and networking opportunities. The goal is to provide support to hospitals and other healthcare organizations in meeting one of the most critical challenges of our times - quality care of older adults. The conferences include keynotes, panel presentations, and poster presentations from geriatric experts and at-the-forefront NICHE programs addressing a wide range of topics.

Features & Benefits

Feature: Renowned keynote speakers

Benefit: Presentations by recognized experts and thought-leaders provide attendees with insightful perspectives on national geriatric initiatives, policy analysis, and leading-edge models of care

Feature: Interactive panels

Benefit: Equip attendees with a wealth of information and insights from members of highly successful NICHE programs and other healthcare professionals on improving care for older adult patients

Feature: Poster presentations

Benefit: Wide range of posters based on specific conference foci give attendees reviews of innovative NICHE and non-NICHE hospital initiatives that they can use at their own sites to improve quality of care for older adult patients

Feature: Research updates

Benefit: National leaders in the field of older adult patient acute care provide the most recent research findings on various geriatric-related topics

Feature: Networking

Benefit: Provides attendees with opportunities to learn more about NICHE and make connections with colleagues

Application

The annual NICHE Conferences open up new paths for attendees to innovative solutions and higher quality care trends that meet the special and diverse needs of the older adult. Clinicians, administrators, and researchers present evidencebased approaches to promote positive outcomes and experiences for the hospitalized older adult.



- NICHE Leadership Training Program
- NICHE Planning & Implementation Guide
- NICHE Organizational Strategy: Nurse Certification Tool Kit.
- Clinical Improvement Models
- NICHE Education Briefs
- Geriatric Resource Nurse (2nd Edition, 2012)
- Introduction to Gerontology (2nd Edition, 2012)
- Geriatric Patient Care Associate (2nd Edition, 2012)
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New York: Springer Publishing
- NICHE Online Connect Webinars
- NICHE Solutions Series
- Need to Know by NICHE Series
- Joint Commission Crosswalk
- NICHE for Patient+Family App and **Encyclopedia**



NICHE Annual Conference

NICHE Hospital Innovation

Dilemma of Delirium in the Geriatric Hip Fracture Patient

2012 Conference Poster Session Winner in the Care for the Critically III Older Adult category. Author: Amy Williamson, BSN, RN, ONC, Texas Health Harris Methodist Hospital, Fort Worth, Texas

Delirium occurs in 14% to 56% of older patients and represents the most frequent complication for this group. The incidence of delirium among hip-surgery patients is 43-60%. The length of stay for a patient with acute delirium can be expected to increase by an average of 8 days. The mortality rate for patients with delirium is 22%, and the one-year mortality rate is 35% to 40%. In spite of the delirium occurrence rate, the complication frequently goes unrecognized and untreated in up to 70% of patients.

In view of the potential for 50% of geriatric hip fracture patients developing delirium while hospitalized, the hospital launched an initiative to develop ways to protect this very specialized patient population using education, screening and assessment tools, and an interdisciplinary approach to the creation of a delirium algorithm. The algorithm provided a pathway to better screening, recognition, and diagnosis of delirium in the geriatric hip fracture patient population. Also, understanding nursing staff are critical to the proper recognition and treatment of patients with delirium, the interdisciplinary team provided multiple opportunities for formal and informal education to all dedicated geriatric hip fracture nursing staff.

The initiative included:

- Nurse education on delirium and the CAM (Confusion Assessment Method) tool
- Delirium screening tool for geriatric hip fracture patient population
- · CAM tool use
- · Predictive model for delirium and CAM tool use/trends tracking
- Delirium prevention discussion during rounds
- Patient family delirium education brochure
- Patient family involvement in the care of the patient
- Hospitalist notification whenever CAM tool indicated delirium

By way of results, the interdisciplinary team tracked the implementation of the delirium predictive model and the daily use of the CAM tool with an emphasis on trends, compliance, and performance improvement. Results showed use of the CAM tool with the at-risk population increased over 70% during a five-month period.

FOR MORE

- Inouye SK, et al. *Ann Intern Med.* 1990;113:941-8.
 Confusion Assessment Method (CAM) and CAM-ICU in: Inouye SK. Delirium in hospitalized older patients. *Clin Geriatr Med.* 1998; 14:745-764.
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 Deschodt M, et al. Preventing delirium in older adults with recent hip fracture through multidisciplinary geriatric consultation. *J Am Geriatr* 2012 Soc.

NICHE-RELATED

1. Milisen, K., Braes, T., & Foreman, M.D. Chapter 8 Assessing Cognitive Function (pp. 122-134). In Boltz, M., Capezuti, E., Fullmer, T., & Zwicker, D. (eds.) (2012). Evidence-Based Geriatric Nursing Protocols for Best Practice (4th ed.). New York: Springer.

2. Tullmann, D.F., Fletcher, K., & Foreman, M.D. Chapter 11 Delirium: Prevention, Early Recognition, and Treatment (pp. 186-199). In Boltz, M., Capezuti, E., Fullmer, T., & Zwicker, D. (eds.) (2012). Evidence-Based Geriatric Nursing Protocols for Best Practice (4th ed.). New York: Springer.

3. Depression, Delirium, and Dementia. NICHE Geriatric Resource Nurse Training Program. (Available at http://www.nicheprogram.org/courses/114)

4. Delirium in Critical Illness. Module 6 in Critical Care. Boltz, M. & Davey, J. (2010). Based on: Delirium in Critical Illness. In Foreman, M.D., Milisen, K., & Fulmer, T.T. (Eds.). Critical Care Nursing of Older Adults Best Practices (3rd ed.) (pp. 577-597). New York: Springer Publishing Co. (Available at http://elearningcenter.nicheprogram.org/course/view.php?id=93&page=710)

5. Is Your Patient Confused? Module 6 of Geriatric Patient Care Associate Training Program. (Available at http://elearningcenter.nicheprogram.org/course/view.php?id=93&page=710)

http://elearningcenter.nicheprogram.org/course/view.php?id=28)

View the current NICHE Conference website. The conferences are open through paid registration to all interested healthcare professionals.



Support Resources

- NICHE Leadership Training Program
- NICHE Planning & Implementation Guide
- NICHE Organizational Strategy: Nurse Certification Tool Kit.
- Clinical Improvement Models
- NICHE Education Briefs
- Geriatric Resource Nurse (2nd Edition, 2012)
- Introduction to Gerontology (2nd Edition, 2012)
- Geriatric Patient Care Associate (2nd Edition, 2012)
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New York: Springer Publishing
- NICHE Online Connect Webinars
- NICHE Solutions Series
- Need to Know by NICHE Series
- Joint Commission Crosswalk
- NICHE for Patient+Family App and **Encyclopedia**
- NICHE Conference App

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A Crosswalk: Joint Commission Standards and NICHE Resources

Overview

The Crosswalk: Joint Commission Standards and NICHE Resources document details how NICHE resources comply with the Joint Commission Standards in terms of care of the older adult patient. The crosswalk aligns the Joint Commission categories with NICHE Principles, and matches each of the Joint Commission standards with NICHE standards, and lists and links all the relevant tools and resources in the NICHE Knowledge Center that can help you achieve/work toward those standards.

Features & Benefits

Feature: The Joint Commission Standards provide a framework for using NICHE resources to meet the requirements to improve patient safety and outcomes **Benefit:** A Crosswalk supports efforts to improve healthcare safety for older adult patients using NICHE resources

Feature: NICHE Resources are crossed-referenced against published Joint **Commission Standards**

Benefit: Aids in meeting with the Joint Commission Standards to assure hospitals and other healthcare facilities are meeting current quality and safety standards

Feature: Document is organized to easily reference Joint Commission standards to NICHE resources

Benefit: Provides fast, easy cross-reference to standards of interest to user

Feature: For NICHE Members, the resource directly links to the resources in the Knowledge Center for ease in use

Benefit: Allows quick, easy access to NICHE resources of use in implementing initiatives related to older adult patient care

Application

The Crosswalk: Joint Commission Standards and NICHE Resources is available to NICHE member hospitals and non-NICHE hospitals to support Joint Commission Standards compliance efforts. The Member tool has links for ease of use. Nonmembers is not linked as most tools and resources are members only.



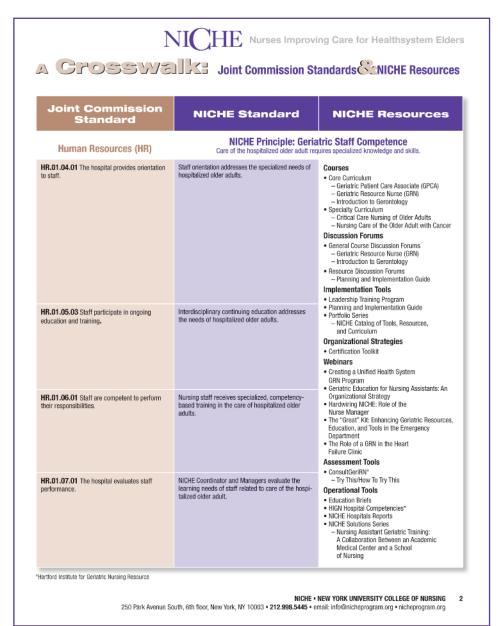
A Crosswalk: Joint Commission Standards and NICHE Resources Categories

- Environment of Care: Details required elements to maintain a safe, functional environment.
- Human Resources: Details staff orientation, education/training, competence, and performance requirements.
- Information Management: Outlines standards for knowledge-based information resources.
- Leadership: Correlates leadership standards to NICHE resources.
- Medication Management: Details medication reconciliation and safe medication practices for older adults and JC standards.
- Nursing: Nurse executive guidelines.
- Performance Improvement: Data collection and analysis requirements for quality initiatives.
- Provision of Care: Details a range of care standards.
- Rights and Responsibilities of the **Individual:** Highlights initiatives to address rights and responsibilities of patients.



A Crosswalk: Joint Commission Standards and NICHE Resources

Human Resources (HR) Joint Commission Standard - NICHE Principle: Geriatric Staff Compliance



View the Crosswalk: Joint Commission Standards and NICHE Resources Categories.



A Crosswalk: Joint Commission Standards and NICHE **Resources Categories**

- Environment of Care: Details required elements to maintain a safe, functional environment.
- Human Resources: Details staff orientation, education/training, competence, and performance requirements.
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- Provision of Care: Details a range of care standards.
- Rights and Responsibilities of the Individual: Highlights initiatives to address rights and responsibilities of patients.



NICHE Clinical Improvement Models

Overview

NICHE Clinical Improvement Models provide a road map to system-level adoption of clinical best practices. A series of modules guides hospitals in the research, planning, implementation, and evaluation phases of "best-fit" models. Modules are authored by experts in the field and supplemented by materials and expertise from experienced NICHE sites. The modules consist of an overview and programs to reduce restraint use, prevent pressure ulcers, and reduce risk of fall-related injuries.

Features & Benefits

Feature: Each chapter provides a synthesis of the research and clinical literature as well as evidence-based best practices identified by content experts and NICHE sites

Benefit: Provides information to implement a system-wide change process such as physical restraint reduction, pressure ulcer prevention, or falls reduction

Feature: Discusses conceptual models/frameworks that address the complexity of the change process and implementation of research findings within healthcare institutions

Benefit: Delivers an understanding of the multiple factors that affect the degree and success of change required to implement new practices

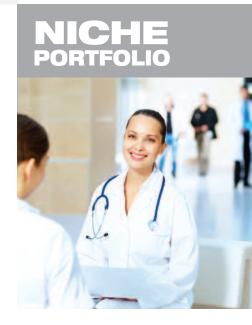
Feature: Offers a framework for action with several alternative approaches Benefit: Allows hospitals to adapt implementation protocols to their specific environments

Feature: Chapters include citations for program approaches that have been tested or suggested by experts in the field

Benefit: Provides evidence to support many of the organizational practices offered in the clinical improvement models

Application

NICHE Clinical Improvement Models identify best practices hospitals can implement to help prevent complications prevalent in hospitalized older adults, and enhance the quality and safety of care. Strategies are provided to improve care for older adult patients that address a specific clinical issue (e.g., adverse effects of medications, identification of delirium), practice (e.g., use of restraints, sitters, urinary catheters) or geriatric syndrome (e.g., pressure ulcers, incontinence, falls, functional decline, delirium).



Clinical Improvement Models

- Pressure Ulcer Prevention **Program:** Provides general principles for implementing a system-wide program to prevent and manage pressure ulcers.
- Reducing the Risk of Fall-Related **Injuries:** Describes a systems approach to care in reducing the fall risk of hospitalized older adults.
- Restraint Reduction Program: Describes the steps involved in implementing a restraint reduction program including latest research findings.



NICHE Clinical Improvement Models

NICHE Hospital Innovation

Promoting Safety for Older Adult Population in the Surgical Observation Unit

Pamela E. Windle, MS, RN, NE-BC, CPAN, CAPA, FAAN, Nurse Manager, St. Luke's Episcopal Hospital, Houston, Texas

PROBLEM: Safety risk among older adult patients in Surgical Observation Units.

SOLUTION: Geriatric Resource Nurse Model (GRN) in the Surgical Observation Unit.

Problem Identified The aging population in healthcare settings is one of the most challenging groups for providers. It has been estimated that the older adult patients (over-65) will exceed more than 72 million by 2030.* Every provider plays an important role in providing optimal care for this population.

The Surgical Observation Unit (SOU) is an extended recovery unit designed for patients who have undergone outpatient surgical procedures and require further observation. Older adults typically comprise a large part of the unit population. Patient safety is a significant concern due to their age, co-morbidity issues, effects of anesthesia, psychosocial, and other medical problems.

Solution Formulated An improvement project was initiated at St. Luke's Episcopal Hospital to educate the staff regarding the care of older adult patients. A Geriatric Resource Nurse (GRN) was assigned to the unit to assess safety issues and concerns. One specific problem noted was falls. The unit implemented improvement processes based on the GRN's evaluations. These included: frequent rounding, bowel and bladder program, appraisal and understanding of medication interactions. plus "Call, Don't Fall" reminders and shift reporting.

Evaluation/Results In older adult patients the number of falls decreased, patient satisfaction improved, and length of stay decreased. Additionally, staff demonstrated improved knowledge of the special requirements of older adult patients, and patients and families expressed increased satisfaction upon discharge. Finally, physician satisfaction increased, prompting frequent requests to reserve a bed in the SOU for patients.

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2. Dahle, J., Girard, N., & Stein, D. Perioperative Care of the Older Adult. Available at Association of perioperative Registered Nurses (AORN) website http://www.aom.org/Education/ContinuingEducation/ConfidenceBasedLearning/PerioperativeCareOlder/Adult.

NICHE-RELATED RESOURCES

- 1. Gray-Miceli, D. & Ouigley, P.A. (2012). Chapter 15: Fall Prevention, Diagnoses, and Intervention Strategies.In M. Boltz, E. Capezuti, D. Zwicker, & T. Fulmer (Eds.). Evidence-Based Geriatric Nursing Protocols for Best Practice (4th edition, pp. 670-681). New York: Springer Publishing Company. 2. Taylor, J. (2008). NICHE Clinical Organizational Models: Falls and Fall Related Injuries: Prevention and Management. In E. Capezuti, J. Taylor, M. Boltz, & Isylon, J. (2006). NICHE Clinical Organizational Models: Pails and Pail related injuries: Prevention and Management. In E. Capecut, J. Taylor, M. Do
 H. Brown (Eds.), NICHE Clinical Organizational Models. New York: Hartford Institute for Geriatric Nursing. (Available at NICHE Knowledge Center, acce via www.nicheprogram.org).
 Falls. Geriatric Resource Training. NICHE Geriatric Resource Nurse Core Curriculum, Second edition, 2012. (Available at NICHE Knowledge Center,
- accessed via www.nicheprogram.org

View the Clinical Improvement Models. This resource is available only to **NICHE** member organizations.



Clinical Improvement Models

- Pressure Ulcer Prevention Program: Provides general principles for implementing a system-wide program to prevent and manage pressure ulcers.
- Reducing the Risk of Fall-Related **Injuries:** Describes a systems approach to care in reducing the fall risk of hospitalized older adults.
- Restraint Reduction Program: Describes the steps involved in implementing a restraint reduction program including latest research findings.



NICHE Discussion Forums

Overview

NICHE discussion forums provide a platform for users to interact with other NICHE sites including those involved in the NICHE designation process. On these discussion forums, users have the opportunity to exchange ideas, pose questions, identify needs, and enhance mutual understanding and knowledge.

Features & Benefits

Feature: Expert resource

Benefit: The forum provides participants with access to other NICHE members who can help guide the learning process and NICHE designation journey, and

enhance their knowledge base

Feature: Personalized information exchange

Benefit: Participants choose the topics that interest them most

Feature: Extended interaction time

Benefit: Enhances the quality of discussions and experiences related to participation in NICHE courses and pursuit of NICHE hospital designation

Feature: Flexibility and convenience

Benefit: Participants can set their own schedule for forums. Forums are available at all times of day and night to accommodate work and home demands. Archived discussions allow users to refer back to topics for needed information

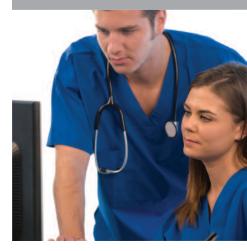
Feature: Forum email subscription option

Benefit: Provides automated tracking of forum activity to help keep participants

engaged and actively involved in discussions

Application

Designed to provide Geriatric Resource Nurses, nurse clinicians, and others working in all settings with a highly versatile collaborative experience to help drive higher quality care for older adult patients.



NICHE Discussion

- General Forums: Collaborative space to interact with other NICHE sites.
- Core Courses Geriatric Resource Nurse (GRN) Introduction to Gerontology Geriatric Patient Care Associate (GPCA)
- Specialty Courses Critical Care Nursing of Older Adults Nursing Care of the Older Adult with Cancer
- Resource Planning & Implementation Guide.
- Resources Forums: Many other resources in the NICHE Knowledge Center also have discussion boards for use to interact and get feedback from other participants while going through that resource/tool. Special Coordiantor's Corner forum is where we hope to hear from you about other topics you need in your role as a NICHE Site Coordinator, and what resources are of most value.



NICHE Discussion Forums

NICHE Hospital Innovation

Fall Prevention Protocol Forum Discussion

Fall Prevention Protocol - Monday, October 15, 2015, 03:51 PM

Looking for examples of Fall Prevention Protocols. Does anyone have anything to share?

Reply - Monday, October 15, 2015, 05:03 PM

We have a Fall Protocol that is implemented for all patients who have a score of 10 or greater based on specific criteria. Currently, we use Posey products (yellow socks, bracelet and falling stars on patients' doors). They are also placed on a bed alarm and positioned to rooms close to the nurses' station. In the event a patient falls, a RRT is called and an incident report is filed in the ERS. This is new for us, but so far, we have seen a reduction in our falls rate. I do not have an electronic copy of the protocol on hand but can work on posting a copy as soon as I can lay my hands on it.

Reply - Friday, October 19, 2015, 07:04 AM

Hi, we have a fall prevention program here and our documents are in an electronic format. We have a standardized intervention care plan also. Please send me your email and I will send it to you.

Reply - Thursday, November 8, 2015, 11:47 AM

We too have a fall prevention protocol that works very well for identifying patients who are at high fall risk on admission. It is a part of our electronic health record and a patient is easily identified to providers in the EHR of this status. We continue to implement physical signs on a patient room and via a green bracelet on the patient that they are a fall risk. We have an interdisciplinary falls committee that meets monthly to discuss all falls that occur and monitor our goals and benchmarks.

Reply - Thursday, November 8, 2015, 12:53 PM

Here is ours.

FallReductionAndRecovery 1 .pdf

Reply - Thursday, November 8, 2015, 04:04 PM

Thanks. By the way...what's in the activity aprons?

Reply - Friday, November 9, 2015, 09:42 AM

The best ones were from a small company that made them with different foci. This lady made aprons that had things like a level, a ruler or a faucet for example for the patient to manipulate. Others had different textures to feel and others had different fasteners, such as buttons, snaps, hook and eye, and zippers to manipulate. Most that I find available now are fairly generic but still effective. Some of the websites are:

http://www.alzheimersapron.com/

http://www.posey.com/Products/Posey-Activity-Apron 7400.aspx

View the NICHE Discussion Forums. These forums are available only to NICHE member organizations.



NICHE Discussion Forums

- General Forums: Collaborative space to interact with other NICHE sites.
- Core Courses

Geriatric Resource Nurse (GRN) Introduction to Gerontology Geriatric Patient Care Associate (GPCA)

Specialty Courses

Critical Care Nursing of Older Adults Nursing Care of the Older Adult with Cancer

Resource

Planning & Implementation Guide.

• Resources Forums: Many other resources in the NICHE Knowledge Center also have discussion boards for use to interact and get feedback from other participants while going through that resource/tool. Special Coordiantor's Corner forum is where we hope to hear from you about other topics you need in your role as a NICHE Site Coordinator, and what resources are of most value.



NICHE Education Briefs

Overview

The NICHE Education Briefs are concise PowerPoint in-services that focus on clinical care issues and trends pertinent to the Geriatric Resource Nurse (GRN) and bedside caregiver's ability to provide evidence-based care. The Education Brief series was created at the request of NICHE coordinators, who drive the implementation of NICHE concepts and models of care for older adult patients at their respective hospitals.

Features & Benefits

Feature: In-service training modules focus on clinical care issues and trends **Benefit:** Improve ability of healthcare providers to deliver optimum care

Feature: Education Brief series allows continuous education at the bedside **Benefit:** Delivers up-to-date training on rapidly changing practice protocols

Feature: Briefs take as little as 30 minutes to complete

Benefit: Can be easily used in instructor-led format or reviewed online

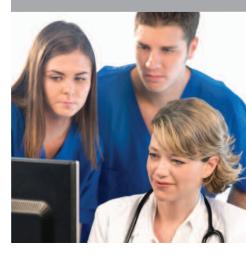
Feature: Supplied with handouts and initiative concepts

Benefit: Supports implementation of unit- or hospital-based GRN-led NICHE

strategies

Application

Designed to assist the NICHE coordinator and/or educator in providing continuing education in short in-service sessions on timely and important topics in the care of older adult hospital patients.



NICHE Education Briefs

- Caring for the Older Adult with COPD: Three-part Series Discusses High Prevalence of COPD in Older Adults
- GPCA: Emotional Needs of the Older Adult Patient & Physical Care of the Older Adult Patient
- **GRN:** Identifying the Patient Appropriate for Palliative Care
- Medication: Updated Beer's Criteria 2012 - American Geriatrics Society **Expert Panel**
- Neglect: Self Neglect in the Hospitalized Older Adult
- Pain in Older Adults: Evidence-based Approaches to Assessing Pain in Older Adults
- Safety: The GRN's Bedside Guide: Simple Environmental Modifications to **Enhance Safety for Older Adults**
- Teach-back: Using "Teach-back" at the Bedside
- Vaccines: Influenza and Pneumococcal Vaccinations and Older Adults

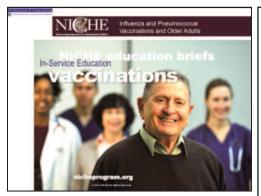


NICHE Education Briefs

NICHE Education Brief: Vaccinations

Author: Cindy Nigolian, GCNS-BC, NICHE Clinical Administrator

The goal of this staff development PowerPoint is to provide educational components related to health maintenance and the role of vaccinations that are essential for improved health in the older population. For background, the brief includes a review of the data, impact, and facts about influenza and pneumonia.



Vaccination Record Card

Included as part of the Education Brief, these concise and portable patient Record Cards are designed to encourage the transfer of

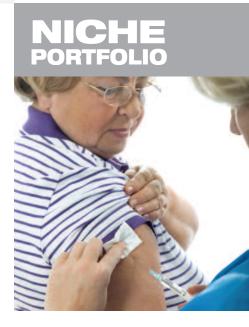
essential information between levels of care and healthcare providers.

Brief Objectives

- Describe the vaccinations that are essential for improved or maintained health in the older population
- Identify at risk populations
- Provide education related to health maintenance and the role of vaccinations
- Provide vaccinations as needed/improve communications in care transitions

View the entire Influenza and Pneumococcal Vaccinations and Older Adults Education Brief. This resource is available only to NICHE member organizations.





NICHE Education Briefs

- Caring for the Older Adult with COPD: Three-part Series Discusses High Prevalence of COPD in Older Adults
- GPCA: Emotional Needs of the Older Adult Patient & Physical Care of the **Older Adult Patient**
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- Vaccines: Influenza and Pneumococcal Vaccinations and Older Adults



NICHE Hospitals Reports

Overview

The NICHE Hospitals Reports are published to highlight the positive outcomes and innovative initiatives developed and implemented in NICHE designated facilities for the improvement of care of older adults.

Features & Benefits

Feature: The Hospitals Reports provide summaries of outcomes and initiatives

from the referenced care categories and healthcare settings

Benefit: Quickly details successful initiatives implemented at NICHE sites for easy reference

Feature: Hospitals Reports provide an in-depth focus on specific categories

Benefit: Organizes reports in specific topics of interest to NICHE sites implementing their own initiatives or looking to expand programming

Feature: Reports include clinical outcomes and results from initiatives

Benefit: Demonstrates success of the hospitals' initiatives

Feature: Linked references are provided for ease of use and follow-up for more in-depth review of evidence based practice

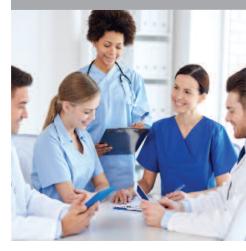
Benefit: Provides guidance for NICHE sites interested in developing and implementing similar projects

Feature: Hospitals Reports are publicized in healthcare media to highlight older adult initiatives

Benefit: Promotes the NICHE Program as well as the success of NICHE Sites and the impact on patient outcomes and satisfaction

Application

The NICHE Hospitals Reports provide a high level review of NICHE sites implementing, embedding, and evaluating best practice in the care of older adults. The reports also provide evidence of geriatric best practice at the bedside for NICHE facilities and healthcare organizations.



NICHE Hospitals Reports

- Delirium: Initiatives aimed at reducing delirium, and increasing delirium screening, team approaches, and more.
- Dementia: Initiatives focusing on increasing dementia screening, team approaches, and more.
- Function: Programs to alleviate functional decline and improve outcomes for older adult patients.
- Operationalizing NICHE: Best practice and quality improvement projects related to the implementation of the NICHE Program.
- Safety: Highlights interventions and initiatives related to the safety of hospitalized older adults.
- Summary: Quick reference report detailing research and initiatives related to a variety of older adult healthcare issues.
- Transitions: Research and quality improvement projects focusing on transitions between home, hospitals, and nursing homes.



NICHE Hospitals Reports

Transitions Quality Improvement Projects:

NICHE Site: Dartmouth-Hitchcock Medical Center. Realizing the geriatric population in Medical Specialties at their facility represented their core consumers, Dartmouth-Hitchcock needed to commit to meet the unique care needs of this group as well as provide support for patients transitioning to home.

A multidisciplinary team implemented a number of initiatives to help transform the culture of geriatric care and achieve the greatest potential for the older adult patients and their families. These initiatives included:

- Creation of a Geriatric Nurse Coordinator position in the medical specialty line
- Formation of a geriatric steering committee
- Home transition bags
- Follow-up phone calls
- Use of local and national resources, including...
 - NICHE designation Dartmouth Centers for Health and Aging partnership
 - Clinical Microsystems quality improvement processes

Specific action steps involved an "Ask the Nurse" community education program and ongoing internet based staff education efforts. A Geriatric Resource Nurse and a Geriatric Patient Care Tech were also added to the staff.

Results: The units that implemented the Elder Care initiatives demonstrated a 19% improvement in functional status, a 6-36% lower rate of delirium compared to preintervention rates, and finally a reduction in the Pressure Ulcer rate from 6% to 2%.

NICHE Site: Saint Mary's Health Care. Traditionally, patients will move 3-6 times during a hospital stay to receive the level of care needed to meet their acuity level which can cause missed or delayed treatments, medication errors, patient falls, and result in contact with as many as 100 healthcare providers. By incorporating an evidence-based acuity adaptable care delivery model, hospitals can reduce the amount of transfers, decrease length of stay, and improve patient satisfaction.

The Acuity Adaptable Care Delivery Model:

- Places the patient on a unit with varied levels of acuity
- Nurses are able to alter the level of care based on the acuity of a patient without moving the patient to another unit
- Allows for the care of patients from general med/surg to intermediate and from intermediate to intensive care levels

Results: The use of the model can positively impact patient, physician, and nurse satisfaction, decrease patient anxiety, and reduce mortality, complications, LOS, and hospital costs. Implementation of the model at Saint Mary's Health Care reduced transfer of patients to a higher level of care by 35% and improved patient satisfaction scores by 9%.

View the entire NICHE Hospitals Reports series.



NICHE Hospitals Reports

- Delirium: Initiatives aimed at reducing delirium, and increasing delirium screening, team approaches, and more.
- Dementia: Initiatives focusing on increasing dementia screening, team approaches, and more.
- Function: Programs to alleviate functional decline and improve outcomes for older adult patients.
- Operationalizing NICHE: Best practice and quality improvement projects related to the implementation of the NICHE Program.
- . Safety: Highlights interventions and initiatives related to the safety of hospitalized older adults.
- Summary: Quick reference report detailing research and initiatives related to a variety of older adult healthcare issues.
- Transitions: Research and quality improvement projects focusing on transitions between home, hospitals, and nursing homes.



NICHE Leadership Training Program

Overview

The Leadership Training Program (LTP) provides an interdisciplinary hospital team with the tools and resources to begin the process of increasing the quality of care for older adult patients at their facility and achieving NICHE designation. The LTP is a blended learning approach where participants engage in a rigorous six-week program delivered via a web-based platform and facilitated by the NICHE team, including mentors who currently lead or have led NICHE programs in their hospitals. The program includes conference calls, on-demand access to tools, benchmarking, and guides for implementation.

Features & Benefits

Feature: Online activities complemented by practice-based assignments Benefit: Delivers deep immersion in the process of developing a NICHE hospital program including an overview of NICHE models, staff education, introduction to the Geriatric Institutional Assessment Profile (GIAP), and other clinical, financial, and organizational measurement approaches to evaluate program effectiveness

Feature: Web-based

Benefit: Permits users to access the LTP learning components on their own

schedule...at work or at home

Feature: Live webinars

Benefit: Engaging educational presentations developed and hosted by NICHE

faculty and program leaders from NICHE Hospitals

Feature: Development of hospital action plan

Benefit: Tools, resources, and consultative advice provided to support a core leadership team within the hospital in developing an action plan for NICHE program implementation, training Geriatric Resource Nurses (GRN's), and positioning geriatric care as a top priority of their hospital

Application

Three people responsible for steering the NICHE initiative at the facility should attend the LTP session. This typically includes a nurse clinician leader, a clinical educator, and an administrator, manager, or quality person. The LTP provides the hospital teams with on-demand access to comprehensive program topics. The LTP is conducted three times a year.



- NICHE Planning & Implementation Guide
- NICHE Organizational Strategy: Nurse Certification Tool Kit.
- Clinical Improvement Models
- NICHE Education Briefs
- Geriatric Resource Nurse (2nd Edition, 2012)
- Introduction to Gerontology (2nd Edition, 2012)
- Geriatric Patient Care Associate (2nd Edition, 2012)
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New York: Springer Publishing
- NICHE Online Connect Webinars
- NICHE Solutions Series
- Need to Know by NICHE Series
- Joint Commission Crosswalk
- NICHE Annual Conference
- NICHE for Patient+Family App and **Encyclopedia**



NICHE Leadership Training Program

NICHE Hospital Innovation

Solution 25: Geriatric Resource Nurses - Change Agents to **Prevent Hospital Complications**

Author: Zoe Chen, GRN, Medical Surgical Educator, Glendale Adventist Medical Center, Glendale. California.

PROBLEM: Survey (GIAP) indicated the need for systemic change to prevent hospital acquired conditions for older adult patients, the hospital's primary consumers.

SOLUTION: Performance improvement team formed to develop initiatives targeting functional decline in hospitalized older adults.

Problem Identified With a large and growing patient population of older adults (+50%) and GIAP (Geriatric Institutional Assessment Profile) survey findings that indicated room for improvement, Glendale Adventist recognized the need to improve the level of care for older patients.

Solution Formulated An "At Risk Elders Performance Improvement Team" was formed that planned a focused, individualized, multi-disciplinary approach to increase staff knowledge and understanding of the complex needs of older adult patients. The team implemented a range of initiatives designed to eliminate preventable hospital acquired conditions commonly experienced by hospitalized older adults, by continuously improving the quality of care based on current evidences.

Two Geriatric Resource Nurse (GRN) initiatives targeted memory loss and functional decline. The "Family Questionnaire for Patients with Memory Problems" tool supplied by NICHE was put into use to help improve understanding of patient preference in care and baseline functionality/needs, and promote two-way communication between nurses, family members, and patients. Arsineh Petrosian, RN, GRN, and Agnes Pagdilao, RN, GRN, piloted the initiative in the pulmonary/ oncology unit.

The "Up 4 Meals" initiative goals were to promote early ambulation and prevent functional decline during hospitalization. Nurses discussed the program with each patient and their family, and encouraged walking at regular intervals and sitting up to eat for ALL meals. Lift teams were involved where needed. To establish a baseline to gauge results, patient function was assessed/documented on admission using a family questionnaire. Vanessa Gilbertson, GRN, championed this initiative.

Evaluation/Results To evaluate the results of the initiatives, GRNs in every inpatient unit performed concurrent audits for nursing practice compliance. Increased lift team requests and education for proper use of lifting devices were observed at the unit level. The length of the "Family Questionnaire for Patients with Memory Problems" was unwieldy so it was adapted and became the "white board communication center" for the patient's family and caregivers to share information about the patient's plan of care. The communication provides the healthcare team with information to individualize care for the patient.

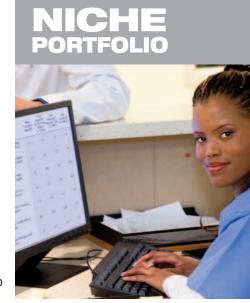
1. Boltz, M., Capezuti, E., Shabbat, N., & Hall, K. (2010). Going home better not worse: Older adults' views on physical function during hospitalization. *International Journal of Nursing Practice*, 16 (4), 381 – 388.
2. Resnick, B., Galik, E., Boltz, M., & Pretzer-Aboff, I. (2011). *Restorative Care Nursing for Older Adults: A Guide For All Care Settings*. (2nd ed.). New York:

NICHE-RELATED

1. Geriatric Resource Training - NICHE Geriatric Resource Nurse Core Curriculum. (Available at NICHE Knowledge Center, accessed via www.nicheprogram.org).
The Geriatric Institutional Assessment Profile (GIAP) Guide. (Available at NICHE Knowledge Center, accessed via

http://www.nicheprogram.org/evaluation#Geriatric).
3. Boltz, M., Resnick, B., & Galik, E. (2011). Interventions to Prevent Functional Decline in the Acute Care Setting. In M. Boltz, E. Capezuti, T. Fulmer, & D. Zwicker (eds.). Evidence-Based Geriatric Nursing Protocols for Best Practice (4th ed. pp 104-121). New York: Springer.

View the NICHE Leadership Training Program webpage. The LTP is available to interested hospitals for a fee.



- NICHE Planning & Implementation Guide
- NICHE Organizational Strategy: Nurse Certification Tool Kit.
- Clinical Improvement Models
- NICHE Education Briefs
- Geriatric Resource Nurse (2nd Edition, 2012)
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- Need to Know by NICHE Series
- Joint Commission Crosswalk
- NICHE Annual Conference
- NICHE for Patient+Family App and **Encyclopedia**



NICHE Media Kit & Marketing Resources

Overview

NICHE offers a number of tools to assist in marketing and outreach related to the NICHE mission. The Media Kit contains a variety of high profile marketing materials for use by NICHE hospitals in communicating the geriatric care quality message to both internal and external audiences...hospital staff and decision-makers, patient families, patients, the local community, and skilled nursing facilities.

Features & Benefits

Feature: NICHE Designated Hospital web page

Benefit: Identify your hospital as a NICHE Designated Hospital and let your community know of your commitment to excellence in the care of older adults

Feature: Customizable

Benefit: Integrate your hospital brand identity into powerful, ready-to-go

communications

Feature: Recruitment/program support tools

Benefit: Recruit staff for the NICHE Leadership Training Program. Build support for your NICHE Hospital Program. Communicate meetings, trainings, and events.

Feature: Impactful internal marketing materials

Benefit: Champion care of older adults within your facility. Market vertically from administration to bedside staff, and horizontally across all units about your NICHE Program.

Feature: Public relations and advertising materials

Benefit: Market your hospital as a quality elder-care facility externally to your

community online and in print to local and national media

Applications

NICHE Hospitals use the Media Kit to integrate the NICHE brand and messages into their overall marketing activities to reach the right audiences at the right time. The "Guide to Using NICHE Marketing Materials & Resources" provides complete instructions on use and dissemination of the communication vehicles.



- Guide to Using NICHE Marketing Materials & Resources: Use to integrate the NICHE brand and messages into your marketing.
- Announce Your NICHE Designation Kit: Everything you need to get started.
- Program Brochure, About NICHE Sheet & Hospital Sheet: Promote the adoption, growth, and funding of the NICHE program.
- Flyer Template: Use to announce NICHE hospital events and other news.
- Powerpoint® Presentation: Promote adoption of the NICHE Program to staff, administrators, and stakeholders.
- Hospital & Family Brochures: Communications to reach patients, families, colleagues, stakeholders, etc.
- NICHE Customizable Templates: Importable into graphics programs for adding hospital-specific information about the NICHE program.
- NICHE Logos: Brand anchor for all messaging.
- Media: Sample feature articles, annual report, and announcement press release/card.
- NICHE Hospital Web Page: Incorporate NICHE Program information in hospital website.
- NICHE Starter Kit & Marketing Kit: Everything you get when you receive NICHE Designation.
- NICHE Resources: Solutions and Need to
- Annual Conference: Logo and meeting details to promote the conference at NICHE Hospital sites.



NICHE Media Kit & Marketing Resources

NICHE Hospital Innovation

Operationalizing NICHE - Early Implementation Site

Authors: Robin Crum, RN, CMSRN & Angel B. DeSquare, RN, BSN, BS, Baptist Memorial Hospital-Desoto, Southaven, Mississippi

Results of the NICHE Geriatric Institutional Assessment Profile conducted by Baptist Memorial Hospital-Desoto revealed staff knowledge was low, but interest and attitude were high for providing care to older adult patients. As a result, the hospital convened a group of administrators, patient/family advisory members, academic partner faculty, research consultants, interdisciplinary team participants. a physician champion, and staff nurses to consider the development of a NICHE unit. The initial goals were to integrate evidence-based practices into unit operations and provide geriatric education for all staff.

Practice changes included

- Staff nurses designated for assignment to NICHE unit
- NICHE unit staff nurse expectation: gain Geriatric Resource Nurse (GRN) certification
- NICHE unit operations team comprised of frontline staff
- GRN staff nurses initiated operations analysis

Evaluation

- Convened group met monthly for two years to manage the progress of the deliberations
- Evidence-based practice focus maintained
- Geriatric education focus maintained
- Three NICHE unit nurses certified in geriatrics
- Initiated NICHE unit site visit at University of Alabama, Birmingham, December 2011

Lessons Learned

- Site visit provided clarity related to implementation process and setting standards and expectations early in the process
- Site visit confirmed the practice of instituting small changes to achieve results
- Inservices and seminars are integral and essential to the staff growth process
- Success and feasibility of implementation is determined by trialing small changes with select staff

As a result of the effort, Desoto opened an ACE/NICHE unit in January 2012, the first in the Baptist system and the state of Mississippi. One important lesson learned: community benefits must be promoted at all stages of implementation.

REFERENCES

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View the Media Kit & Marketing Resources. This resource is available only to NICHE member organizations.



- Guide to Using NICHE Marketing Materials & Resources: Use to integrate the NICHE brand and messages into your marketing.
- Announce Your NICHE Designation Kit: Everything you need to get started.
- Program Brochure, About NICHE Sheet & Hospital Sheet: Promote the adoption. growth, and funding of the NICHE program.
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Need to Know by NICHE Series

Overview

The Need to Know by NICHE series empowers patients and families by providing information and guidance which will help them navigate the hospital journey from admission to discharge, and afterwards.

Features & Benefits

Feature: Need to Knows provide patients with knowledge to effectively

participate in care and decision-making

Benefit: Encourages patient/family-centered care

Feature: Documents focus on common problems experienced by older adult

patients

Benefit: Helps patients and families better cope with the hospitalization

experience

Feature: Written in simple, easy-to-understand terms

Benefit: Accessible for a wide range of healthcare consumers

Feature: Helps provide an understanding of what to talk to nurses and doctors

about regarding patient care

Benefit: Promotes better communication with the healthcare team

Feature: NICHE hospital initiatives related to the Need to Know topic are

explained

Benefit: Provides patients and families with solutions to suggest for their own

plan of care

Feature: Dementia Transition Series

Benefit: In-depth series by the St. Louis Chapter of the Alzheimer's Association helps patients with dementia and their families better deal with transitions

between home, hospital, and long-term care/rehabilitation facility

Application

The Need to Know series is made available to the public through the NICHE Hospital network in support of patient/family-centered care.



Need to Know by NICHE Series

General Series:

- Communicating with the Healthcare Team
- Delirium
- Falls
- Functional Decline
- Managing Medications
- Meals and Nutrition
- Patient Environment
- Restraint Use
- Skin Care: Pressure Ulcers
- Sleep
- Vaccines

Dementia Transition Series: Created in partnership with the St. Louis Chapter of the Alzheimer's **Association**

- Home to Hospital
- Hospital to Home
- Hospital to LTC or Rehabilitation
- What to Communicate at the Hospital



Need to Know by NICHE Series

What Patients and Their Families Need to **Know Before Going into the Hospital** Safety: Falls

Series Editor: Dennise Lavrenz, RN, BSN, MBA; Managing Editor: Scott Bugg

Definition: Falls can be caused by safety hazards in the environment, weakness, poor balance, illness, sudden changes in blood pressure, and certain medications.

Why Is It Important? A fall can result in a wide range of injuries and can interfere with discharge plans.

What Can You Do:

- 1. If you normally wear glasses or hearing aid(s), make sure you do so when in the hospital.
- **2.** Tell your nurse when you begin to feel pain, weakness, or dizziness.
- 3. Make sure that you can reach the call light to ask for help.
- 4. Ask the nurse or physical therapist about: exercises, sitting out of bed for meals, and walking in the hall. Moving about will prevent the kind of weakness that can cause falls.
- **5.** It is very important to be as active as possible BUT when you're not feeling well, have someone nearby when getting out of bed or walking.
- **6.** Get out of bed slowly. Sit on the side of the bed a few minutes before standing.
- **7.** Get to know your way around your room. Don't walk through cluttered areas.
- **8.** Use the grab bars while you are in the bathroom.
- **9.** Wear non-skid slippers or shoes that give support.
- 10. If you use a cane, walker, crutches, or a brace at home, ask a family member or friend to bring it in.
- 11. Use your call light to ask for help getting up and as soon as you feel the need to go to the bathroom.

NICHE Hospital Innovation #1: Pre-Op Assessment/Education Sessions for Surgical Patients To help avoid falls, this hospital has nurse-led teams who visit patients in their homes before hip or knee surgery. The patient's home is checked for safety and patients are taught how to move safely.

NICHE Hospital Innovation #2: Surgical Observation Unit Safety This hospital has a special area to observe patients, and "Call, Don't Fall" posters remind patients to ask for help.

NICHE Hospital Innovation #3: Patient-Family Council Promotes Safety Patients and families offer suggestions about hospital safety. For example they discuss changes in practices and equipment to help patients be as independent as possible while being safe.



Need to Know bv NICHE Series

General Series:

- Communicating with the Healthcare Team
- Delirium
- Falls
- Functional Decline
- Managing Medications
- Meals and Nutrition
- Patient Environment
- Restraint Use
- Skin Care: Pressure Ulcers
- Sleep
- Vaccines

Dementia Transition Series: Created in partnership with the St. Louis Chapter of the Alzheimer's **Association**

- Home to Hospital
- Hospital to Home
- Hospital to LTC or Rehabilitation
- What to Communicate at the Hospital



NICHE Organizational Strategies

Overview

NICHE Organizational Strategies are a series of web-based toolkits that provide comprehensive guidance in the development of key initiatives within hospital organizations that ensure continuing improvement in the care of older adults and sustained geriatric program growth.

Features & Benefits

Feature: Translate strategic goals and priorities into realistic and flexible plans and programs

Benefit: Achieve results that have a clear, positive impact

Feature: Prepare program budgets and maximize resources

Benefit: Assure key organization initiatives provide maximum value

Feature: Provide guidance for gathering and analyzing essential information to

create and launch initiatives

Benefit: Provide solid research foundation that assures success

Feature: Anticipate immediate and future obstacles and opportunities

Benefit: Assure plans have mechanisms in place to deal with all contingencies

Feature: Prioritize action items by their importance to strategic intent **Benefit:** Allow implementation teams to work smart by simplifying and improving processes, emphasizing activities that add value, and eliminating inefficiencies and tasks that add little value

Feature: Establish and implement methods for tracking progress

Benefit: Ensure that targets and goals are met

Application

Designed to help nurse clinicians and others working in all settings to implement initiatives targeting improved care for older adult patients.



Organizational Strategies

- Behavioral Health Rapid Response Team: Describes steps to development of a healthcare team who respond to patients experiencing behavioral changes
- Canada ED Transition of Care: a review of patient outcomes and analysis of staff competence to identify knowledge and skill gaps in geriatric care
- Certification Toolkit: Provides guidance in preparing nurses for certification
- Medication Reconciliation: Describes a process for transitions in care to help reduce medication errors and reconciliation failures
- . Medications: Appropriateness of Prescribing Criteria in Older Adults: State of the Art
- Patient Family Advisory Councils: Guides implementation of a council concept to increase patient/caregiver satisfaction levels
- Vaccines: Provides guidance for development of influenza/pneumonia vaccine policies that identify and educate at-risk populations



NICHE

PATIENT FA

NICHE Organizational Strategies

NICHE Hospital Innovation Patient Family Advisory Councils

Author: Carrie Hays McElroy, RN, MSN-HCA, Service **Line Administrator Senior Services and Director Case** Management, St. Mary Mercy Hospital, Livonia, MI

St. Mary Mercy Hospital developed their Patient Family Advisory Council in February 2010 to help guide their work and ensure that the patient and family voice is heard. By building their own "Roadmap to Caregiver Involvement," other hospitals can use this organizational strategy to introduce and implement the council concept and help increase patient/caregiver satisfaction levels.

Roadmap to Caregiver Involvement

A taskforce was developed to work on hardwiring a culture of patient involvement.

The team developed a "Roadmap to Caregiver Involvement." One of the hospital system's key strategic plan drivers was Senior Services, and since they were also embarking at the time on the NICHE journey, it was appropriate to implement a Patient/Family Advisory Council.

Key Roadmap "Signposts":

- 1. Determine the leaders within the organization who will provide oversight to the council.
- 2. Invite members to participate.
- 3. Plan the meetings.
- 4. Engage survey/measurement tools to determine outcome metrics for the Patient/Family Advisory Council.









View the entire Patient Family Advisory Council Organizational Strategy. This resource is available only to NICHE member organizations.



Organizational Strategies

- Behavioral Health Rapid Response **Team:** Describes steps to development of a healthcare team who respond to patients experiencing behavioral changes
- Canada ED Transition of Care: a review of patient outcomes and analysis of staff competence to identify knowledge and skill gaps in geriatric care
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- Medications: Appropriateness of Prescribing Criteria in Older Adults: State of the Art
- **Patient Family Advisory Councils:** Guides implementation of a council concept to increase patient/caregiver satisfaction levels
- Vaccines: Provides guidance for development of influenza/pneumonia vaccine policies that identify and educate at-risk populations



NICHE for Patient+Family App

Overview

The NICHE for Patient+Family Mobile App helps prepare older adult patients and their caregivers for the realities of hospitalization and transitions between home, hospitals, and nursing homes.

Features & Benefits

Feature: Content details common problems experienced by older adult patients Benefit: Provides both the reasons and specific steps for patient and family actions to participate in and improve their care

Feature: Written in simple, easy-to-understand terms

Benefit: Accessible for a wide range of healthcare consumers

Feature: Provides the tools for patients and families to discuss care with

nurses and doctors

Benefit: Promotes better communication with the healthcare team

Feature: Content presented in four categories: The Body, The Mind, Safety, and **Transitions**

Benefit: Content includes guidance in dealing with 24 older adult healthcare issues. Organized for fast, easy navigation

Feature: Contains helpful checklists and functionality **Benefit:** Provides information on items and information to gather during hospital arrival, admission, and discharge periods. Also includes function for

locating NICHE Designated Hospitals.

Application

The information is age-group and context-specific as it addresses needs of both older adults and families in the acute care episode. In order for it to be accessed in the ideal timeframe of prior to and/or during the hospitalization, nurses should provide information about the app in pre-admission education sessions, the patient rooms, and other hospital spaces and media. The app is available to the public for free on the NICHE website and via Apple iTunes and Android App Stores. The Baylor Scott & White Health Center for Learning Innovation and Practice contributed to development of the app.



NICHE for Patient+Family App Topics

The Body

- · Care after Hip Surgery
- Functional Decline
- Hearing
- Hip Fracture and Repair
- Managing Medications
- Meals and Nutrition
- Pain
- Palliative Care

The Mind

- Communicating with the Healthcare Team
- Delirium
- Dementia
- Depression

Safety

Falls Patient Environment

Transitions

- Dementia
- Discharge

- Patient Environment
- Preventing Problems after Hip Fracture Surgery
- · Skin Care: Pressure Ulcers
- Sleep
- Vaccines
- Vision
- Managing Medications
- Palliative Care
- Patient Environment
- Sleep
- Restraint Use
- Emergency Department



NICHE for Patient+Family App

Hearing

Why Is It Important? Communication with your healthcare providers is important. When hearing loss occurs it can become difficult to communicate. Hearing loss is caused by aging, lifestyles such as working in a factory, or exposure to other loud noises over a lifetime. Challenges can include non-functioning hearing aids and background noise.

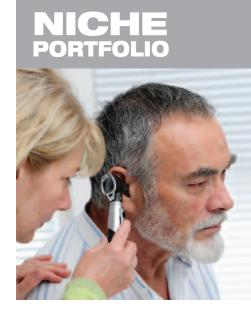
What You Can Do:

- **1.** Make sure your hearing aid is clean and has fresh batteries.
- 2. Ask your nurse or doctor to make sure your ears are free of wax build-up.
- **3.** Request use of a pocket amplifier from your nurse.
- **4.** Reguest an amplifier for your telephone.
- 5. Let your nurses and doctors know if you cannot understand them. Ask them to repeat what they said or to say it differently.
- 6. Turn off the TV or the radio to decrease background noise.

What the Family and Caregivers Can Do:

- 1. Tell nurses and doctors that your loved one has hearing issues, especially if they don't have a hearing aid and need one, if they don't have their hearing aid in the hospital with them, or if it is not working.
- 2. Tell nurses and doctors if your loved one hears better on one side than the other.
- 3. Close the door and turn off the TV to eliminate background noise.
- **4.** Ask the nurses and doctors to write down important information in large print your loved one can read.
- **5.** Request the use of pictures or communication boards.
- **6.** Make sure medication directions are provided in written form.

Download the FREE NICHE for Patient+Family App from the NICHE website or via Apple iTunes or Android App Stores.



NICHE for Patient+Family **App Topics**

The Body

- Care after Hip Surgery
- Functional Decline
- Hearing
- Hip Fracture and Repair
- Managing Medications
- Meals and Nutrition
- Pain
- Palliative Care

The Mind

- Communicating with the Healthcare Team
- Delirium
- Dementia
- Depression

Safety

- Falls
- Patient Environment

Transitions

- Dementia
- Discharge

- Patient Environment
- Preventing Problems after Hip Fracture Surgery
- · Skin Care: Pressure Ulcers
- Sleep
- Vaccines
- Vision
- Managing Medications
- Palliative Care
- Patient Environment
- Sleep
- Restraint Use
- Emergency Department



NICHE for Patient+Family Encyclopedia

Overview

The NICHE for Patient+Family Encyclopedia is a powerful online resource for older adult patients and their families/caregivers. This wide-ranging reference tool defines topics and informs consumers on a variety of healthcare issues. Geriatric syndromes, healthcare topics, and everything else you need to know are organized in the following categories: Facilities, Safety, Support, The Basics, The Body, and The Mind.

Features & Benefits

Feature: Content focuses on common healthcare problems experienced by older adults

Benefit: Helps patients and families better cope with issues related to aging

Feature: Encyclopedia entries provide patients and their families/caregivers with knowledge to more effectively participate in care and decision-making

Benefit: Encourages patient/family-centered care

Feature: Helps provide an understanding of what to talk to nurses and doctors about regarding care

Benefit: Promotes better communication with the healthcare team

Feature: Written in simple, easy-to-understand terms

Benefit: Accessible for a wide range of healthcare consumers

Feature: Content presented in six categories: Facilities, Safety, Support, The

Basics, The Body, and The Mind

Benefit: Content includes guidance in dealing with 27 older adult healthcare issues. Organized for fast, easy navigation. Links included to national healthcare organizations for more information

Application

The NICHE for Patient+Family Encyclopedia is made available to the public through the NICHE website in support of patient/family-centered care. Clinicians can direct families to the Encyclopedia to find more information on common geriatric syndromes.



NICHE for Patient+Family **Encyclopedia Éntries**

Facilities

- ACE Model
- Beds
- Interdisciplinary
- Team

Transitions

Nursing

Programs

Medication

Prevention

Pain & Palliative

• Skin - Pressure

Care

Sight

Ulcers

Therapies

Sleep

Functional Decline

- Safety
- Driving
- Falls
- Support

Caregiver Support The Basics

- Healthcare **Decision Making**
- Older Adult **Statistics**

The Body

- Abuse
- Bladder
- Dysphagia
- Functional Decline
- Hearing
- Medication
- Nutrition & Hydration
- The Mind
- Abuse
- Delirium
- Dementia
- Depression
- Medication
- Sleep



NICHE for Patient+Family Encyclopedia

Functional Decline

Functional Decline is a worsening in physical and/or mental ability. Functional Decline can cause an inability to take care of yourself in dayto-day life such as dressing, toileting, taking medications, and bathing. Functional Decline can be a result of hospitalization, severe illness, extended bed-rest, and reduced participation in daily activities.

Assessment

There are many tools that healthcare providers use to measure day-to-day functioning of their patients. These tools check functioning and performance of daily living activities such as bathing, dressing, toileting, medication use, shopping, and finances.

Treatment

Here are a number of strategies used by hospitals to positively impact the function and quality of life in older adult patients:

- Checking physical, psychological, and functional status at admission
- Encouraging activity during hospitalization such as exercise and rehabilitation therapies
- Avoiding bed rest orders
- Minimizing/avoiding use of physical restraints and use of mobility restricting devices such as indwelling catheters
- Optimizing nutrition and hydration
- Obtaining medication history
- Starting early functional goal setting and discharge planning with patient and family
- Implement picture systems to improve communication among all parties involved in the care and help patients with mental impairments to perform daily living activities independently

Links:

Functional Decline Links:

- NICHE Need to Know Functional Decline
- Senior Friendly Hospitals
- NICHE Solutions No. 40

View the NICHE for Patient+Family Encyclopedia on the NICHE website.



NICHE for Patient+Family **Encyclopedia Éntries**

Nursing

Programs

Transitions

Medication

Prevention

Pain & Palliative

Skin - Pressure

Functional Decline

Facilities

- ACE Model
- Beds
- Interdisciplinary Team
- Safety
- Driving
- Falls
- Support

Caregiver Support

- The Basics
- Healthcare
- **Decision Making**
- Older Adult Statistics

The Body

- Abuse
- Bladder
- Dysphagia
- Functional Decline
- Hearing
- Medication
- Nutrition & Hydration
- **Ulcers** Sleep

Care

Sight

Therapies

The Mind

- Abuse
- Depression Medication Delirium
- Dementia
- Sleep



NICHE Planning & Implementation Guide

Overview

The NICHE Planning & Implementation Guide provides the most current content for full implementation of NICHE in an acute care setting. Written and updated by experienced professionals from NICHE sites, NICHE faculty, and other experts, this key document details a variety of approaches for adaptation of NICHE models to individual hospital needs and circumstances.

Features & Benefits

Feature: Describes development of a NICHE Action Plan

Benefit: Offers a shared vision for improving geriatric care, conducting an organizational assessment, building support, making a business case, selecting a pilot unit, and developing a specific action plan

Feature: Discusses financial support

Benefit: Details categories and sources of funding, and examples of

organizations and funded projects

Feature: Provides staff development guidance

Benefit: Outlines the scope and content of education programs for hospital personnel, patient care associates, and the Geriatric Resource Nurse (GRN) role. including the logistics of training, encouraging participation, and evaluation

Feature: Examines geriatric nursing protocols for best practice **Benefit:** Provides the empiric basis for evidence-based practice, the basis for outcome/process measurement, and development and implementation of protocols

Feature: Considers other models that complement the NICHE program **Benefit:** Describes how to successfully implement the Acute Care of the Elderly (ACE) model, and align NICHE and Magnet initiatives

Applications

The guide is the key reference manual needed to develop a comprehensive NICHE program. NICHE tools and resources are discussed and program examples from NICHE sites are described to illustrate program implementation. Instruction is detailed, and includes a variety of approaches and suggestions for adaptation of NICHE models to individual needs and circumstances.



- NICHE Leadership Training **Program**
- NICHE for Patient+Family App and Encyclopedia
- NICHE Organizational Strategies
- Clinical Improvement Models
- NICHE Education Briefs
- Geriatric Resource Nurse (2nd Edition, 2012)
- Introduction to Gerontology (2nd Edition, 2012)
- Geriatric Patient Care Associate (2nd Edition, 2012)
- NICHE "Evidence-Based Geriatric **Nursing Protocols for Best** Practice" (4th Edition, 2012). New York: Springer Publishing
- NICHE Online Connect Webinars
- NICHE Solutions Series
- Need to Know by NICHE Series
- Joint Commission Crosswalk
- NICHE Annual Conference



NICHE Planning & Implementation Guide

NICHE Hospital Innovation

NICHE Online Connect Webinar: Hardwiring NICHE - Role of the Nurse Manager

Presenter: Dennise Lavrenz, BSN, MBA, University of Wisconsin Hospital and Clinics

Many organizations struggle to assure management practices are aligned to complement and reinforce the change that an organization is embracing. Successful NICHE programs use a systematic approach to launching and sustaining NICHE. This webinar is designed to provide a framework for the Nurse Manager to effectively hardwire NICHE in their organization.

Objectives of the Webinar:

- Identify five essential steps to leading a successful change initiative
 - Creating a Shared Need
 - Shaping the Vision
 - Mobilizing Commitment
 - Making Change Last
 - Monitoring Progress
- Identify required action steps necessary to support change
 - Change employee selection practices
 - Change training/development programs
 - Change the way performance is measured
 - Reward and recognize
 - Use existing communication channels and establish new channels
 - Change organizational structure
 - Evaluate technological opportunities
 - Identify appropriate resources

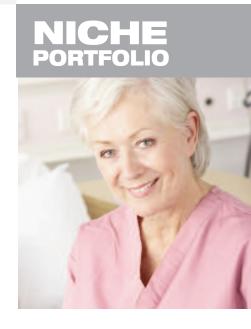
Leading change...

- Requires having a champion who sponsors the change
- Leadership provides the time, passion, and focus for the effort

Conclusion...Making change last

Once change is started, it endures and flourishes. Learnings are transferred throughout the organization. There is consistent, visible, and tangible reinforcement of the change.

View the Planning & Implementation Guide. This resource is available only to NICHE member organizations.



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NICHE Evidence-Based Geriatric Nursing **Protocols for Best Practice Book**

Overview

The NICHE Evidence-Based Geriatric Nursing Protocols for Best Practice Book addresses "best practices" and evidence-based approaches for acute care of older adult patients as developed by nursing experts around the country. The fourth edition includes 17 revised and updated chapters and five new topics addressing transitional care, acute care models, mistreatment detection, and catheter-associated infections (4th Edition, 2012). New York: Springer Publishing.

Features & Benefits

Feature: Updated in 2012

Benefit: Provides the most current, evidence-based protocols for care of

common clinical conditions and issues in older adult patients

Feature: Contains 34 chapters targeting the key areas of elder care **Benefit:** Each chapter includes educational objectives, assessment of the problem, nursing intervention or care strategies, and references to support improved care of older adult patients

Feature: Useful as a reference tool

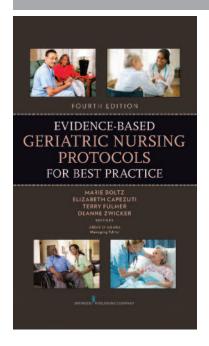
Benefit: Provides the level of evidence for each intervention and thus synthesizes the latest research into usable strategies for practice

Feature: Encompasses the contributions of 58 leading practitioners of geriatric care, and edited by nationally known leaders in geriatric nursing education and practice

Benefit: Provides authoritative descriptions of protocols for each clinical condition developed by experts in that particular area

Applications

The NICHE Evidence-Based Geriatric Nursing Protocols for Best Practice Book is designed to improve the quality, outcomes, and cost-effectiveness of healthcare. The book provides a foundation for many of the NICHE resources offered to strengthen the knowledge base of healthcare professionals. Written for nurses, clinical leaders, and students at all levels, including those in specialty roles.



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NICHE Evidence-Based Geriatric Nursing **Protocols for Best Practice Book**

NICHE Hospital Innovation

Solution No. 22: Integrating Geriatrics with Patient & Family Centered Care on Medical Specialties

Author: Justin Montgomery, ARNP, MSN, Geriatric Nurse Coordinator Dartmouth-Hitchcock Medical Center, Lebanon, New Hampshire

PROBLEM: The greatest percentage of Medical Specialties patients at Dartmouth-Hitchcock is aged 76 or older, and at least half are 65 and older. The hospital needed to focus on the needs of this core group.

SOLUTION: A multidisciplinary team at the hospital implemented a multifaceted approach (Geriatric Resource and Geriatric Patient Care Associate roles, and transitional care initiatives) to better meet the unique care needs of the older adult group.

Problem Identified Realizing the geriatric population in Medical Specialties at their facility represented their core consumers, Dartmouth-Hitchcock needed to commit to meet the unique care needs of this group.

Solution Formulated A multidisciplinary team implemented a number of initiatives to help transform the culture of geriatric care and achieve the greatest potential for the older adult patients and their families. These initiatives included:

- Creation of a Geriatric Nurse Coordinator position in the medical specialty line
- Formation of a geriatric steering committee
- Use of local and national resources, including...
 - NICHE designation
 - Dartmouth Centers for Health and Aging partnership
 - Clinical Microsystems quality improvement processes

Specific action steps involved an "Ask the Nurse" community education program, follow-up phone calls, and ongoing internet-based education efforts. A Geriatric Resource Nurse and a Geriatric Patient Care Tech were also added to the staff.

Evaluation/Results In those areas that the Elder Care at DHMC program sought to improve outcomes for hospitalized older adults, results showed a 19% decrease in loss of functional status, 6-36% lower rates of delirium compared to reported levels, and pressure ulcers prevalence rates reduced by more than half from 6% to 2%.

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Bechtel, C. & Ness, D.L. (2010). If you build it, will they come? Designing truly patient-centered health care. Health Affairs, 29 (5), 914-20.
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 Havens, D.S., Vasey, J., Cittell, J.H. & Lin WT. (2010). Relational coordination among nurses and other providers: impact on the quality of patient care. Journal of Nursing Management 18 (8), 926-937.

NICHE-RELATED RESOURCES

1. The NICHE GRN Core Curriculum. http://elearningcenter.nicheprogram.org/course/view.php?id=2 2. The NICHE Introduction to Gerontology Curriculum. http://elearningcenter.nicheprogram.org/course/view.php?id=5 3. The NICHE Geriatric Patient Care Associate Curriculum. http://elearningcenter.nicheprogram.org/course/view.php?id=28 F

View the Evidence-Based Geriatric Nursing Protocols for Best Practice Book. The book is available from Springer Publishing, New York.



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- Need to Know by NICHE Series
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- NICHE Annual Conference



NICHE Solutions Series

Overview

The NICHE Solutions Series is designed to provide the NICHE community and other interested healthcare professionals with the latest "success stories" associated with care of older adult hospital patients. The Solutions are based on successful hospital initiatives using best practices related to the NICHE Geriatric Resource Nurse curriculum, Clinical Improvement Models, and other NICHE resources.

Features & Benefits

Feature: Authored by nursing leaders caring for older adult patients at NICHE

Hospitals throughout North America

Benefit: Provides authoritative descriptions of successful geriatric initiatives of interest to a wide audience

Feature: Presented in problem-solution format

Benefit: Quickly details problems commonly encountered by nurse clinicians working with older adult patients and clearly outlines the programs implemented to solve these problems

Feature: Organized in online topic groups

Benefit: Provides quick, easy access to innovative approaches to problems

encountered in the care of older adult patients

Feature: Series planned with on-going publishing schedule

Benefit: Assures the latest best practice efforts are identified and widely

distributed

Feature: References and NICHE-related resources included in all Solutions Benefit: Provide avenues for deeper investigation of best practice concepts

Application

Designed to provide Geriatric Resource Nurses, nurse clinicians, and others working in all settings with templates for creating initiatives targeting improved care for older adult patients.



NICHE Solutions Series

Solutions success stories are available in the following categories:

Cognitive/Behavior

Delirium Dementia

Stroke

Geriatric Care Interventions

Critical Care Geriatric Practice Nutrition/Elimination Orthopedics Respiratory Skin

Implementing NICHE

Communication **GPCA** GRN

Integrated System Implementation

- Pain & Palliative Care
- Patient & Family Education
- Safety Catheters Environment Function & Falls Medication
- Healthcare Environments **Emergency Department** LTC **Transitions**



NICHE Solutions Series

NICHE Hospital Innovation

Solution 17: Rapid Response for Dementia and Behavioral Issues

Authors: Brenda Belbot, MSN, MHA, RN-BC; Jenna Godfryd, BSN, RN-BC; Kathryn Higgins, MSN, MSA, BS, RN; Arlene Stoller, BSN, RN, St, John Hospital and Medical Center, Detroit, Michigan

PROBLEM: Acute changes in behavior related to suspected delirium, dementia, and/or psychiatric conditions.

SOLUTION: A designated team of specially trained professional associates formed to assist adult inpatient non-critical care units with assessment and treatment of behavioral conditions.

Problem Identified Care of hospitalized older patients experiencing delirium accounts for more than 49% of all hospital days, and delirium complicates hospital stays for at least 20% of the 12.5 million patients 65-years-of-age or older who are hospitalized each year (Inouye, 2006). Typically, delirium results in emotional disturbances characterized by fear, paranoia, anxiety, depression, irritability, apathy, anger, and euphoria. Older adult patients with dementia and primary psychiatric conditions are also prone to acute changes in behavior.

Solution Formulated The NICHE staff at St. John Hospital and Medical Center created the "Behavioral Health Rapid Response Team" (BHRRT) designed to guickly assess and treat behavioral conditions, such as delirium, in patients in non-critical care units. Each team includes a:

- Crisis Prevention Intervention trained RN
- Designated physician or mid-level provider (MLP)
- Other professional staff at the discretion of the team

Any professional healthcare associate that has an immediate concern for a patient's condition/behavior can initiate the BHRRT by calling 611. The BHRRT RN is contacted via pager and arrives on the unit within ten minutes, followed by the rest of the team.

In action, the BHRRT goals are to de-escalate the situation while avoiding use of restraint, and assist the patient in initially regaining baseline functioning. The team also acts to obtain the patient's cooperation with the plan of care. To achieve these immediate goals, the team uses the BHRRT "Algorithm," a sequence of interventions formulated to manage the physical and physiological causes of the behavioral condition.

Evaluation/Results In the first year (2010), there were 17 BHRRTs initiated. Of these, eight occurred on day shift, four on afternoon shift, and five on the midnight shift. The BHRRT was activated eight times for behavioral changes, eight times for dementia patients, and once for ETOH withdrawal. All were safely managed on the unit and staff implemented individualized treatment plans. The NICHE staff at St. John Hospital and Medical Center continues to refine metrics collection techniques and the audit tool.

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3. Inouye, S.K. (2006). Delirium in older persons. The New England Journal of Medicine, 354(11), 1157–1165.

NICHE-RELATED

- 1. Depression, Delirium, and Dementia. Geriatric Resource Nurse Training Program. (Available at NICHE Knowledge Center, accessed via
- 2. Fick, D., & Mion, L. (2005). Assessing delirium in persons with dementia. Geriatric Nursing Hartford Foundation Try This Dementia Series. Available at: http://www.hartfordign.org/resources/education/tryThis.html
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View the entire Solutions Series



NICHE Solutions Series

Solutions success stories are available in the following categories:

- Cognitive/Behavior Delirium Dementia
- Geriatric Care Interventions Critical Care

Geriatric Practice Nutrition/Elimination

Orthopedics Respiratory

Skin Stroke

Implementing NICHE

Communication **GPCA**

GRN Integrated System Implementation

- Pain & Palliative Care
- Patient & Family Education
- Safety

Catheters Environment

Function & Falls Medication

 Healthcare Environments **Emergency Department** LTC **Transitions**

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NICHE Online Connect Webinars

Overview

NICHE Online Connect Webinars focus on new, collaborative approaches for practice innovations and other timely topics promoting better outcomes for older adult patients. The webinars are presented by various healthcare professionals working at NICHE Hospitals. They are often based on requested topics from past participants and are intended for practitioners interested in new ways to enhance practice improvement outcomes. Each webinar provides 1.0 contact hour. The webinars are open to NICHE and non-NICHE healthcare professionals.

Features & Benefits

Feature: Authored and presented by nursing leaders caring for older adult

patients at NICHE Hospitals throughout North America

Benefit: Provides authoritative descriptions of successful geriatric initiatives of

interest to a wide audience

Feature: Live presentations

Benefit: Engage participants in an interactive format allowing questions and

comments

Feature: Webinar archive available

Benefit: Provides guick, easy access to a library of innovative approaches to

common syndromes encountered in the care of older adult patients

Feature: Archived webinars available in online recorded audio/slide presentation,

downloadable presentation, and pdf formats

Benefit: Different formats provide users with ability to chose the most convenient

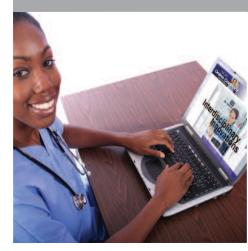
method of accessing the webinar information

Feature: Organized in topic groups

Benefit: Allows fast searches for information relevant to users' needs

Application

Webinars provide Geriatric Resource Nurses, nurse clinicians and others working in all settings with templates for creating initiatives targeting improved care for older adult patients.



NICHE Online Connect Webinar Categories

Cognitive/Behavior

Delirium Dementia Substance Abuse

Geriatric Care Interventions

Critical Care Geriatric Practice Heart Failure Nutrition/Elimination Oral Health Orthopedics Respiratory Skin Stroke

Implementing NICHE

Communication **GPCA** GRN Integrated System Implementation

Pain & Palliative Care

Patient & Family Education

Safety

Catheters Environment Function & Falls Medication

Healthcare Environments

Emergency Department LTC

Transitions



NICHE Online Connect Webinars

NICHE Hospital Innovation

NICHE Webinar: ACIT (Attention to Care Interdisciplinary Teams): A Quest for Clinical Excellence Special Target: Pressure Ulcers

Presenters: Poh-Lin Lim, RN, BN, MEd, GNC-C and Beth Brudson-Clark, RN, MN, Victoria General Hospital, Winnipeg, Manitoba, Canada

Attention to Care Interdisciplinary Teams (ACIT) initiatives provide an opportunity to reinforce knowledge and practice as a collective. The purpose of this webinar is to discuss the "Skin and Wound ACITeam" initiative that has helped decrease the prevalence of pressure ulcers at Victoria General Hospital in Winnipeg, Canada.

Discussion

Pressure ulcers can result in a wide range of injuries and can interfere with discharge plans.

What You Can Do

The learners will be able to:

- Describe the application of a professional practice model to enhance care of older adults in an acute care setting
- Identify the various components of the wound and skin prevention and management program
- Apply clinical best practice guidelines on pressure ulcer prevention and treatment in a hospital-based wound and skin care program
- Identify the various stages of pressure ulcers and the wound bed preparations essential for wound management

REFERENCES

- National Pressure Ulcer Advisory Panel (2009) Pressure Ulcer Stages. Revised by NPUAP.
 Registered Nurses Association of Ontario Nursing Best Practice Guideline. Risk assessment and prevention of pressure ulcers (March 2005). Toronto, Ontario, Canada
- 3. Registered Nurses Association of Ontario Nursing Best Practice Guideline (March 2007). Assessment and management of stage I to IV pressure ulcers.
- Toronto, Ontario, Canada. 4. WRHA Regional Wound Care Recommendations (2008)
- http://www.wrha.mb.ca/professionals/woundcare/index.php
- 5. Evidence Summary: Pressure Area Care. Joanna Briggs Institute for Evidence Based Nursing and Midwifery (2008).

View the NICHE Online Connect Webinars. Live webinars are available to NICHE Sites for free and to non-NICHE Sites for \$99. Archived webinars are available only to NICHE member organizations.



NICHE Online Connect Webinar Categories

Cognitive/Behavior

Delirium Dementia

Substance Abuse

Geriatric Care Interventions

Critical Care

Geriatric Practice

Heart Failure

Nutrition/Elimination

Oral Health

Orthopedics

Respiratory

Skin

Stroke

Implementing NICHE

Communication

GPCA

GRN

Integrated System Implementation

- Pain & Palliative Care
- Patient & Family Education
- Safety

Catheters Environment

Function & Falls

Medication

Healthcare Environments

Emergency Department LTC

Transitions

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The NICHE Benefit

Make the Move to NICHE and Propel Your Practice Forward

In addition to the outstanding cost-to-benefit ratio, implementing the NICHE Program at your hospital or health system can help you achieve excellent patient outcomes, improve processes, realize cost reductions, and increase brand recognition. Here are just a few of the tangible ways NICHE can help you reach these goals:

- Join a community of over 620 NICHE hospitals and facilities to share experiences, evidence-based practices, and more — Adding 100 hospitals every year!
- Collaborate with over 20,000 healthcare providers in the NICHE network on important geriatric issues
- Access geriatric-specific online courses and hundreds of webinars, project management tools, and other resources to develop and support quality in geriatric care
- Learn about evidence-based geriatric innovations and expand your professional network at the annual NICHE conferences
- Implement NICHE organizational strategies and clinical protocols that help you improve patient/staff satisfaction, lower costs, achieve today's quality metrics, and meet regulatory imperatives
- Apply the Geriatric Institutional Assessment Profile (GIAP) and other benchmarking tools to measure your staff's geriatric knowledge levels and gauge quality outcomes
- Use NICHE marketing tools to heighten awareness for your senior-friendly organization

Find out now how you can put your hospital or health system on a cost-effective, efficient, and rewarding path to excellence in geriatric care. Learn more about implementing the NICHE Program at your hospital by visiting www.nicheprogram.org

Benchmarking & Measurement are key to implementing and sustaining your NICHE Program. Your yearly Program Evaluation will determine your NICHE level and your GIAP will let you know your hospital's standing

NICHE Benchmarking & Measurement

NICHE Geriatric Institutional Assessment Profile The GIAP uses a database of more than 95,000 staff completed responses from more than 300 hospitals to quantify staff knowledge, attitudes, and perceptions in the care of geriatric patients. See the Geriatric Institutional Assessment Profile Portfolio on pages 51-52.

NICHE Recommitment The Annual Membership Profile, part of the recommitment process, solicits information on general hospital characteristics, patient census information, recognitions, geriatric services, geriatric staff development resources, and electronic resources. See the Recommitment Portfolio on pages 53-54.

NICHE Program Evaluation

The Annual Program Evaluation is used to determine a NICHE program's level of intensity. The levels are Early, Progressive, Senior Friendly, and Exemplar. See the Program Evaluation Portfolio on pages 55-56.

NICHE Performance Measures

For the Performance Measures survey, NICHE sites submit unit-level clinical data and brief nurse staffing data that can be drawn from the National Database of Nursing Quality Indicators (NDNQI®). See the Performance Measures Portfolio on pages 57-58.



NICHE Geriatric Institutional Assessment Profile

Overview

The Geriatric Institutional Assessment Profile (GIAP) was developed by NICHE for use by its designated sites. The GIAP, an important component of the Leadership Training Program (LTP) and evaluation process, enables hospitals to quantify staff knowledge, attitudes, and perceptions in the care of geriatric patients, and assess their institutional readiness to provide quality care of older adult patients.

Features & Benefits

Feature: Uses a database of more than 105,000 staff completed responses from

more than 300 hospitals

Benefit: Provides an ideal basis for comparing a NICHE hospital against similar hospitals in key measures of staff knowledge/attitudes and institutional support

Feature: Quantifies staff geriatric knowledge

Benefit: Identifies objective evidence of gaps in knowledge levels

Feature: Delivers detailed comparison of staff against other hospitals by peer bed

size and teaching status

Benefit: Allows administrators and researchers to document improvement in nurses' perception of care provided to older hospitalized adults following NICHE program implementation

Feature: Provides a baseline profile

Benefit: Useful in evaluating effectiveness of ongoing CQI (Continuing Quality

Improvement) efforts

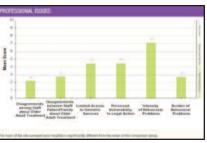
Feature: French language version available

Benefit: Supports NICHE designated hospitals that have French-speaking staff

Applications

Measurement and evaluation are critical to implementing and sustaining the NICHE model across all settings. The GIAP survey is easy to administer and provides invaluable data for targeting areas for improvement. It gives hospitals the means to gauge the success of quality improvement processes across all settings, including attitudes regarding care, knowledge of institutional guidelines, and perceived institutional strengths and barriers to "best practice" in the care of older adult patients.





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- NICHE Solutions Series
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- Joint Commission Crosswalk
- NICHE Annual Conference



NICHE Geriatric Institutional Assessment Profile

NICHE Hospital Innovation

Implementation of Educational Strategies to Bridge Knowledge Gaps Identified in the GIAP Survey

Authors: S. Mateo, RN. MA, L. Jones-Kanu, RN. MSN, M. Adler, RN-BC, WCC, MSN, M. Galante. RN, MSN, NEA-BC, D. Castro, RN-BC, BS, CCRN, B. Reynolds, RN-BC, MA, K. Widas, RN, MSN, A. Seiler, RN, BSN and C. Malmgreen, RN-BC, MSN, MA, Hudson Valley Hospital Center, **Cortlandt Manor. New York**

Hudson Valley Hospital Center's NICHE steering committee identified needs and improvement targets to elevate the organization to a new level in care provision to the older adult patients. The most important need was implementation of educational strategies for nursing personnel to bridge knowledge gaps identified in the NICHE Geriatric Institutional Assessment Profile (GIAP) survey. The hospital initiated NICHE training classes for RNs and Patient Care Technicians (PCT). Each class included:

- Pre- and post-tests to measure changes in knowledge
- Encouragement of geriatric certification by RNs who would then serve as unitbased champions

Implementation - Protocol Development

- Education program initiated
- SPICES plan of care implemented
- Clinical guidelines/procedures started at unit level using the Try This! series
- Patient/family education launched

As a result of implementing the NICHE education modules, the following programs were developed:

- Lemon Water Hydration Program
- Engagement of medical staff in initiating and educating about delirium assessment and interventions
- Commitment by the hospital to offer a NICHE symposium addressing cognitive decline in the older adult
- Nursing units launch a geriatric education program

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View the NICHE Geriatric Institutional Assessment Profile. This resource is available only to NICHE member organizations.



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- NICHE Solutions Series
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- NICHE Annual Conference



NICHE Recommitment

Overview

The NICHE Recommitment process consists of three sections: Annual Membership Profile, Annual Program Evaluation, and Annual Fee payment. Continued NICHE designation requires that sites participate in the annual recommitment process.

Features & Benefits

Feature: NICHE hospitals engage in a rigorous renewal process Benefit: The NICHE designation demonstrates a hospital's organizational commitment and continued progress in improving quality, enhancing the patient and family experience, and supporting the hospital's efforts to better serve their communities

Feature: Annual Membership Profile completed each year on NICHE site anniversary date

Benefit: Provides data on an organization's characteristics as well as the scope of the NICHE program to facilitate program evaluation, inform resource development, and support the maintenance of the NICHE database for research so that NICHE can better meet each institution's needs

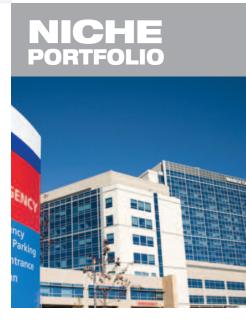
Feature: Annual Program Evaluation done after the first year of implementation, and then every year on the anniversary date*

Benefit: Used by NICHE hospitals to evaluate their level of NICHE implementation: target future policy, program development, and other initiatives; and gain and sustain support from stakeholders

*See the Program Evaluation Portfolio for more information.

Applications

Most of the information in the survey is general aspects of the NICHE institution. Some sections, such as information on census data and nurse staffing, typically require the assistance of the finance department and the nursing administrative offices. NICHE uses the aggregate information from program evaluations to evaluate current resources and support; identify the need for resource development; and disseminate NICHE work through aggregated data presented in publications.



- Geriatric Institutional Assessment Profile (GIAP)
- NICHE Leadership Training Program
- NICHE Planning & Implementation Guide
- NICHE Organizational Strategy: Nurse Certification Tool Kit
- Clinical Improvement Models
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NICHE Recommitment

NICHE Hospital Innovation

Integrating Geriatrics with Patient & Family Centered Care on Medical Specialties

Author: Justin Montgomery, ARNP, MSN, Geriatric Nurse Coordinator, Dartmouth-Hitchcock Medical Center, Lebanon, New Hampshire

PROBLEM: The greatest percentage of Medical Specialties patients at Dartmouth-Hitchcock is aged 76 or older, and at least half are 65 and older. The hospital needed to focus on the needs of this core group.

SOLUTION: A multidisciplinary team at the hospital implemented a multifaceted approach (Geriatric Resource and Geriatric Patient Care Associate roles, and transitional care initiatives) to better meet the unique care needs of the older adult group.

Problem Identified Realizing the geriatric population in Medical Specialties at their facility represented their core consumers, Dartmouth-Hitchcock needed to commit to meet the unique care needs of this group.

Solution Formulated A multidisciplinary team implemented a number of initiatives to help transform the culture of geriatric care and achieve the greatest potential for the older adult patients and their families. These initiatives included:

- Creation of a Geriatric Nurse Coordinator position in the medical specialty line
- Formation of a geriatric steering committee
- Use of local and national resources, including...
 - NICHE designation
 - Dartmouth Center for Health and Aging partnership
 - Clinical Microsystems quality improvement processes

Specific action steps involved an "Ask the Nurse" community education program, follow-up phone calls, and ongoing internet-based education efforts. A Geriatric Resource Nurse and a Geriatric Patient Care Tech were also added to the staff.

Evaluation/Results In those areas that the Elder Care at DHMC program sought to improve outcomes for hospitalized older adults, results showed a 19% decrease in loss of functional status, 6-36% lower rates of delirium compared to previously reported levels, and pressure ulcers prevalence rates reduced by more than half from 6% to 2%.

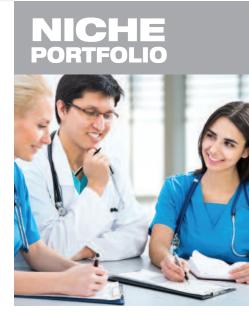
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NICHE-RELATED

- The NICHE GRN Curriculum. http://elearningcenter.nicheprogram.org/course/view.php?id=2
 The NICHE Introduction to Gerontology Curriculum. http://elearningcenter.nicheprogram.org/course/view.php?id=5
 The NICHE Geriatric Patient Care Associate Curriculum. http://elearningcenter.nicheprogram.org/course/view.php?id=28

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NICHE Program Evaluation

Overview

The NICHE Annual Program Evaluation is a self-assessment of a NICHE hospital's ability to achieve excellence in care of the older adult patient. It is used by hospitals to determine the level of their NICHE program. The evaluation benchmarks program progress year-to-year, targets future care initiatives, and provides data to use in gaining and sustaining support from institution stakeholders. Hospitals achieve one of four levels depending on the progress of their program: Exemplar (the highest level), Senior Friendly, Progressive, and Early Implementation.

Features & Benefits

Feature: Annual Program Evaluation done after the first year of implementation, and then every year on the anniversary date

Benefit: Used by NICHE hospitals to evaluate their level of NICHE implementation; target future policy, program development, and other initiatives; and gain and sustain support from stakeholders

Feature: Target achievement goals for the various levels fall into eight categories: Guiding principles, organizational structures, leadership, geriatric staff competence, interdisciplinary resources and processes, patient and family-centered approaches, environment of care, and quality

Benefit: Provides NICHE hospitals with a clear framework for gaining continued progress in improving quality, enhancing the older adult patient and family experience, and supporting hospitals' efforts to better serve their communities

Feature: NICHE generates aggregate information from program evaluations Benefit: The data is used to evaluate current resources and support, identify the need for resource development and disseminate NICHE work through aggregated data presented in publications

Applications

The Annual Program Evaluation is an important tool for the NICHE program designed to be used internally by NICHE sites to plan and evaluate the current state and future goals of their NICHE program. While NICHE does score the evaluations, matching each site with their NICHE program's level of intensity, the program evaluations are used to help NICHE sites understand the progress of their own program.



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NICHE Program Evaluation

NICHE Hospital Innovation

What difference does your NICHE program make? Program **Evaluation: A critical need.**

Author: Sue Nickoley, MS, RN, GCNS-BC, Rochester General Hospital, Rochester, New York

Background/Purpose NICHE is regarded as the gold standard for evidencebased, system-wide geriatric care initiatives that provide a strategy to achieve and sustain geriatric excellence. However, studies that evaluate NICHE as a program of care/research are limited. There is a need for standardized, clinically feasible evaluation methods that can be used across NICHE hospitals to measure and benchmark processes and outcomes. This presentation illustrates how one NICHE hospital uses program evaluation studies (pre-post design) to demonstrate how their NICHE program makes a difference.

Evaluation Question What is the impact of implementing the Rochester General Hospital (RGH) NICHE program using the NICHE geriatric acute care model and Magnet alignment on improving geriatric outcomes (patient, staff, and organization)?

RGH NICHE Program Goals

- 1. Build and sustain the Geriatric Resource Nurse (GRN) model of care to improve geriatric nursing expertise and competencies, and facilitate certification.
- 2. Facilitate GRN visibility, voice in decision-making, identity and role as "geronurse," and achievement/documentation of outcomes.
- 3. Implement geriatric evidence-based best practices to improve patient/family outcomes.
- 4. Build an effective and supportive work environment that delivers age sensitive geriatric care.
- 5. Conduct program evaluation studies on building and evaluating geriatric evidence-based best practice standards.
- 6. Facilitate clinical integration of the RGH NICHE program model across Rochester General Health System.
- 7. Collaborate with national NICHE program and other NICHE hospitals to improve the community standard of geriatric nursing excellence.

2011 RGH NICHE Program Evaluation Survey data showed that the initiatives around these goals resulted in increases in the level of NICHE program implementation.

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NICHE Performance Measures

Overview

Unit Performance Measures include both clinical data and nurse staffing data. These results are triangulated with Geriatric Institutional Assessment Profile (GIAP) and other site-specific data.

Features & Benefits

Feature: Important component of the NICHE Core Measures that also includes the GIAP and the NICHE Program evaluation

Benefit: Measurement results from the unit measures survey and other core measures are critical to developing, sustaining, and growing the NICHE program at hospitals

Feature: Allows NICHE sites to benchmark their unit-level nursing sensitive quality indicators and compare their patient and nurse level indicators to other peer **NICHE** hospitals

Benefit: Facilitates research and quality improvement activities, quides staff development, improves registered nurse retention efforts, and helps hospitals meet the requirements of regulatory agencies or Magnet designation

Feature: Identifies unit-level (aggregate) patient outcomes such as falls, injurious falls, pressure ulcers, and restraint use

Benefit: Especially applicable to NICHE sites since these hospital complications most frequently occur in older adults

Feature: Helps hospitals identify variability in rate of compliance with evidencedbased protocol among units

Benefit: Builds momentum for staff across units to acquire the specialized professional development, training, and competencies required to provide safe. quality care for older adult patient populations

Application

This survey addresses unit and staffing characteristics, as well as patient outcomes, and provides important context when comparing and tracking unit results. NICHE sites submit unit-level clinical data and brief nurse staffing data. Clinical outcomes are clinical indicators that are relevant to the care of the older adult. They can be drawn from the National Database of Nursing Quality Indicators (NDNQI®), if the hospital submits to the database. They are submitted annually, within the quarter that the GIAP was conducted.



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NICHE Performance Measures

NICHE Hospital Innovation

A Nurse Driven Urinary Catheter Removal Protocol

Author: Nancy DiRico MSN, RN, CMSRN, Lehigh Valley Health Network, Transitional Skilled Unit, Allentown, Pennsylvania

PROBLEM: Indwelling urinary catheters were often used without adequate indication, posing significant safety risk.

SOLUTION: Create a nurse-driven protocol to decrease the use of indwelling urinary catheters by 50%.

Problem Identified The use of indwelling urinary catheters in acute and transitional care settings is often inappropriate and associated with risks, including catheter associated urinary tract infections (CAUTI), increased healthcare costs, patient discomfort, increased morbidity/mortality, dignity issues, and mobility/ambulation issues.

Indwelling urinary catheters are misused for several reasons, including: 1) convenience, to manage urinary incontinence; 2) lack of knowledge of risks associated with use and alternative treatments; 3) physicians not tracking continued use; and 4) lack of valid continence assessment tools for the older adult population (Georgiou, 2001). Unfortunately, educational initiatives have often traditionally focused on incontinence products, including indwelling urinary catheters, rather than continence promotion strategies (Arwin, 2000).

Solution Formulated The Lehigh Valley Health Network created a nurse-driven protocol with a goal of decreasing the use of indwelling urinary catheters on the Transitional Skilled Unit (TSU) by 50%. The protocol included removing urinary catheters within 48 hours of admission (unless contra-indicated specifically by the physician) and assessing voiding patterns after catheter removal.

An educational program was launched to support the use of the protocol.

Nurses received training in:

- · Acceptable reasons for indwelling catheters
- Alternatives to indwelling catheter use
- Infection control
- · Bladder scan protocol

Certified Nursing Assistants received training in:

- Infection control
- Proper placement of the drainage bag
- Hourly rounding for toileting needs and toileting plan
- · Empowered to report the presence of all urinary catheters to their nurse and to question necessity

Education was provided to nursing assistants on infection control, catheter care, and placement of Foley bags. Therapy staff were educated on infection control issues with Foley's while ambulating and transferring patients. Physicians were also educated on acceptable reasons for maintaining a Foley catheter and documentation requirements in the medical record.

Evaluation/Results As a result of the program, initially there was a sharp decrease in the number of urinary catheters. After several months, the number of urinary catheters decreased but remained constant. The catheters being used all had medical justification documented in the medical record. An unanticipated positive result of the protocol has been no CAUTI's in the past 30 months.

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NICHE-RELATED

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