Achieving Top Decile HCAHPS Results & the Impact of Nurse Led Interdisciplinary Care Rounds

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Objectives

Achieving Top Decile HCAHPS Results & the Impact of Nurse Led Interdisciplinary Care Rounds

• 1) Identify the characteristics of a Critical Access Hospital with top decile HCAHPS.
• 2) Review strategies to implement Nurse-led Interdisciplinary Care Rounds.
• 3) Evaluate the impact of Nurse-led Interdisciplinary Care Rounds on HCAHPS.
Mariners Hospital

Florida Keys
Top Box Trends

Inpatient - Med/Surg
Mariners Hospital
Section - CAHPS - Discharge Information

Displayed by Discharge Date
Top Box Trends

Inpatient - Med/Surg

Mariners Hospital

Question - CAHPS - Staff talk about help when you left

Displayed by Discharge Date
Our Mission…

is to improve the health and well-being of individuals, and to promote the sanctity and preservation of life in the communities we serve.

Baptist Health is a faith-based organization guided by the spirit of Jesus Christ and the Judeo-Christian ethic.

We are committed to maintaining the highest standards of clinical and service excellence, rooted in utmost integrity and moral practice.

Consistent with its spiritual foundation, Baptist Health is dedicated to providing high quality, cost-effective, compassionate healthcare services to all, regardless of religion, creed, race or national origin, including, as permitted by its resources, charity care to those in need.
Our Vision

Baptist Health will be the **preeminent healthcare** provider in the communities we serve – the organization that **people instinctively turn to** for their healthcare needs.

Baptist Health will offer a broad range of clinical services that are evidence-based and compassionately provided to assure **patient safety, superior clinical outcomes**, and the highest levels of satisfaction with a **patient- and family-centered focus**.

Baptist Health will be a national and international **leader in healthcare innovation**.

Our Guiding Principle…

Through our compassionate healthcare services, we seek to reveal the healing presence of God.
Mariners Hospital

Statistics

• 25 Bed Critical Access Hospital
• Baptist Health South Florida- largest not-for-profit healthcare organization in South Florida
• 65 miles south of Miami in the Florida Keys
• FY 2015
  Inpatient Admissions 663 & 547 observation stays
  Emergency Visits 13,352
  Outpatient Visits 24,758
HOSPITALS

ON WATCH: From an off-site ICU Lifeguard Clinical Operations Center, Dr. Loren Nelson monitors patients who are in the critical-care center at Baptist Hospital. “We try to be extremely protective of the privacy of the patient and the staff,” Nelson said.

REMOTE CONTROL

BAPTIST HEALTH STARTS A NEW REMOTE CENTER IN DORAL TO MONITOR PATIENTS IN ITS INTENSIVE CARE UNIT

BY JOHN DORSEYER
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When many people first hear about remote monitoring of intensive care patients, their first reaction is “a sense of fear,” according to Helli Schuler, a veteran ICU nurse.

She said this one recent morning sitting in South Florida’s first remote ICU observation center, in Doral, watching a bank of computer screens keeping tabs of patients at South Miami Hospital, nine miles away.

“Nurses in the hospital fear ‘Big Brother watching me,’” she said, and patients’ families

REMOTE INTENSIVE CARE CENTERS

Baptist Health South Florida is the first hospital group in the tri-county area to start a remote monitoring center for its hospitals.

Here are some highlights:

- Concept: Better monitoring will cut ICU costs and improve care.

Studer CONFERENCES

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More Services

- Sleep Diagnostics
- Cardiopulmonary Rehabilitation
- Diabetes Care Center
- Imaging Services
- Surgical Services
- Oncology
- Swing Bed Services

- Inpatient unit MS & ICU
- Physical Therapy
- Speech Therapy
- Laboratory Services
- Emergency Services
Mariners Hospital Honors

Baptist Health South Florida
Plan of Care

Interdisciplinary Care Rounds

- History of interdisciplinary care planning at Mariners
- Lack of participation in plan of care by direct RN
Research

Interdisciplinary Care Rounds (ICR)

• Effective care teamwork and collaboration are essential (O’Leary, 2011)

• Interdisciplinary rounding with planned, focused interactions promotes best POC (Sisterhen et al., 2007)

• ICR decreases adverse events, improve communication and collaboration, efficiency in care, support patient family centered care, and improves outcomes (Bussey & Johnson, 2015)

• Direct Care RN should lead rounds (Bussey & Johnson, 2015)
Clinical Practice Question

Interdisciplinary Care Rounds

• Will the implementation of interdisciplinary care rounds (ICR) in hospitalized patients at a rural hospital improve communication, collaboration, provide more efficient patient care, and improve quality outcomes?
Buy in

Interdisciplinary Care Rounds

- Met with senior leadership to present evidence
- Presented basic plan for implementation
- Invitations sent to potential team members for meeting
Objections, Obstacles, & Challenges

Interdisciplinary Care Rounds

• Resistance
  • Too many people in the room
  • Overwhelming to the patient
  • Too much time out of day/ takes too long
• Physicians
• HIPAA
• Waste of time
Plan for Implementation

Interdisciplinary Care Rounds

• Meet with disciplines to develop logistics and plan
  • Time?
  • Days?
  • Who?
    • All patients in ICU & MS
    • Hospitalist ARNP, MS & ICU manager, Direct Care RN, SW, RT, PT PRN, pastoral care, dietitian, care coordination (added later), infection control (consulted PRN), pharmacy available

• What will be discussed?
  • POC, pain, medications, diet, discharge, care at home, wounds, patient concerns, family concerns, etc.
Collaboration

One Goal
Desired Outcomes

Interdisciplinary Care Rounds

- ↑ scores in overall patient satisfaction
- ↑ scores in communication with nurses
  - nurses explained in a way you could understand; nurses listened carefully to you; nurses treated you with courtesy and respect
- ↑ overall discharge scores
  - staff talk about help when you left; extent you felt ready for discharge; speed of discharge process
- ↓ length of stay
Interdisciplinary Care Rounds

• Direct Care RN
  • Expectations i.e. information to include, patient prep for rounds, inclusion of family, documentation
  • Presented in huddles, staff meetings, one-on-one & emails with go-live date

MH Key Points Presenting a Patient in Rounds

- Patient's name/ gender/ age
- Diagnosis- disease and condition (why and when was this patient admitted)
- Short History (important to know pt. baseline)
- Systems review in head to toe order i.e:
  - pt. Is AA0x___? Pain relieved?
  - O2: Vent setting or O2 device
  - Tele:
  - Urine/ Stool output issues? Foley?
  - Skin/ wounds- photos taken? Form completed?
- Important lab or test results
- Important medications patient is on. ie Morphine PCA, ABX, gtt's
- Short term plan of care (tests, labs pending etc.)
- Long term plan of care (discharge needs etc.)
- Anything out of the ordinary going on with the patient that management or social work needs to know (family issues, patient issues etc.)

Know:
- Physicians on the case / outstanding consults?
- Core measure?
- DVT prophylaxis?
- Vaccines? Pneumonia/Influenza?

Goal: five minutes in each patient room. Direct care RN will enter a note in PCDS “Interdisciplinary rounds completed”. 
Conducting Rounds

Interdisciplinary Care Rounds

• Introduce team
• Report from RN updates/changes
• Address wounds, ACT, pain, medications, discharge (help at home), follow-up care, and concerns from patient/family
• Swing round day one, PRN, & weekly
• Follow-up PRN
Patient Feedback

Interdisciplinary Care Rounds

- “I enjoyed it when a group of 6 or 7 nurses and attendants came in and chatted with me for a few minutes”
- “This is amazing; can I take a picture of this? I’ve never seen this before at any other hospital…this is great!”
- “I love seeing you guys in the morning, it makes me happy!”
- “Wonderful hospital, do you do this all the time?”
- “All of you are here for me? Wow! I feel special”
- “Will you all pray with me?” (we thought she wanted us to pray for her and then she proceeded to pray for the entire group)
- “I was here a few years ago and have definitely seen an improvement since then.”
- “I love y‘alls sense of humor!”
Evaluation

Interdisciplinary Care Rounds

• Expected outcomes met
  • Overall satisfaction increased
  • Communication with nurses increased
  • Discharge scores increased

• Unexpected outcomes
  • Length of stay remained the same
  • Pain scores improved
  • Medication scores improved
Top Box Trends

Inpatient - Med/Surg

Mariners Hospital

Question - CAHPS - Nurses listen carefully to you

Displayed by Discharge Date
Top Box Trends

Inpatient - Med/Surg

Mariners Hospital
Section - Nurses

Displayed by Discharge Date
Top Box Trends

Mariners Hospital

Displayed by Discharge Date

Mariners Hospital

Mean
71.9

Top Box Trends

Inpatient - Med/Surg
Mariners Hospital
Section - CAHPS - Pain Management

Displayed by Discharge Date
Top Box Trends

Inpatient - Med/Surg
Mariners Hospital
Question - CAHPS - Pain well controlled

Displayed by Discharge Date
Top Box Trends

Inpatient - Med/Surg

Mariners Hospital

Question - CAHPS - Staff do everything help with pain

Displayed by Discharge Date
Top Box Trends

Inpatient - Med/Surg
Mariners Hospital
Section - CAHPS - Comm About Medicines

Displayed by Discharge Date
Outcomes

Interdisciplinary Care Rounds

• Increased collaboration
  • POC was fragmented and disconnected
  • Nurses report an increased sense of connection to POC

• Improved quality scores

• Patient reports
  • Opportunity to voice concerns
  • Provide input into POC
  • Active role in care
Follow-up

Interdisciplinary Care Rounds (ICR)

- Key personnel meet to determine effectiveness of ICR
- Coaching of staff for improvement
  - Use language patient understands
  - Stay on topic
  - Prep the patient with key words
Challenges

Interdisciplinary Care Rounds (not all rosy)

• Doctors
• RNs
• ARNP
• Patients
• “social hour”
Best Practice Validation

Interdisciplinary Care Rounds

• ANCC Pathway to Excellence
• Studer
• The Joint Commission
EVALUATION REMINDER:

We want your feedback to get better and so you can receive continuing education credits. Please evaluate the session.
Thank You!

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References

Nurse Led Interdisciplinary Care Rounds


