

The Emerging Role of Nurse Informaticists in Improving Patient Care Outcomes and Staff Satisfaction

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Today's Objectives

- Understand how informatics nurse play a key role in driving compliance of care plans
- Understand how to gain consensus on care plans using evidence-based CDS
- Influence strategic initiatives like Meaningful Use Stage 2 with nurse leaders

About White Plains Hospital

- 292 beds
- 15,828 admissions
- 54,152 ED visits
- 1,933 births
- Magnet® Designation from the American Nurses Credentialing Center (ANCC)
- 11-time winner of the Consumer Choice Award
- Joint Commission Top Performer of Key Quality Measures (2012)
- Outstanding Achievement Award from the American College of Surgeons Commission on Cancer (2013)
- Get With The Guidelines®-Stroke Gold Plus Quality Achievement

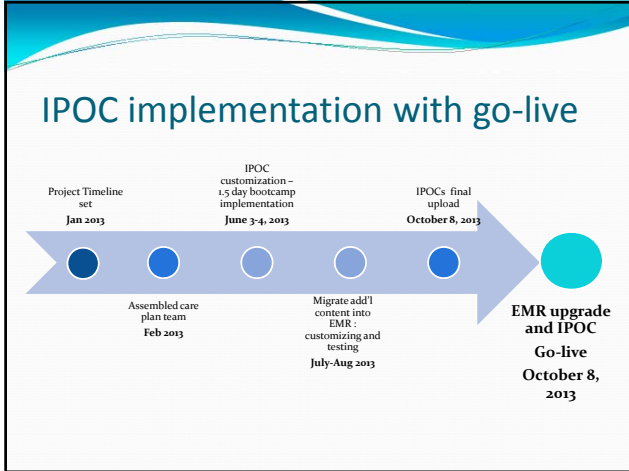
- Award from the American Heart Association (2013)
- Beacon Award for Excellence for the Intensive Care Unit (ICU) from the American Association of Critical Care Nurses (2014)



Background to IPOC Project

Defining the need for evidence-based IPOCs

- CNO and nursing leadership recognized need for evidence-based IPOCs
- Need to improve compliance
 - Chart reviews showed 60% compliance with care plans
- Need for meaningful care plans
 - Evidence-based plans of care (v. just because/just protocol/non-specific to patient or care provider)
 - Envisioned interdisciplinary plans of care v. just nursing care plans
- Disciplines functioned in silos



White Plains Hospital Outcomes

- Rapid deployment and increased collaboration with ZynxCare®

55 IPOCs
Completed in
< 3 Days

↑

Improvements
Collaboration between disciplines
Clinician buy-in and consensus
Meaningful documentation of patient goals
Provider-provider communication

White Plains Hospital Outcomes

- Improved compliance and quality of care with ZynxCare®

> 95%
IPOC Utilization

↑

Improvements
Staff satisfaction
Staff compliance
Meeting Magnet® designation for EB practice
Evidence at the point of care
Standardization, quality of care, and patient safety

White Plains Hospital Outcomes

- Improved LOS and interdisciplinary documentation with ZynxCare®

4.81 days
↓
4.75 days
Length of Stay Rate

↓

Reductions
Length of Stay Rate
Documentation Time

Source: 2009 Zynx Health Conference | 2009 Zynx Health Conference

White Plains Hospital Outcomes

- Achieving strategic goals with new cultural transformation

MU Stage 2

Meeting Criteria

↑

Achievements

Nurse Informaticists influence strategic decisions
Cultural transformation

Organizational Culture Shift

- Brand new paradigm and way of thinking to involve interdisciplinary teams
 - Need to get team on same page and onboard
 - Respiratory, case managers, etc.
- Shift in nursing care process
 - Before: Including any and all problems into the care plans (pertinent or not)
 - After: getting patient to next level of care
- Changed workflow of documenting care plans in EMR
- Veteran nurses v. newer nurses

Overcoming Resistance and Achieving Consensus

- Started from the top: support from nursing leadership
- Ongoing support for staff *
- Formed an alliance between interdisciplinary team members*
 - Informatics council
 - Nurses
 - Ancillary care providers

New Role for the Nursing Informaticist

- Clinical IT representation for new projects
- On going collaboration with the interdisciplinary team members
- Meaningful Use II project lead
- Other on going projects

Summary

- Management support is crucial to the success of the project
- Collaboration and engagement from interdisciplinary team is key in achieving compliance
- Supportive team from Zynx Health
- Nurse informaticists have unique skills for strategic decision-making and program success
 - help bridge gaps between care providers
 - lead nurse satisfaction and patient care improvement programs

Zynx Health's Approach to Evidence-based Practice

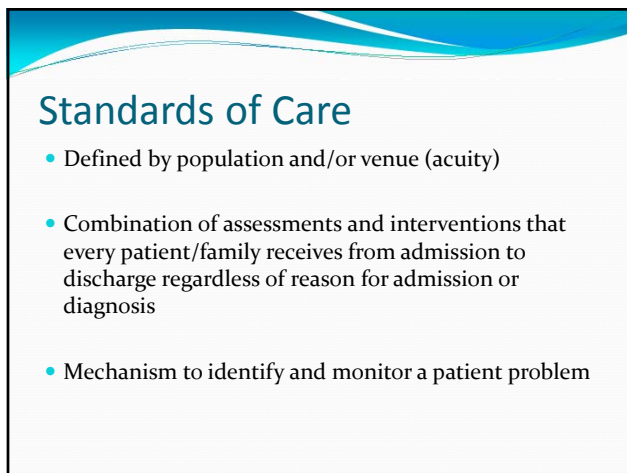
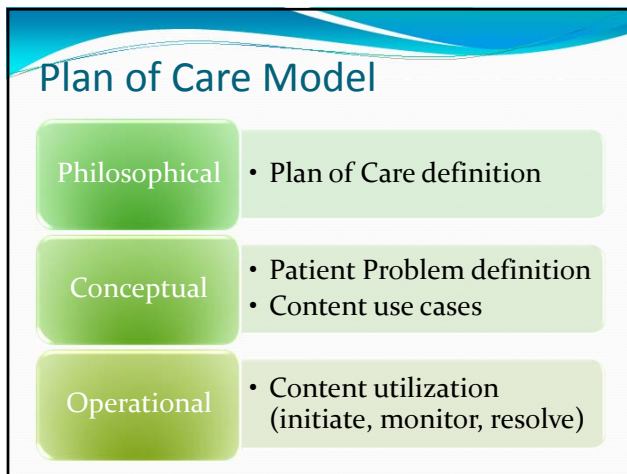
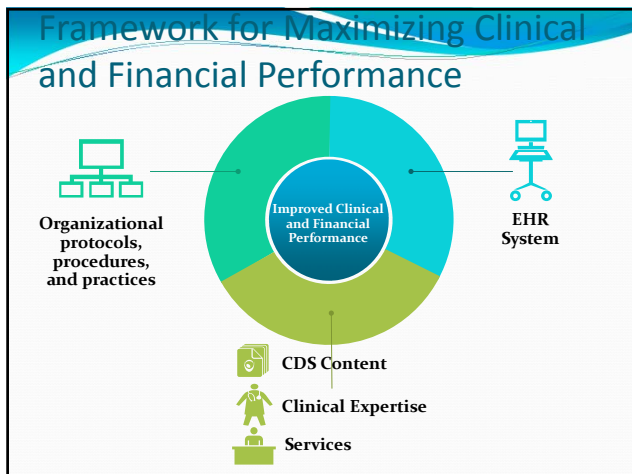
Grant Campbell, MSN, RN
Senior Director, Nursing Strategy and Informatics

Plan of Care – Current State Challenges

- Inconsistent development methodology
- Limited scope
- Irregular and/or non-existent updates and maintenance methodology
- Nursing focused
- Mixes standards of care, plan of care, and policy/procedure elements
- Inconsistent integration of performance measure requirements
- Inability to “tell the Patient Story”

Plan of Care – Future State Opportunities

- Gold standard for content development methodology
- Range and granularity of evidence – key clinical processes, evidence and performance measure requirements (national, state, specialty)
- Extensive content scope – by populations, acuity, and venue
- Established updates and maintenance methodology
- Interdisciplinary approach
- Supports deployment of standards of care, plans of care, and policy/procedure
- Ability to “tell the Patient Story”



Plan of Care

- Defined as:

An individualized approach to managing **unique and relevant** patient and/or 'family' problems

- Requires an **organizational definition** for a patient problem

Defining the Patient Problem

When is a problem a problem?

“When a clinical, behavioral, educational and/or social issue(s) is preventing the patient and/or family from getting to the next level of care.”

- Critical to general care
- Acute care to transitional care (Rehabilitation/LTAC)
- Acute or transitional care to community (home or other clinical setting)

Plan of Care

- Includes **use cases** that provide organizational structure to the plan
- Requires a **policy and procedure** governing the:
 - initiation
 - monitoring
 - and resolution of the patient problem(s)

Use Case	Content Application
A stand alone problem identified as a result of use of a standardized risk assessment scoring tool	Example: Falls - Risk of
A stand alone problem identified as a result of a clinical assessment finding	Example: Serum Glucose Level - Abnormal when signs of hypo/hyperglycemia are present
A stand alone problem identified as a result of a co-morbidity	Example: Serum Glucose Level - Abnormal for patient with a history of diabetes (Type I or II)
A stand alone problem is used to inform, improve, and/or standardize a clinical protocol, practice and/or policy & procedure (P&P)	Example: Infection, risk of - Indwelling Urinary Catheter Patients with indwelling catheters are managed according to the organizational policy, procedure and protocol but the above problem would not be activated on the plan of care

Use Case	Content Application
A problem set (condition/procedure plan) identified based on admitting or a developing diagnosis. Within the set problems are selected depending on scoring tools and/or assessment findings.	Example: <ul style="list-style-type: none"> • Total Hip Replacement (procedure) • Stroke (condition) • Vaginal Delivery (process)
A problem set combined with additional problem set(s) to create a broader problem set	Example: Joint Replacement created by merging Total Hip Replacement with Total Knee Replacement
A problem set is repurposed for use with another similar clinical condition for which the evidence is essentially the same	Example: Hemorrhagic Stroke based on Ischemic stroke
For a clinical condition for which Zynx does not have a problem set, a plan of care is created using patient problems	Example: Burn Trauma Adult <ul style="list-style-type: none"> • Anxiety • Breathing Pattern Ineffective • Fluid Volume Imbalance • Gas Exchange Impaired • Infection – Risk of • Mood Altered • Tissue Perfusion Altered


Evidence Summaries

- Online library of clinical research, national guidelines, and quality measures designed to support the development of plans of care
- Transparent, rigorous, repeatable methodology


Accumulate

- PubMed
- CINAHL
- Cochrane
- US Based Quality/Performance Measures

Appraise/Synthesize

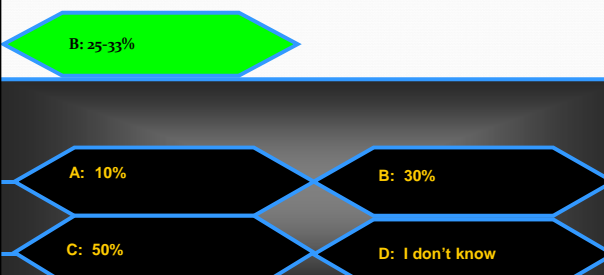


Publish



Polling Question

What percentage of the interventions are evidence-based on current plans of care ?



Industry's Deepest Possible Level of Evidence-based CDS Integration

- 106 Plans of Care**
 - Evidence-based plans of care embedded into EHR System/Patient Care Application
- Evidence at the Point of Care**
 - Non-biased evidence summaries derived from robust research methodology
- Content Updates and Maintenance**
 - Annual Content Updates and Maintenance program to ensure that content remains optimized and current

Evidence-based Interdisciplinary Plans of Care

- 300** Customizable plan of care templates
- 53** Patient problem topics addressed
- 63** Medical condition/procedure topics covered
- 7** Standards of Care

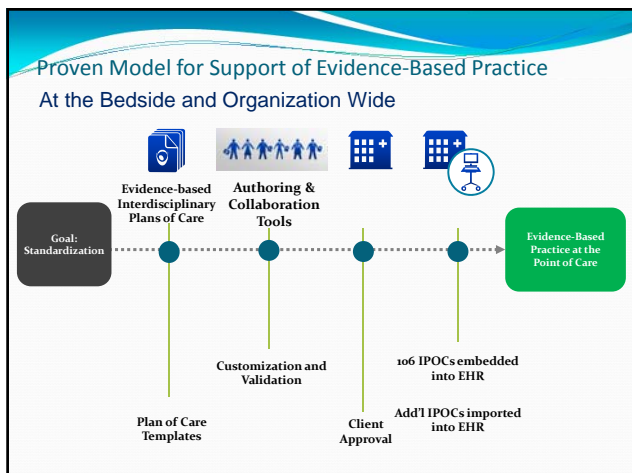
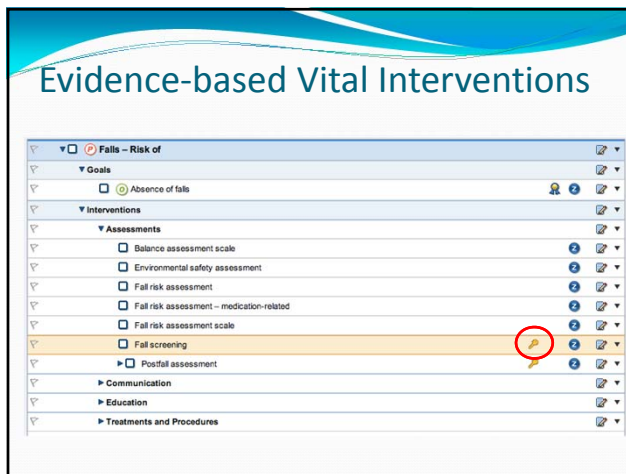
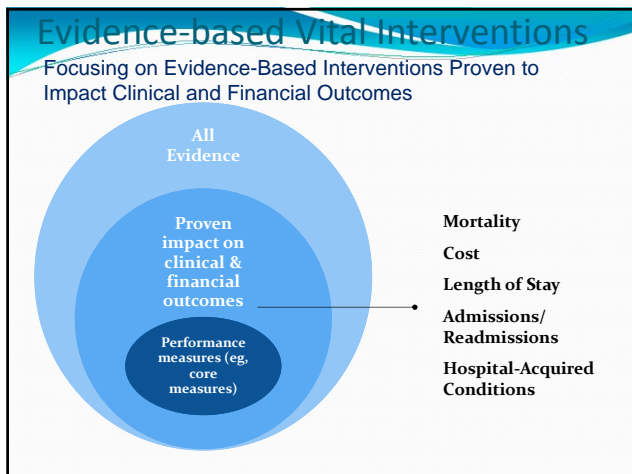
Evidence-based Interdisciplinary Plans of Care Supporting the Care Continuum

- 8** Rehabilitation modules:
 - Cardiac
 - Musculoskeletal Amputation
 - Musculoskeletal Arthroplasty
 - Musculoskeletal Spine Surgery
 - Neurological Spine Cord Injury
 - Neurological Brain Injury
 - Cerebrovascular Disorders
 - Pulmonary
- 4** Transition of Care checklists:
 - General (overall)
 - Admission
 - Pre-discharge
 - Post-discharge

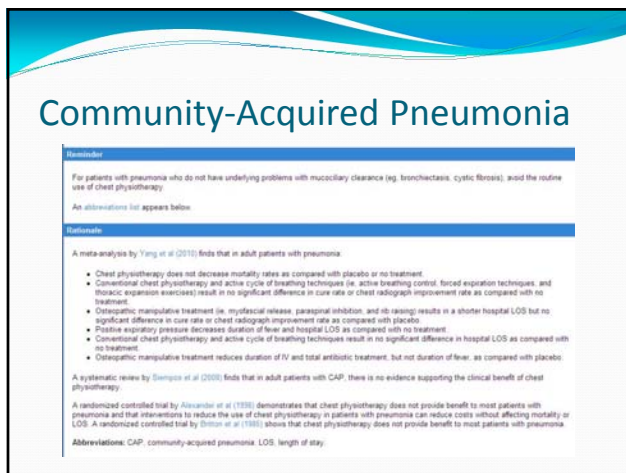
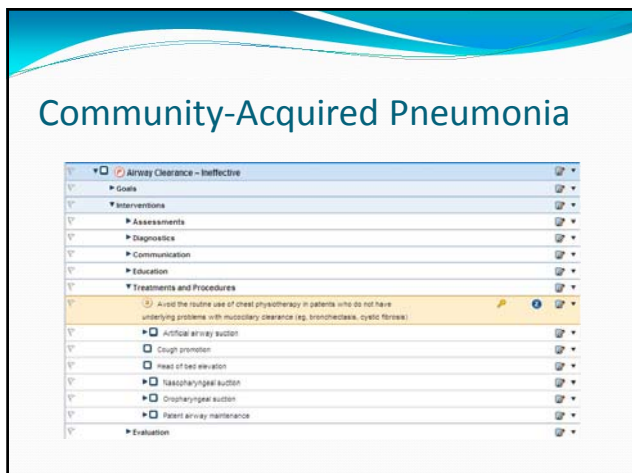
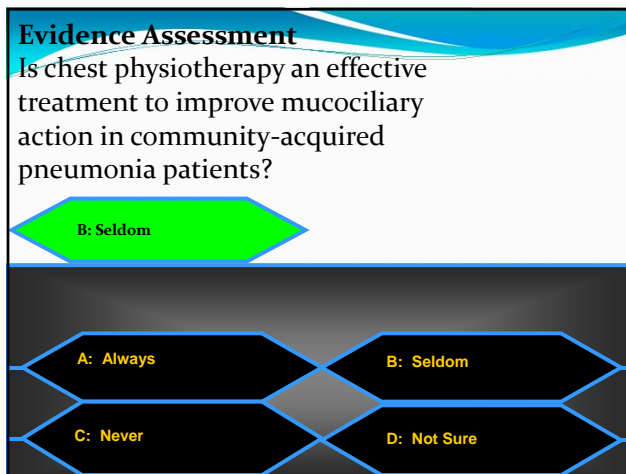
Plan of Care Format

The screenshot shows a care plan for 'Falls - Risk of'. It includes sections for Goals, Interventions, Assessments, Communication, Education, and Treatments and Procedures. Red circles highlight specific icons: a blue ribbon icon for 'Absence of falls', a Z icon for 'Fall risk assessment - medication-related', and a key icon for 'Postfall assessment'.

- Blue Ribbon icon = **quality & performance measure**
- Z icon = links you to the Zynx Health **evidence summary**
- Key icon = intervention directly impacts **clinical and financial outcomes**



- ### Onsite Clinical Content Review Options
- Multi-day intensive onsite
- Sequential days (back to back)
 - 2 or more Zynx clinicians (Regional Nursing Officers)
 - Concurrent rooms (population based)
 - Client SME participants:
 - Content experts (point of care clinicians)
 - Steering/project committee(s)
 - Specialty SME (i.e. wound care clinicians)
 - Clinical informatics
 - Key benefit
 - Critical mass of content customized rapidly



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