

STANFORD NURSING NEWS

Quarterly



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REPORT FROM ANA Annual Quality Conference

CHARLENE KELL AND CHRISTINE THOMPSON PRESENT A NURSE-LED MULTIDISCIPLINARY TEAM APPROACH TO IMPROVING HEART FAILURE PATIENT TRANSITIONS AND REDUCING READMISSIONS

Reducing avoidable readmissions for heart failure patients is a national imperative. Engagement of the multidisciplinary team is critical to effect a programmatic, patient-centered approach for improving processes related to preparing patients for successful self-management at home. These processes have improved care delivery and include identification of the patient cohort, early risk assessment, patient/family education using teach back, accurate medication reconciliation, follow up clinic appointments made prior to discharge and post discharge follow up calls.

Charlene Kell and Christine Thompson of Stanford Healthcare's Cardiovascular Health service line presented among national and international health care organizations at the 2015 Annual ANA Quality Conference in Lake Buena Vista, Florida this past February. Thompson and Kell reported how they led a multi-disciplinary team to improve heart failure patient outcomes. They formed a core team comprised of patients, frontline nurses, case managers, pharmacists and social workers. These collaborative groups were supported by Quality, Informatics and Analytics teams.

These workgroups met weekly to assess current-state and design future-state interventions. Weekly Clinical Effectiveness Council meetings were held to plan strategies and assess progress. Monthly nurse-led meetings with community partners (skilled nursing, home health, an outside clinic and patient volunteers) reviewed progress by work teams, and developed improved inter-facility communication processes and best-practice standards for heart failure care.



Cardiovascular Health Nurse Leaders Christine Thompson, MS RN CNS CCRN-K CHFNP and Charlene Kell, MBA, BSN, RN, CCRN, FACHE

A team-designed heart failure dashboard hardwired into the patient electronic medical record and other data sources provided virtually real-time process and outcome metrics. The dashboard data facilitated timely feedback to frontline clinicians and patient care managers for active daily management of nurse-sensitive interventions, such as use of teach back and timely completion of follow up phone calls.

The results were that our center's 30-day readmission rate for heart failure patients improved from 20% to 11% over 10 months after implementing all interventions, while 90-day readmissions decreased to 27% from 30%. Documented use of teach back by nurses for patient/family education improved from 20% to 90% over this period. Post-discharge phone call completion by

nurses improved by 20%; data analysis demonstrated a strong correlation between calls and reduced readmissions.

Many Stanford attendees reported that their presentation was evidence-based, engaging, and prompted a good discussion amount participants. Both Kell and Thompson noted that this might be because "this is something that comes from the heart - we live this every day".

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Stanford Healthcare's Nursing Department and Aging Adult Services was accredited with the NICHE Designation in 2012. NICHE (Nurses Improving Care for Health System Elders) is the leading nurse driven program designed to help hospitals and healthcare organizations improve the care of older adults.

Do you have a beloved grandparent or perhaps an aging parent? Is that special person vibrant and healthy? Full of life and wisdom? Can you imagine the day when she becomes ill, or needs hospital care? With an aging population of "baby boomers", the US Census Bureau projects that more than 1 in 5 Americans will be age 65 or older by 2030. This is a substantial increase from the current 13 percent. The vision of NICHE is for all patients 65 and over to be given sensitive and exemplary care. The mission of NICHE is to provide principles and tools to stimulate a change in the culture of healthcare facilities to achieve patient centered care for older adults. NICHE, based at NYU College of Nursing has over 620 hospitals and healthcare facilities in 46 states.

Stanford is proud of our NICHE Geriatric champions: Jovy Borja, RN, Barbara Ellis, RN, Shairstin Fierro, RN, Beverly Grenz, RN, Elsa Ilagan, RN Miriam Nasol, RN, Jackieline Nogot, RN, Charize Paular, Pam Schreiber, CNS, RN, Hazel Uy, RN, and Nicole Venturini, RN. These professionals are working hard to create best practices and share those across the enterprise. They have created evidence based care plans for delirium and for patients at high risk for delirium. The Champions are educating bedside nurses about medications that put elderly patients at risk for falls and delirium. They have many more plans for the coming year, and hope that nurse by nurse, unit by unit and finally at the whole institution level, we will continue making Stanford a safe and healing environment for our older patients.

Did you know that...?

- A healthy young adult with inactivity for 28 days loses 1 lb. of muscle mass.
- A healthy elderly person with inactivity for 10 days loses 2.2 lbs. of muscle mass.
- An inpatient elderly person, hospitalized for 3 days loses 2.2 lbs. of muscle mass.

This is why the concentration on mobility; nutrition and hydration become critical factors.

"Healthcare systems need to develop the competence of health professionals to care for geriatric patients." -The Joint Commission Report, 2008.

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Connect

Nancy Lee, MSN, RN, NEA-BC

WHAT'S GOOD FOR NURSES IS GOOD FOR PATIENTS AND HOSPITALS

Dr. Linda Aiken, kicked off the first Nursing Grand Rounds of 2015 with a message I feel is so important that I want to share it throughout our organization.

Dr. Aiken, Director of the [Center for Health Outcomes and Policy Research at the University of Pennsylvania](#), is the 2014 recipient of the National Academy of Science Institute of Medicine Lienhard Award for illuminating evidence that shows how nurses improve quality of health care and for informing health practices and policies. Her topic at Grand Rounds was "What's Good for Patients is Good for Nurses: Nurse Engagement and Satisfaction."

Drawing upon rigorous national research with 617 participating hospitals and more than 28,000 nurses, Dr. Aiken presented wide-ranging and compelling data linking engagement by nurses with better care for patients. "Outcomes for patients and outcomes for nurses are affected by common factors," she said. "What is good for one is good for the other."

Numerous examples provide evidence for this. High levels of nursing engagement are associated with positive patient satisfaction scores and increased levels of safety. Hospitals such as ours that attain the prestigious Magnet status have been shown to have the highest levels of nursing engagement, along with better outcomes for both patients and nurses.

"We have to be able to explain that nurses need to be involved in policy discussions not just for reasons of status, but because nurses are the single major intervention that impacts patient care," she said. "They are bringing information based on a body of knowledge and without their involvement, that knowledge is not there."

Dr. Aiken also noted that a key factor in nurse engagement is confidence that management will respond effectively to problems nurses identify in patient care. Where nurses can inform management, they are both more influential and more engaged. The data that all of this work is based on is the result of a survey sent to about 300,000 nurses. Look for the survey in your mailbox in the coming week or so. Be a part of the research.

"One of the reasons I like to come to Stanford is that you give me great ideas," she said in relation to SHC's focus on nurse engagement. We all have a great deal more to learn about this important topic in the coming months. I look forward to your feedback as part of our ongoing dialogue about what matters most –both for our patients and for SHC nurses.

LET ME KNOW WHAT YOU THINK! I want to hear from you with ideas, suggestions and comments, not only about this topic but any others. Feel free to email me any time at AskNancy@stanfordmed.org.



Service Excellence wants you to know...

Bryanna Gallaway

The Service Excellence Team provides expertise, analytics, education, and insight to integrate the patient voice into organization-wide programs and the daily work of our leaders to improve the SHC patient and family experience. As part of the larger Patient Experience Team at Stanford Health Care, the Service Excellence Team has two major responsibilities: (1) to capture the voice of our patients and their families and (2) to translate what they are saying into actionable plans by improving and developing patient and staff experience programs throughout the hospital, the clinics, University Healthcare Alliance, and eventually Valley Care.

The team's first responsibility is to ensure that we are capturing, and really hearing, the patient and family voice. We have various platforms through which we collect their voice: Press Ganey surveys, Same Day/Real Time Feedback collection, Empathy Mapping, C-I-CARE rounding feedback, social media, patient letters/comments, Patient and Family Advisory Councils, lean improvement work, grievances, SAFE reports, and service recovery entries. All of this data is then compiled into reports or dashboards by the Service Excellence Analytics and Reporting team and shared with the organization to help every individual area understand how they are performing based on actual patient and family experience.

The second part of the team's work is supporting and developing



programs that improve patient and family satisfaction based on experience data captured. One of the major programs that the Service Excellence Team supports is C-I-CARE. Since the introduction of C-I-CARE at Stanford in 2011, we have continuously seen our patient satisfaction "Likelihood to Recommend" (LTR) scores trend upward, with some areas improving from the 10th percentile to the 90th percentile!

The team continues to lead Kaizen (continuous improvement) events, like the Nursing Communication Workshops, to help specific units or departments further increase their patient satisfaction scores. In addition, the Service Excellence Team hosts support programs such as physician coaching and staff training, as well as recognition events for teams and individuals that continue to go above and beyond with C-I-CARE, one patient at a time.

Ask the Executive

Nurse Manager Center for Education and Professional Development, Susan Eller, MSN, RN

If you think you might recognize Susan Eller it could be because she comes to us most recently from Stanford University School of Medicine,



where she was the Director of the Immersive Learning Center. In addition to managing the operations of the center, Susan worked in conjunction with Associate Dean Dr. David Gaba and Assistant Dean Sandi Feaster to design and implement simulation instructor courses,

which focused primarily on debriefing methods and scenario development.

Prior to moving to the Bay Area from Chicago, Susan was the Director of Interprofessional Education at the Center for Education in Medicine at Feinberg School of Medicine at Northwestern in Chicago. Her main concentration there was teaching communication and teamwork skills, focusing on how to incorporate patient feedback, to nurses, residents, and medical students. Susan's clinical background is in emergency nursing, where she has extensive experience with nursing education, leadership,

and professional development at Northwestern Memorial Hospital.

Susan is excited to be sharing her expertise with a new area of Stanford Healthcare. Currently pursuing a PhD at Northwestern University, Susan's interests focus on the importance of the patient narrative in providing a context for their condition and treatment.

She gave the following reply when asked what she wanted nurses at Stanford to know about her, she replied,

"I remain committed to helping health care providers grow in both critical thinking and compassionate care proficiency. I am looking forward to meeting all of you and working with the CEPD team on building continuing education for healthcare professionals, nursing professional development, and our excellent life-support training and certification preparation programs.

To maintain SHC's national ranking as one of America's best hospitals, I believe we all must work together as a team that strives for excellence in providing cutting edge care, which not only includes having the most advanced technology, but also includes having the knowledge base and compassion needed to help us stand out from the rest each and every time".

Susan can be reached at seller@stanfordhealthcare.org

RN Resources

Webinars, articles, courses, good ideas & other things your fellow nurses want to share!



THIS IS WHO WE ARE Film Campaign

We are looking for YOU!

Our goal is to create a campaign that defines who we are as nurses in a series of films to inspire change. An experience that will capture hearts & minds.

Please visit our booth at Shared Leadership on March 9th to learn more about our amazing films to come.

Email: ndavis@stanfordhealthcare.org for more information.

A FEW BLOGS

A perspective on nursing via science, humanity and art
www.ajnofthecharts.com

Well written, evidence based and informative
www.youatthecenter.com

Evidence Based, engaging information on life balance

Entrepreneurial focus on the life of nurses

DID YOU KNOW THERE ARE OVER \$3 MILLION UNCLAIMED IN WELLNESS INCENTIVES?

We all can use the money that is available to us! Would you help us spread the word?

\$100 for all CRONA, Non-Stanford Health Care Alliance (SHCA), members who complete their Healthy Living Assessment (HRA) at HealthySteps.Limeade.com. CRONA non-SHCA members are not required to complete their biometrics.

- **\$500** for all CRONA SHCA and ALL other benefits enrolled employees of both hospitals who complete their FIRST STEPS by April 30th AND earn over 500 points. (\$1000 if just one other dependent is also enrolled as a beneficiary on the plan)

*At some point in our life each of us will encounter a nurse, whether it be as a patient or as a loved one. And that one encounter can mean the difference between suffering and peace; between chaos and order. **Nurses matter. The American Nurse Project***

NURSING GRAND ROUNDS

Refreshments at 3:00pm.

Presentation 3:30pm - 4:30pm.

Complimentary admission,
CA BRN 1 CE hour.

Held in LPCH Auditorium.

Please note new days
and dates for 2015:

- **Tuesday, March 24**
- **Tuesday, April 28**
- **Tuesday, May 28**
- **Tuesday, June 23**
- **Monday, July 27**
- **Tuesday, August 25**
- **Tuesday, September 27**
- **Tuesday, October 27**

Center for Education and Professional Development SUMMER 2015 COURSES

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|-------------|---|
| May 12 | Adult Critical Care Series: Cardiac Dysfunction |
| May 14 & 15 | Trauma Nursing Core Course (TNCC) |
| May 19 | Essentials of Caring for Blood & Marrow Transplant (BMT) Recipients |
| May 26 | Nurse Mentorship Workshop |
| May 28 | Advanced Communication Skills for Nurses |
| June 2 | Cultivating a Coach Mindset-A Skill Set for Leaders |
| June 4 | Adult Critical Care Series: Metabolic Dysfunction |
| June 5 | Essentials in ECG Rhythms |
| June 9 | Being Generationally Savvy: Learning and Leading Across the Generations |
| June 11 | Skilled Communication in the Healthcare Workplace |
| June 12 | Leveraging Talent Across Diversity: Best Practices for Engagement |
| July 7 | Skilled Communication for Nurses |
| July 8 | PICC/VAD Nursing Management |
| July 9 | Understanding Benner & Reviewing Exemplars |
| July 9 | Anatomy of an Exemplar |
| July 14 | Medical-Surgical Registered Nurse Certification Review - Day 1 |
| July 15 | Medical-Surgical Registered Nurse Certification Review - Day 2 |
| July 16 | Cardiac Emergencies: The Beat Must Go On |
| July 31 | How Healthy is Your Nursing Practice? Legal Issues in Health Care© |
| August 4 | Making the Most of Your Community Service |
| August 5 | Advanced Communication Skills for Nurses |
| August 11 | Nurse Mentorship Workshop |



For more information and to register:
www.cecenter.stanfordhospital.com

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Call for Authors

Something we should cover?
Want to write an article?
Brag about your colleagues?
Drop us a line at

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