

Every Patient, Every Experience, One Team

Improving Transfer of Care
from the ED to Inpatient Unit



Emergency Department
Throughput
Performance Improvement
Project

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System Director, Emergency Services

Project Leadership

- Deb Cronin-Waelde, RN, MSN,
NEA-BC, System Director,
Emergency Services
- Steven P. Sbardella, M.D., FACEP
System Medical Director, Quality
System, Chairman of Emergency
Medicine
- Ori Litvak
System Director, Process
Improvement

- Hallmark Health – Community Hospital System North of Boston
 - Non-academic, Non-profit
 - 2 acute care facilities
 - 234 licensed beds MWH
 - 134 licensed beds LMH
 - HHMA: multispecialty practice
 - Cancer Center
 - Hybrid medical staff model
 - Hospitalists
 - 70% admissions arrive through the ED
 - 65,000 ED visits per year
 - Meditech IS base system

“66% of medication errors occur during transitions in care”

“Aim to decrease errors during transitions of care by 20% by the end of 2013”



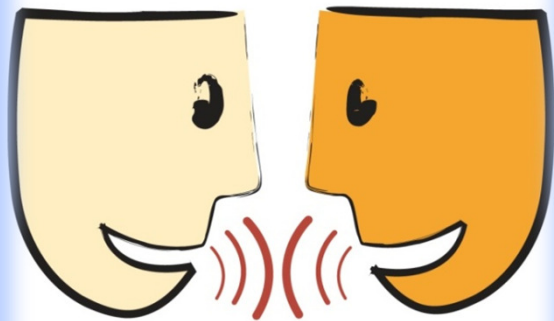
“If running relays were like patient handoffs, 4 in ten teams drop the baton”*



Medicare: 6600 Preventable Deaths, Monthly!



80% med errors
are related to
communication
and transitions





What happened your second
day on the job?

- Definitions and Metrics:
“the negotiation”
- What does “ready” for admission mean?
- What information is necessary transfer of care?
- Is there a standard practice?
- Who is responsible to transfer the patient?
- What does the patient really need during the first 8-12 hours?
- Are we transferring to a higher level of care?
- How often does a patient transfer to a higher level of care w/in 24 hrs. of inpatient arrival?
- What is the focus?
- What are we trying to accomplish?

Change of Shift Report (“before”)



Facility handoff – (“before”)



Are you all
set?



I'll tell
RN
getting
the PT

ED admissions project (“before”)



Warm Handoff



ED Admissions Project – “after”



ED Admissions Project – “after”

- 100% at the patient’s bedside in the ED
 - Physician/ Physician Assistant
 - ED Nurse
 - In-patient primary care nurse
 - Patient
 - Family

Monitoring and Mentoring

Direct observation +
Data Collection

Real time feedback



STANDARDIZED REPORT HAND-OFF

- Introduction of Team
- ID Band Check/2 Patient Identifiers
- Patient Presentation/Treatment in ED**
 - Working Diagnosis
 - Pertinent PMH & ED Course
 - Review of Holding and Admitting Orders
- Review of Pertinent Systems**
 - Neuro
 - Status of dysphagia screening
 - Mobility status
 - Cardiac (ECG with chart)
 - Respiratory (O2 flow/method)
 - GI (nausea, diet)
 - GU (Foley)
 - IV Fluids/Line Reconciliation
 - Pain
 - Skin
 - Vital Signs (actual/trend)
- Code Status
- Diagnostic Tests/Results**
 - Consults Pending
 - Specimens Sent/Required
 - Tests Pending
- Status of Documentation -Allergies & Home Meds
- Belongings Check – contents actually reviewed
- Status of Family Notification
- Status of Attending MD notification

ED RN signature _____ time _____

Inpatient RN signature _____

Part of Permanent Record: Do Not Discard

10/1/12

Date: _____ Time: _____ Observer: _____

Place
sticker
here

Place patient sticker here

HAND-OFF AUDIT TOOL

*If MD/PA is not at report, please STOP report and ask if MD/PA was invited. If MD/PA unable to attend, please note reason in comment section below orders.

	Done	Done out of sequence	not done
Introduction of Team	_____	_____	_____
ID Band Check/2 Patient Identifiers	_____	_____	_____
Patient Presentation/Treatment in ED			
Working Diagnosis	_____	_____	_____
Pertinent PMH & ED Course	_____	_____	_____
Review of Holding and Admitting Orders	_____	_____	_____
Review of Pertinent Systems			
Neuro	_____	_____	_____
Status of dysphagia screening	_____	_____	_____
Mobility status	_____	_____	_____
Cardiac (ECG with chart)	_____	_____	_____
Respiratory (O2 flow/method)	_____	_____	_____
GI (nausea, diet)	_____	_____	_____
GU (Foley)	_____	_____	_____
IV Fluids/Line Reconciliation	_____	_____	_____
Pain	_____	_____	_____
Skin	_____	_____	_____
Vital Signs (actual/trend)	_____	_____	_____
Code Status	_____	_____	_____
Diagnostic Tests/Results			
Consults Pending	_____	_____	_____
Specimens Sent/Required	_____	_____	_____
Tests Pending	_____	_____	_____
Status of Documentation -Allergies & Home Meds	_____	_____	_____
Belongings Check – contents actually reviewed	_____	_____	_____
Status of Family Notification	_____	_____	_____
Status of attending MD notification	_____	_____	_____

Positive feedback given: _____

Constructive feedback given: _____

Comments: _____

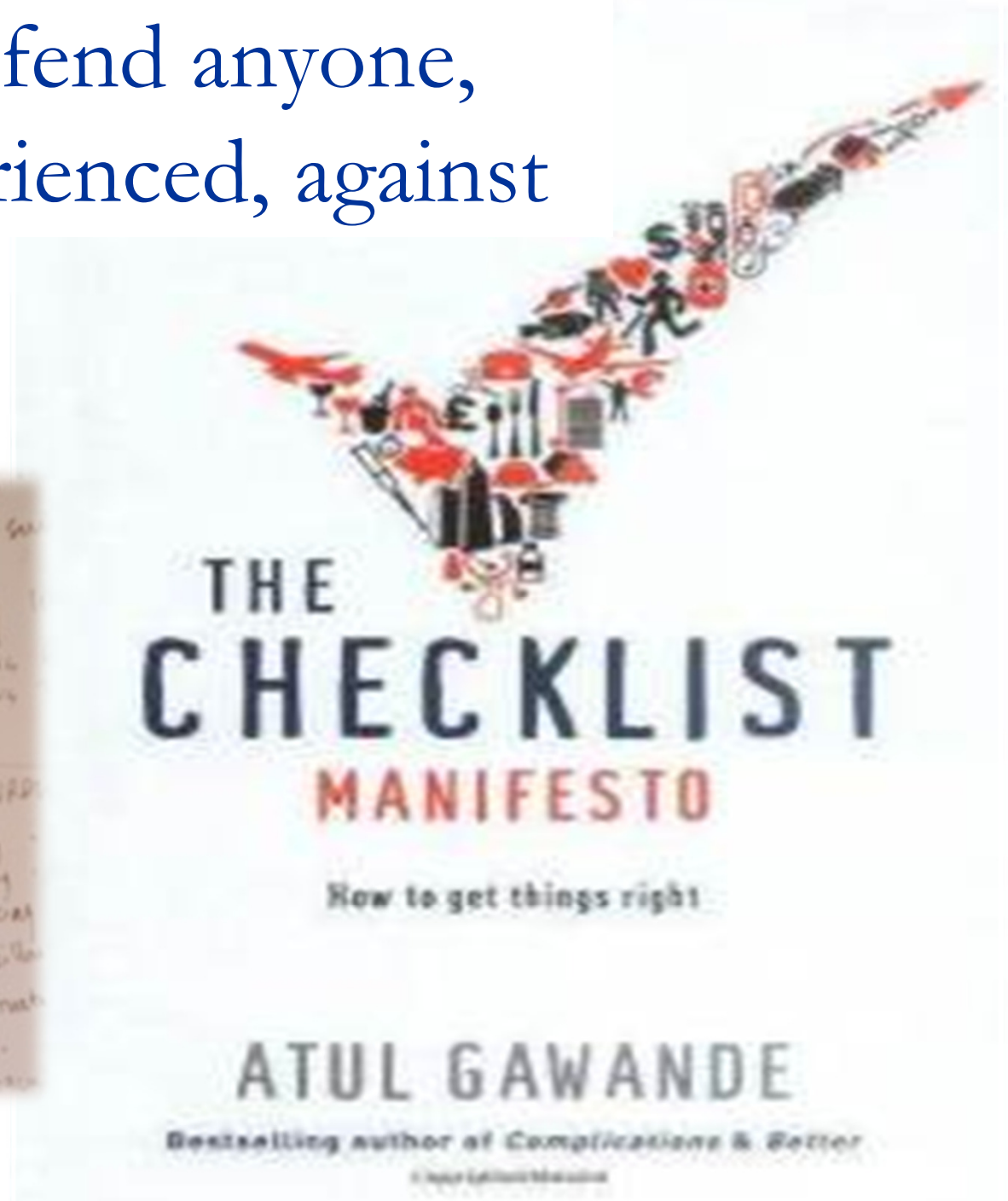
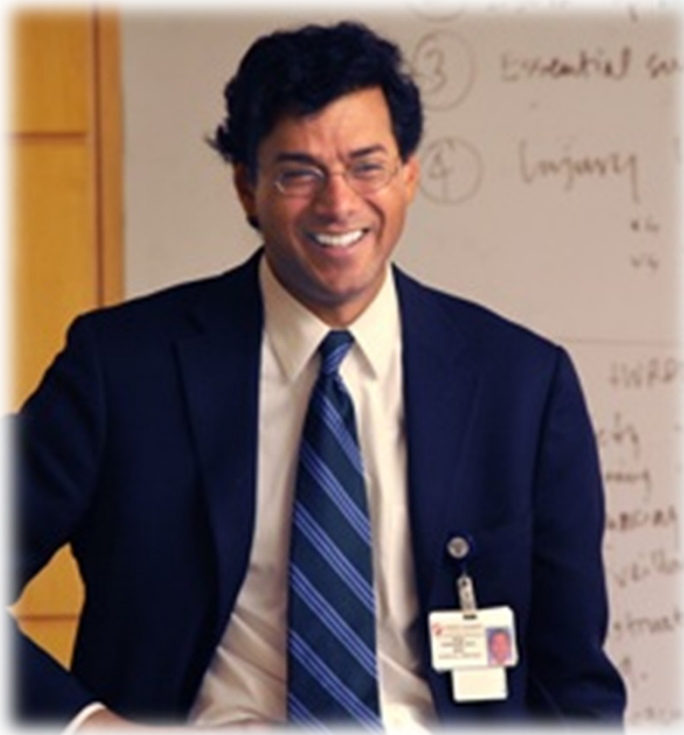
ED RN name _____

Inpatient RN name _____

ED medical provider name _____

10/1/12

“Checklists defend anyone,
even the experienced, against
failure”



Do you want to make a mark
on someone's life, or just do
the tasks the rest of your
career?
~Steve Jobs ~

Thank You!



Questions?