

Renfrew Victoria Hospital

Implementation of a Functional Abilities Measurement Tool

TEAM MEMBER NAMES:

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Renfrew Victoria Hospital



- Located approximately one hour west of Ottawa
- 55 inpatient beds with a 3 bed level II ICU
- 30,000 emergency department visits per year
- Regional Nephrology Program, Sexual Assault Program and Addiction Treatment Services that serves all of Renfrew County
- Satellite Systemic Therapy Unit of the Regional Cancer Centre in Ottawa
- Addiction Treatment Services that serves all of Renfrew County

Complex Continuing Care Unit



- The Renfrew Victoria Hospital Continuing Care Unit is a 24-bed department with occupancy greater than 90%.
- The patient population being CCC, ALC, Active and Palliation, average age >65 years
- Our interdisciplinary team includes Medicine, Nursing, SLP, RD, Recreation Therapy and PT.

AIM STATEMENT

- By January 1, 2016, 80% of in-patients admitted to the Continuing Care Unit over the age of 65 at RVH will be assessed within 48 hrs of admission and discharge with the Barthel Index. (if LOS is less than 48 hrs, patients are excluded)

MEASURES

- **Outcome:**

- % of in-patients over age 65 with LOS >48hrs with no functional decline as assessed by Barthel Index.

- **Process:**

- % of in-patients over age 65 with LOS >48hrs who were assessed within 48 hours of admission and discharge using the Barthel Index*

- **Balancing:**

- Increased LOS based on Barthel Index Score
- Altered discharge destination based on Barthel Score

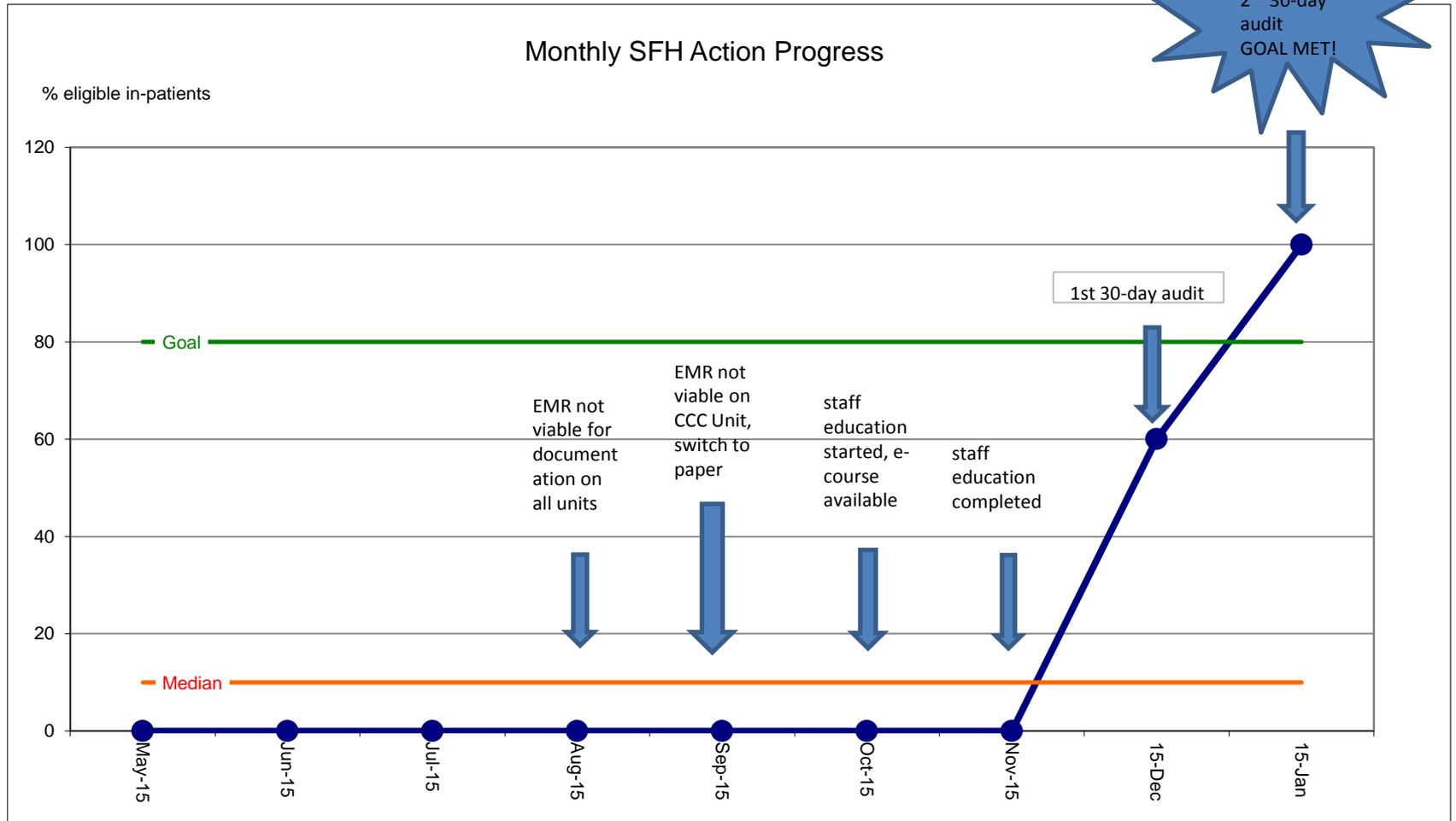
CHANGES

- June 2015
 - Adopted education plan for staff: in-person training for champions x 1 hour and an online power point presentation with quiz for all staff
 - Met with unit managers to discuss project impact on in-patient units and recruitment of champions
- August 2015
 - Abandoned plan to implement Barthel Index hospital wide due to limitations in availability of EMR on all units: altered aim statement
 - Adapted education plan based on PDSA with select staff; submitted presentation to convert to online module.

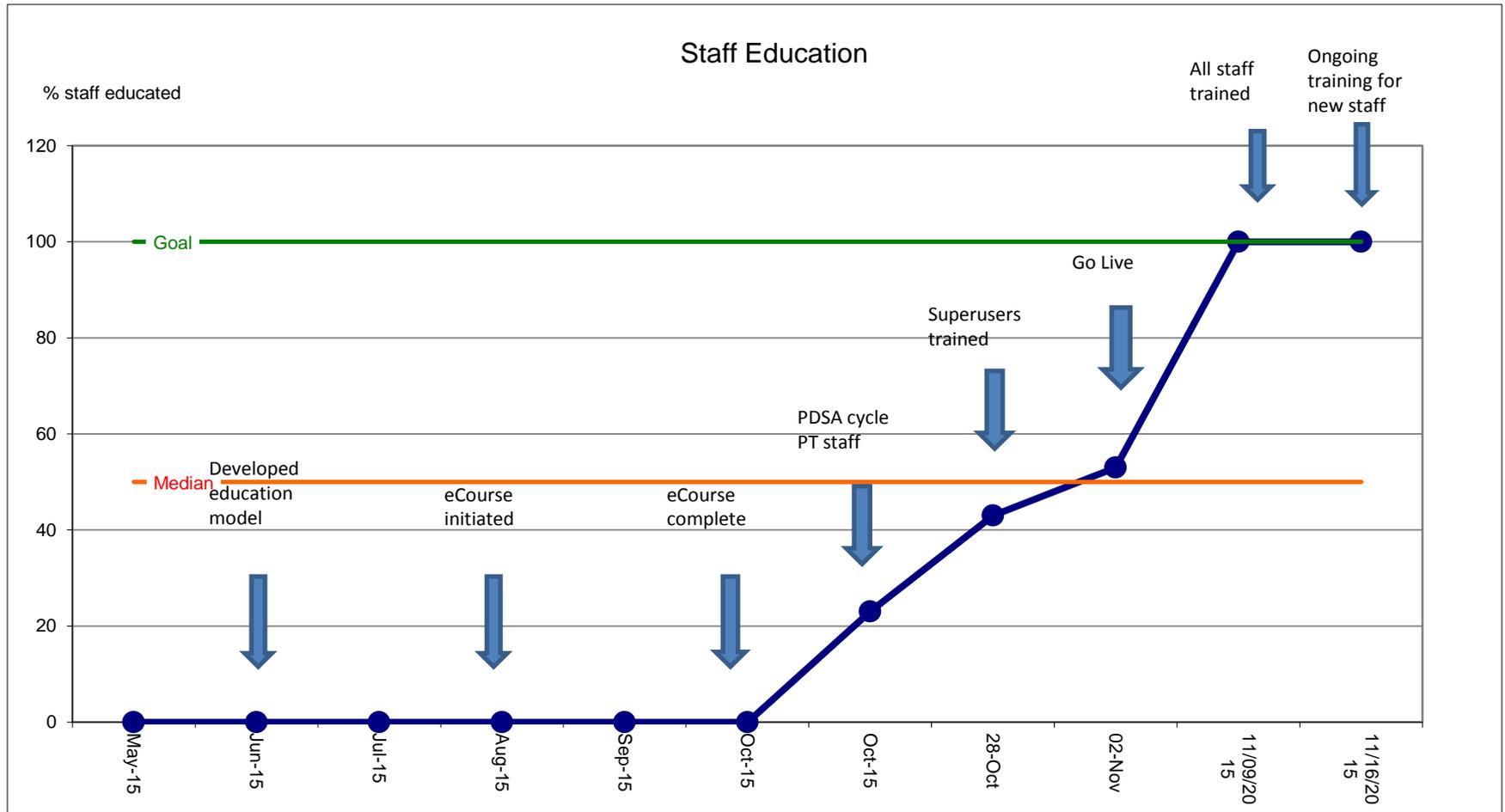
CHANGES

- November 2015
 - Adopted implementation of the Barthel Index tool on CCU starting Nov 9/15.
 - Adopted Audit tool Nov 25/15
- December 2015
 - Re-assessed and better defined the exclusion criteria for patients discharged to palliative care programs or hospice (Functional Assessment with Barthel Index will not take place for these patients)

RESULTS



RESULTS



NEXT STEPS

- Continue with monthly audits until June 2016
 - Consider ongoing quarterly audits if 80% compliance is maintained
- Continue to educate new/returning staff
- Edit Barthel Index Form to include exclusion criteria and space for staff initials beside each domain
- Edit nursing admission/discharge checklists to include Barthel Index

LESSONS LEARNED

- Online education facilitated speed of education for staff
 - Staff reported it was very user friendly and clear, excellent education results
- Initially planned to implement via EMR, but due to circumstances beyond the scope of the project, had to adapt to paper and alter methodology
 - Flexibility is key in moving forward with any project

KEY CHALLENGES

- EMR not available as planned to start documentation
 - Adapted plan to change to paper copy, solicited staff feed back, PDSA cycle
- Did not anticipate resistance to implementation on active care
 - Plan to begin awareness campaign about the importance of early intervention to prevent functional decline

KEY CHALLENGES

- More difficult than anticipated to recruit champions/super users
 - Asked opinion leaders for input
 - Approached specific staff to become champions
- Difficult to measure initial compliance in completing the tool.
 - Unit manager spent more time on unit and at AM rounds to engage staff
- Changes in staffing reduced available time for team members to work on project
 - Split responsibilities between team members, more communication via email than in-person

TIPS FOR OTHER TEAMS

- **LEVERAGE TECHNOLOGY:** Education with online resource was an efficient and effective way to train staff quickly
- **THINK BIG:** even with minimal resources (i.e. no unit specific educators, no dedicated time or staff or funding) it is possible to make a change

Thank You!

