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# **Patient Care News**

February 2011 Volume 32, Issue 2

St. Cloud Hospital, 1406 6<sup>th</sup> Avenue, St. Cloud, MN 56303

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# Heart Failure Core Measures and DC Instructions: Did you know?

Jeanne DelZoppo, RN SCH Heart Failure Task Force

When a patient/caregiver is refusing to sign the DMI, this should be written in on the DMI. In addition, please have the discharging RN/LPN sign and date the document. A hospital representative's signature, along with the patient's name and Medical Record Number (MRN) on the DMI document is sufficient to meet the core measure requirement in the event that there is a refusal to sign the DMI. While this requirement is essential for core measures, it is also good practice for ALL discharges.

Remember, too, that it is key to document on the Interdisciplinary Teaching Record (ITR) that the Discharge Instructions which include activity, diet, follow-up, what to do if symptoms worsen and weight monitoring must be entered on the ITR as being provided to the pt/caregiver in WRITTEN format (i.e., choose "literature") Documentation for these items provided as an "explanation" is not sufficient to meet the core measures guidelines. We must show evidence that a copy of the WRITTEN materials was provided.

# **Replacing PICC Lines**

St. Cloud Hospital Imaging Department

PICC lines may occasionally be damaged (fractured or ruptured), when using sharp objects such as scissor or scalpel around PICC lines, twisting or bending of catheter when changing caps, using excessive force when flushing of occluded catheter, or manipulation or catching external part of catheter on an object. PICC repair is intended by the manufacturer for situations when the catheter has not been potentially contaminated such as accidentally cutting the catheter during insertion (under sterile conditions) or doing a dressing change (also under sterile conditions).

The manufacturer does not make a repair kit for Power PICCs or double lumen Groshong catheters. Manufacturers recommend that any time the PICC catheter could be potentially contaminated, the PICC line should always be replaced rather than repaired.

After consulting with Ellen Simonson, Infection Control Specialist for SCH, CDC guidelines for the prevention of Central Line Infections, Infusion Nurses Society guidelines, vascular access expert and manufacturer recommendations, St. Cloud Hospital Imaging Department recommends that all PICC lines should be replaced rather than repaired.

# Research Article Review:

Submitted by: Roberta Basol MA, RN, NE-BC

Each month the Nursing Research Committee submits a nursing research article to the Patient Care News. The purpose of this entry is to stimulate the inquiring nurses' mind and raise awareness of published research. Please review the following summary about a study on patient-nurse relationships.

Duffy, J. & Brewer, B. (2010). Feasibility of a multi-institution collaborative to improve patient-nurse relationship quality. *The Journal of Nursing Administration*, 41(2), 78-83.

The Relationship Based Care policy has been recently introduced at St. Cloud Hospital, therefore this article peaked my interest. The authors point out it is well known that the patient-nurse relationship has increasingly been linked to several hospitalized patient outcomes, namely, patient satisfaction, decreased anxiety, increased knowledge, improved functional status and decreased symptom distress, authentic self-expression, sense of well-being, optimism, and trust in nurses. Patients and families want and value this relationship, yet system barriers, clinicians' characteristics, and current quality improvement processes limit its consistent application.

The objective of the study was to assess the feasibility of a multi-institution quality improvement collaborative to improve patient-nurse relationship quality. The authors selected the Caring Assessment Tool (CAT) to assess the quality of patient-RN relationships, the effectiveness of professional practice models, and to provide support for RN professional advancement. Patients from 12 hospitals in 4 distinct areas of the United States comprised the sample. On a quarterly basis, a 1-page demographic form and the CAT version IV were administered to a random sample of the participating unit's patient population until a minimum of 5 patients per unit was sampled. The 12 collaborating hospitals used the reports to identify areas for improvement, change practice, and distinguish best practices. Feasibility of the collaborative was analyzed by examining the timeliness of data collection and entry, the quality of data submitted, the utility of the information as perceived by nursing directors, and associated burdens.

The researchers discovered there were burdens associated with a multi-site study such as incomplete CAT tools and failure to return them in a timely manner. Despite the burden, chief nursing officers, clinical specialists, and directors of nursing research at the clinical sites found the reports useful and used the data provided on a quarterly basis to recognize and educate nurses about patient-nurse relationships. Use of the CAT as an indicator of patient-centered care and a measure of patient-nurse relationship quality is a convenient method for obtaining patient feedback during hospitalization. Maybe you would like to investigate patient-nurse relationships with the CAT tool.

# St. Cloud Hospital Welcomes New Nurse Practitioners

St. Cloud Hospital Communications Department

Please welcome Chelsey Kontenzko, RN, FNP and Betsy Moga, RN, FNP, who have joined the Hospitalist Program at St. Cloud Hospital. Kontenzko received her bachelor of science degree in nursing at University of Mary in Bismarck, ND and a master's degree in nursing from College of St. Scholastica in Duluth. Moga received her bachelor of science degree in nursing at College of St. Benedict in St. Joseph and a master's degree in nursing from Metropolitan State University in St. Paul.

Chelsey Kontenzko RN, FNP

Betsy Moga RN, FNP

# Clinical Ladder

Congratulations to the following individuals for achieving/maintaining their Clinical Ladder status.

### Level III

# Jessica Reid, RNC Surgical Care

- Certified Medical Surgical Nurse
- Preceptor
- PI Auditor of Nursing Practice Safety Goals

# Rae Buschette, RN Telemetry

- Presenter: Biphasic Defibrillator & External Pacer
- Preceptor
- Poster: Cardiac Amyloidosis & On/Off Pump

# Desiree Fuecker, RN Perioperative Services

- Chair of Perioperative Services Open House 2010
- Preceptor
- PI Skin Integrity Audit

## Angie Kiffmeyer, RNC, BSN Surgical Care

- PI Patient Satisfaction Audit
- Certified Medical-Surgical Nurse
- Epic Super User Committee

## Jenine Graham, RN, BSN Medical 2

- Certified Medical-Surgical Nurse
- Barcode Super User
- Nursing Instructor Brochure Creation

#### Elaine Prom, RNC, BSN Center for Surgical Care

- Champion: Order Set Updates
- Certified Medical-Surgical Nurse
- Sigma Theta Tau Member

#### Char Haber, RN Center for Surgical Care

- Planning Committee: Perioperative Education Workshop
- Trainer: DAR Format
- Barcode Super User

#### Janelle Maciej, RN, BSN Telemetry

- Nursing Research Committee
- PI Committee
- Clinical Ladder Committee

## Janet Nelson, RN Family Birthing

- Maternal Care Committee
- Barcode Super User
- Poster: Malignant Hyperthermia

#### Jane Austing, RN, BSN Perioperative Services

- Nursing Practice CC
- Presenter: Omnicell Delivery System
- Epic Super User

#### Melanie Ashfeld, RN, BSN Patient Care Support

- Float Pool Committee
- Community Presenter: Antidepressants in Geriatrics
- Sigma Theta Tau Member

#### Erin Jabs, RN, BSN Medical 2/MPCU

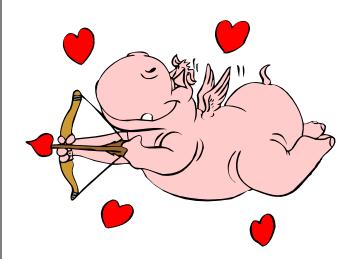
- PI Auditor of Restraint Use
- Poster: Restraint Use and Documentation
- Poster: Electrolyte Imbalance: Magnesium

#### Sarah Ringler, RN Adult Mental Health

- Co-Presenter: Stages of Change
- Preceptor
- Tutorial: Use of Spit-masks

#### Diane Harms, RN, BSN Post Anesthesia Care

- Presenter: Ed Day Mechanical Ventilation
- Barcode Super User
- Perianesthesia Super User



Happy Valentine's Day!