

# Quality Residency Capstone

Mary Lanning Healthcare
Joanna Fink, BSN, RN, LSSGB
November 2022

## **Team**

- Chief Nursing Officer (CNO)
- Quality Director
- Inpatient Nurse Leaders
- Inpatient Quality Coordinator (IQC)
- Frontline Staff



## **AIM Statement**

 By December 2022, Mary Lanning inpatient units will improve our pain documentation compliance in the electronic medical record (EMR) by 10% from baseline year 2021.



#### Measures

- <u>Definition</u>: PRN pain medication administration documentation at ordered range or documentation for alternative reasons.
- Goal: 10% increase from baseline.
- <u>Data Collection Plan</u>: Audit 20 live charts per department per week.



# Criteria for Compliance

OXYCODONE (ROXICODONE) immediate release tablet 5 mg @ Dose: 5 mg : Oral : Every 3 hours PRN : Severe Pain

#### **Order Information**

Product Instructions:

## SCHMID ##

Ordered Admin Dose: 1 tablet (1 × 5 mg tablet)

Last Admin: Yesterday 09/21/22 at 0809 (Given)

Dispense Location: MEDSURG1 ADS References: MLH Lexicomp

Frequency: Every 3 hours PRN

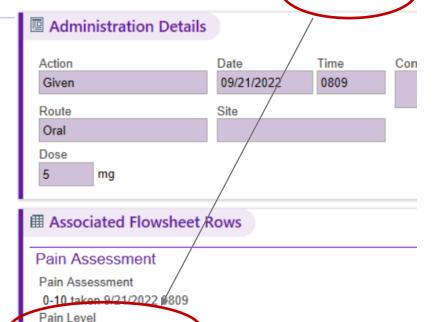
Route: Oral Ordered Dose: 5 mg

Order Start Time: 09/18/22 at 1030 PRN Reasons: Severe Pain

Order ID: 596256710

Recent Actions

09/20 09/21 1654 0008 0809 Given Given Given



10 taken 9/21/2022 0809



# Audit Example

Nursing Documentation Audit Tool: LIVE Chart	ی		٠			2
Previous 24 hours MRN	123456	234561	345618	ASO 1889	gerles	8765A3
PCU.Peds Date	19-Sep	20-Sep	20-Sep	20-Sep	20-Sep	21-Sep
Pain						
Was the correct range pain med given per patient pain?	n	n	n	У	У	у
	Staff	Staff	Staff			
	Nurse 1	Nurse 2	Nurse 3			



# Selecting Changes

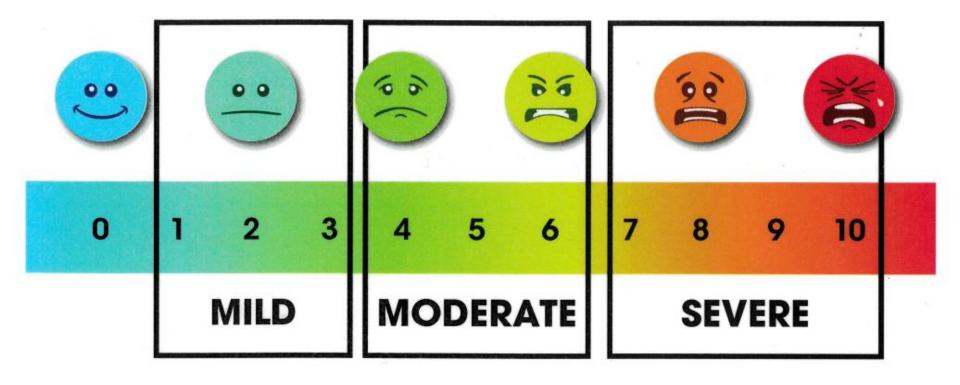
- Focus on accurate documentation:
  - Education to staff on what pain ranges are.
  - Education to staff on where to document alternatives.
- Reminders to staff:
  - Discussion in Weekly Emails.
  - IQC presenting at department meetings.
  - Share individual pain reassessment scores monthly.
  - Visual reminders of ranges.



## Visual Reminder



#### Pain Scale



### **PDSA**

- <u>Plan</u>: Staff will correctly document administration of PRN pain medications.
- <u>Do</u>: IQC will complete live chart audits.
- Study: IQC will identify staff trends in medication documentation.
- <u>Act</u>: Quality will share results with Leaders and Staff members; providing re-education as needed.

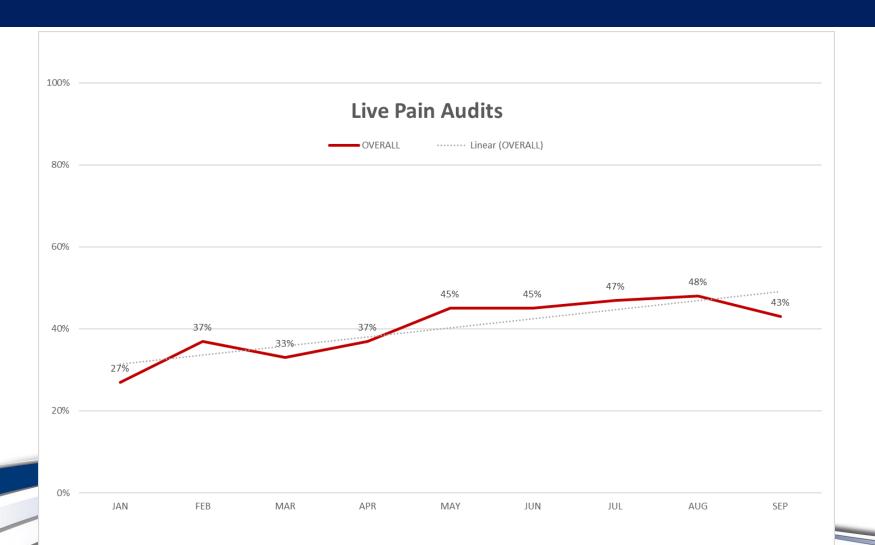


# Implementing Change

- Live chart audits completed.
  - Nurses had a 16% rise in documentation compliance.
- Discussed results at Nurse Leaders and Unit Meetings.
- Education slides shared with Nurse Leaders and frontline staff.



# Data





# **Spreading Changes**

- Our change has not been hardwired yet.
- We will continue to focus on improving our documentation.
- Next steps will be to look at improving documentation on:
  - Establishing a pain goal on admission.
  - Care plans documented every shift.



## **Questions?**

Joanna Fink
Inpatient Quality Coordinator
Mary Lanning Healthcare

jfink@marylanning.org

402-314-0261



#### References

- IHI: The Science of Improvement: How to Improve http://www.ihi.org/resources/Pages/HowtoImprove/ScienceofImproveme ntHowtoImprove.aspx
- Langley GL, Nolan KM, Nolan TW, Norman CL, Provost LP. <u>The Improvement Guide: A Practical Approach to Enhancing Organizational Performance</u> (2nd edition). San Francisco: Jossey-Bass Publishers; 2009.
- The Plan-Do-Study-Act (PDSA) cycle was published by W. Edwards Deming in <u>The New Economics for Industry, Government, and Education</u>
  [Cambridge, MA: The MIT Press; 2000]. For more on the development of the PDSA cycle and how it differs from PDCA, see: Moen RD, Norman CL. <u>Circling back: Clearing up myths about the Deming cycle and seeing how it keeps evolving. Quality Progress</u>. November 2010.

