

"The goal of the electronic board is to use visual management to show important patient information so that it can be updated regularly, seen at a glance and save clinicians time searching for information."

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Mount Sinai Hospital

Ontario, Canada

Mount Sinai Hospital is improving patient outcomes



Using electronic documentation to identify patients at risk

Overview

Mount Sinai Hospital (MSH) is one of Canada's preeminent patient care, research and academic health science centres and is recognized as one of Greater Toronto's Top Employers by Canada's Top 100 Employers.

Mount Sinai focuses on three organizational goals:

- Patient and family-centred care
- Increasing its role as an academic health sciences centre and teaching hospital fully affiliated with the University of Toronto
- Enhancing community health partnerships

The "Excellent Care for All Act" in Ontario has ensured that citizens can expect a transparent and high-quality health care system. Hospital funding models have shifted, moving away from global funding to specific patient populations with a focus on patient outcomes, evidence-based care and quality health services.

To meet the "Excellent Care for All Act," MSH has incorporated a strategy focused on patient experience and increased performance measurement.

In 2011, MSH harnessed the benefits of Cerner PowerChart® and targeted quality improvement initiatives including Releasing Time to Care® (RTC). RTC is a quality improvement initiative that focuses on improving the staff and patient experience.

The overall goal of RTC is to remove "waste" and non-value added work so clinicians can spend more time providing direct care to patients. One of the 11 modules in the RTC initiative is a foundation module called Patient Status at a Glance (PSAG).

PSAG focuses on using visual management to show important patient information so that it can be updated regularly, seen at a glance and save clinicians time searching for information.

The electronic white board was a top priority for MSH when implementing the PSAG module. These solutions provide access to tools that promote patient safety and real-time clinical data.

Ask Us About

- Cerner PowerChart®
- Releasing Time to Care[®]
- Registration Management
- Cerner PharmNet®



Mount Sinai Hospital Partnered with Cerner to deliver high-quality care and timely interventions

Nurses on all medical and surgical units at MSH have been documenting the processes and outcomes of their care in Cerner PowerChart for eight years.

Quality nursing documentation is a cornerstone of MSH's Cerner electronic health record and is essential to improving safety, coordination of care, productivity and quality improvement. Electronic clinical documentation in Cerner PowerChart enables nurses to capture patient-specific data that is then sent to a unit-based whiteboard, enabling clinicians to easily identify patients at risk for common occurrences during hospital stays.

With creative use of graphics and color, this data identifies patients at risk for falls as documented on the Morse Falls Risk form or skin ulcers noted on the Braden Scale. Pain scores, confusion assessments, length of stay and isolation are a few of the examples displayed on the whiteboard solution.

Since implementation, MSH has shown sustained improvement in the rate of falls and pressure ulcers.

Cerner is a key partner with Mount Sinai Hospital. MSH chose Cerner solutions because they provided the best scheduling functionality, configuration flexibility, user interface, reporting and dictation/transcription capabilities.

Challenges requiring solutions

- Outdated electronic whiteboard solutions that don't show complete patient data
- Inability to recognize patients at risk for specific outcomes such as pain, falls or skin ulcers

 Lack of real-time electronic clinical documentation data

Accomplishments and benefits

Since the implementation of the electronic white board, there has been improvement in the rates of falls and pressures sores. At the daily safety huddle, clinicians refer to the electronic white board to identify patients who are high risk for falls and pressure sores.

These high risk patients are easy to detect (at a glance) as they are highlighted in red on the display monitor. Once these high risk patients are identified, clinicians implement best practices (RNAO BPGs for falls and pressure ulcers).

The important data that is pulled from the clinical documentation is now on display for all clinicians to see and is used every day to improve practice and patient outcomes.



