Using Technology to Maintain Behavioral Health Safety Rounding and Nursing Workflows

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Center for Behavioral Health

- Center for Behavioral Health has 14 Behavioral Health Inpatient Units on 6 of the 14 CCF Ohio campuses offering:
  - Child and Adolescent // Adult// Geriatric // Alcohol and Drug= 267 Beds

- After conducting our annual multi-level environmental and clinical assessments on each of the 14 behavioral health inpatient units we ranked our opportunities to improve our service delivery care models
  - 15 minute rounding was one of many areas identified for improvement

- But who would of even thought developing an “app on I-phone 6 and interface that with the electronic medical record (EPIC)” was even possible
Cleveland Clinic Health System
Center for Behavioral Health

• Some of the learns-
  • Invite the floor nurses to participation with tweaking the application as the paperless 15 minute devise piloted

• Listening to the end user on the ease of the devise (5 vs 6)

• Educate the patients that staff will be looking like they are hanging on the I-phones

• Real time charting offers accountability and reliability for data collection

• Spending time with nursing informatics to fully under the issues and work flows we are attempting to resolve
Purpose

• Enhance patient and caregiver safety in Behavioral Health settings
• Leverage technology to automate the manual paper rounding checklist
• Develop a tool to assist with accountability of patient safety rounds
• Visually prioritize patients who need to be seen next
• Document patient safety rounds directly into the electronic medical record (EMR) in real time
• Increase the efficiency of required fifteen minute patient safety rounds in behavioral health units
• Rounding data interfaces into EMR eliminating the need for physical paper storage
Documenting on Paper

- Two hands
- Head down
- Distracted
- Intensive data entry
- Manual prioritization
Meet the Team

• Caregivers

• Technology leadership
  • Nursing Informatics-ACNO, Liaison and Analysts
  • Clinical Solutions Center-Management and Analyst team

• Nursing Leadership
  • CNO
  • Directors and Managers
  • Assistant Clinical Managers
Scope - Behavioral Health (BH) Units at Marymount

<table>
<thead>
<tr>
<th>Unit</th>
<th>Specialty</th>
<th>Bed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gero</td>
<td>Geriatric</td>
<td>28</td>
</tr>
<tr>
<td>BHC1</td>
<td>Adult</td>
<td>18</td>
</tr>
<tr>
<td>BHCG</td>
<td>Adult</td>
<td>18</td>
</tr>
</tbody>
</table>
Each Inpatient Behavioral Health Unit shall receive and identify locations for:

- 2 iPhones/unit
- 2 chargers/unit
- Equipment cleaning process and expected frequency
Staff Education: Standardized across facilities

- All caregivers require education; Future considerations for frequently floated staff to be trained at a later date.
- Estimated time approximately 15 minutes done on units
- Mandatory
- Device User agreement Method / content
- Instructors-Clinical systems support, Liaisons & NI team.
- Handouts-Job
iPhone / IRIS Application Education Needs:

Login and logout into the IRIS APP on the iPhone using your Epic sign on / password

Hold down the patient name to open the documentation screen

Document:

• Real time
• Location
• Behavior
• App Refreshes every minute

Can document in the past indefinitely but never into the future
iPhone needs to be connected to CCF Secure Wireless Network for IRIS to be able to be used.

Tap the IRIS icon on the iPhone with your finger to open your login screen.

Login to IRIS using your Epic ID (U123456) and password.
**Initial Iris Screen**

1. **Inpatients** – allows access to Inpatient Hospital lists where you will be selecting your unit and patients.
2. **Logout** - will log you out of the Iris Application completely. ALWAYS log out of Iris at the completion of your rounding time.
Selecting the Correct Unit
Hospital Nursing System Lists Available

Scroll down and tap on Hospital specific list

Locate unit and tap on the unit you will be documenting on
Completing BH Patient Safety Rounds Documentation

Let's Round!
Timer Features
Notification Tools

Image of a smartphone screen showing a notification for "Behavioral Health Filing Reminder - Bed: LU-3B-325B-01".
How Data is viewed in EPIC

<table>
<thead>
<tr>
<th>Behavioral Health Rounding</th>
<th>1518</th>
<th>1530</th>
<th>1549</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time of Round</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient Location</td>
<td>GP</td>
<td>RA</td>
<td>RA</td>
</tr>
<tr>
<td>Patient Status</td>
<td>OU</td>
<td>AC</td>
<td>AC</td>
</tr>
<tr>
<td>Overdue (1)</td>
<td>Completed (17)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------</td>
<td>----------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BH Rounding 0230 - 0245</td>
<td>BH Rounding 0245 - 0300</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0300 - 0315</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0315 - 0330</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0330 - 0345</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0345 - 0400</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0400 - 0415</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0415 - 0430</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0430 - 0445</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0445 - 0500</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0500 - 0515</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0515 - 0530</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0530 - 0545</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0545 - 0600</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0600 - 0615</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0615 - 0630</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0630 - 0645</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0645 - 0700</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Summary Report

<table>
<thead>
<tr>
<th>Behavioral Health Rounding</th>
<th>10/17/17 0844</th>
<th>10/17/17 0834</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Location</td>
<td>Room Sleeping</td>
<td>Room Sleeping</td>
</tr>
</tbody>
</table>
My List Column

- Hallway (15m ago)
- Day Area (13m ago)
- Room Sleeping (13m ago)
- Room Sleeping (12m ago)
- Room Awake (2m ago)
- Group Room (2m ago)
Communication(s):

- Leadership
- NOM (train for backup in code violets)
- Information Technology
- Behavioral Health inpatient units
- Project team planning and status calls
Reminders to Staff

iPhone needs to be connected to a CCF Secure Wireless Network for Iris to be able to be used.

Check the battery charge % on the iPhone, if <25%, plug it in to be charged, and use another iPhone.
Downtime Process

• Utilize current paper form followed by newly developed form once approved and available
• Add paper form to the DT form list to print on demand
• Forms will be changed to Individual patients so that they will be scanned into Epic chart and no longer need to be stored.
Go Live!

• 2 iPhone 5’s were given to each Marymount floor
  • One to be used at a time
  • The second readily charged and available
  • Nursing Informatics and the ECSC teams supported each floor
“Tech support says the problem is located somewhere between the keyboard and my chair.”
Issues

- Not everyone has touched a touch screen
- Stylet Vs Finger tips
- Multitasking had been eliminated
- Gero is a 28 bed unit-largest unit to go live on this project
- Loss of Wi-Fi connection
- Admissions were missed until admitted or needed to be on paper
- Seclusion was not always 1:1
- Off unit went overdue-visual they did not need
- Yellow at 8 minutes causing anxiety
Quick Win Solutions

- User able to change font to improve “touch” abilities
Quick Wins (continued)

Documenting Safety Rounds from the Interventions Flowsheet
  • Geography of Gero unit much larger
  • Patient care included meal sharing in the Day area

Caregivers are able to assist with documentation of safety rounds by entering the checks on the Interventions Flowsheet
iPhone needs to be connected to a CCF Secure Wireless Network for Iris to be able to be used.

Check the battery charge % on the iPhone, if <25%, plug it in to be charged, and use another iPhone.
Wi Fi Connection

• Quickly learned that the iPhone 5 did not have the capability to switch connections

• Upgraded to iPhone 6
The Best Feedback is from the Bedside
Special Circumstances

• 1:1 Does not need Q15minute rounding
• Off unit does not require rounding
• Moved to Bottom of list to be available
Optimizations

• Use of “Seclusion Room” option, will not suspend the patient and will keep the patient on the timer sequence for safety rounds to be completed.

• Admissions will appear at the bottom of the patient list.

• The current time automatically populates when the “save” option is selected. (No past or future documentation is available in Iris).

• A late entry is entered in Epic on the flowsheet and a comment can be added using the paper icon.

• One handed documentation possible with Iphone 6 vs Plus
Timer Changes

- Admit-First round = Light blue
- 15+ min = Red
- 9-14 min = Yellow
- 0-8 min = Green
- 12 min = device buzzes with a warning that the fifteen minute time is approaching
- 1:1 patients or off unit = Dark blue
Clinical Impacts

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Rounds Documented</th>
<th>Time to round on all patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>652,894</td>
<td>14 min 6 sec</td>
</tr>
<tr>
<td>B</td>
<td>51,863</td>
<td>13 min 7 sec</td>
</tr>
<tr>
<td>C</td>
<td>572,769</td>
<td>12 min 8 sec</td>
</tr>
<tr>
<td>D</td>
<td>138,766</td>
<td>12 min 0 sec</td>
</tr>
</tbody>
</table>
Mobile Application

- One handed
- Face forward
- Able to interact with patient
- Quick data entry
- Automated prioritization
Time and cost savings

• Standardized documentation of the location field making the application user friendly and interactive
• Less paper forms to manage and store
• Prioritization of the rounding sequence is visualized to easily determine which patient to round on next
Clinical Impacts

• Enhanced patient and caregiver safety by promoting a process that allows the caregiver to have heightened awareness of the environment and visualization of the patient
• Increased efficiency of the rounding process and interaction with the patient
• Patient information is legible, filed in real time, and accessible within the EMR and through reports
• Standardization of the rounding process within the Behavioral Health units throughout the enterprise
Caregiver Engagement / Satisfaction

- Electronic rounding made the unit a safer place
- Increased accuracy
- Quicker
- Small and handy
- Opportunity to stay on top of the process
- Convenient
- Easy to track
- Accessible
- More efficient
Recommendations

• Continue to measure and disseminate the value of using automated rounding solutions

• Potential for use for rounding in other specialties

• Expand the ability for use of the mobile device for further documentation

• Partner with other hospital systems to promote best practices during Behavioral Health patient safety rounds.
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Every life deserves world class care.