

INNOVATIVE CARE DELIVERY IN NURSING: A PARADIGM SHIFT IN HEALTHCARE

PRESENTED BY:

- Dr. Katie Boston-Leary, PhD, MBA, MHA, RN, NEA-BC
- Dr. Kiersten Henry, DNP, ACNP-BC, CCNS, CCRN-CMC



NURSE STAFFING
TASK FORCE



Session Etiquette



FROM
DATA
TO **ACTION**

We have the data.
We want change.
It's time for action.

Series Host

Nicole Anselme

**MBA, MSN, RN, CCRN, SCRN,
GERO-BC**

Senior Policy Advisor

Nursing Programs

American Nurses Association



**NURSE STAFFING
TASK FORCE**



About the Series

- **Five interactive 90-minute sessions featuring content developed and presented to you by members of the Nurse Staffing Task Force**
- **Our goal is to engage nurses in discussions around actionable steps to tackle the nurse staffing crisis.**

Two Parts of Each Session:

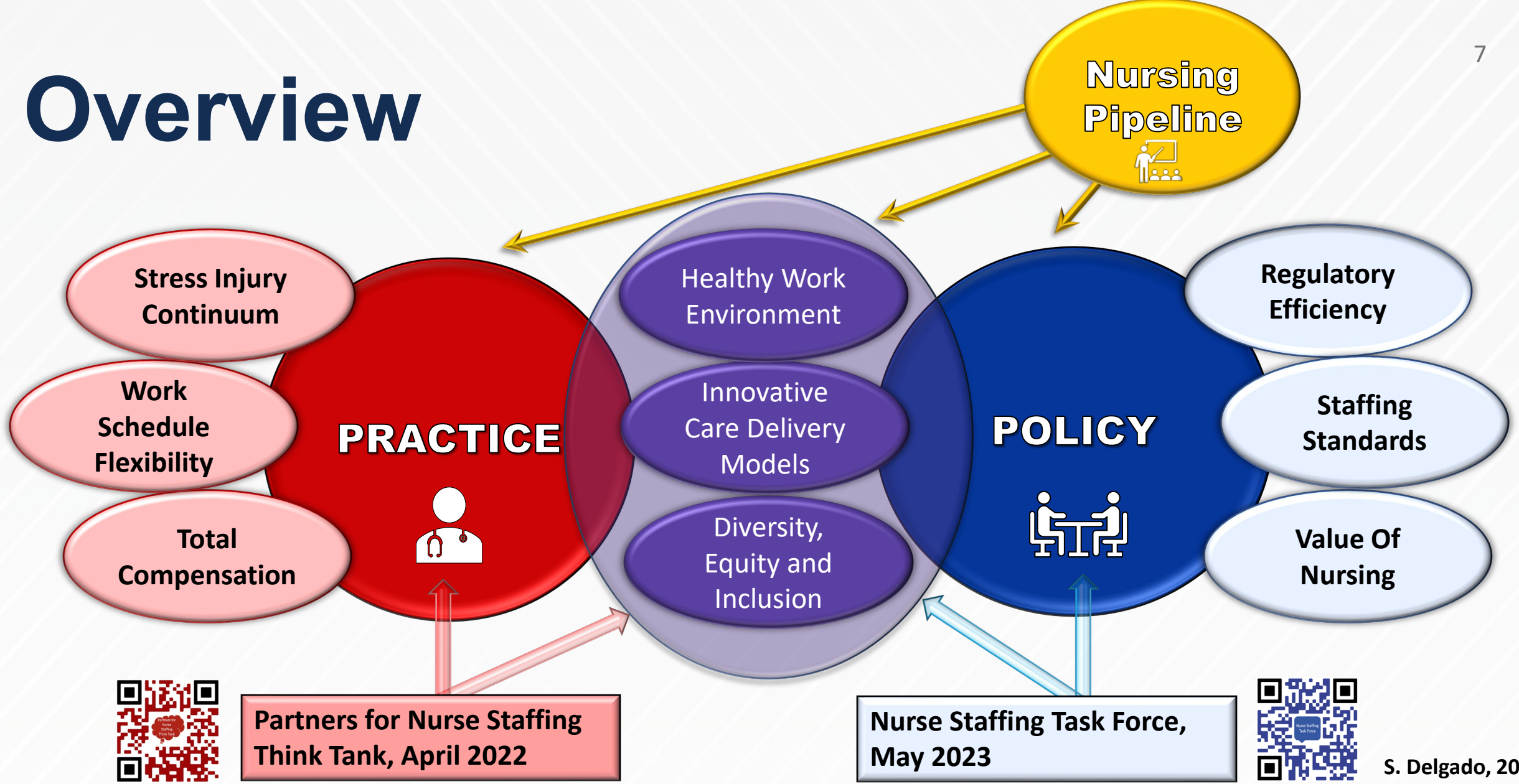


- **Imperative** is introduced; information and context are provided
- A **Q&A** will follow the presentation
- Presentation will be recorded and available on [Nursingworld.org](https://www.nursingworld.org)



- Discussions will be focused on **action**
- Please do not share patient information
- We encourage participation; speak **freely** and **openly**

Overview



Series Overview



Speaker Introductions

Dr. Kiersten Henry
DNP, ACNP-BC, CCNS, CCRN-CMC
Chief Advanced Practice Provider, MedStar
Montgomery Medical Center

Dr. Kiersten Henry is a critical care Nurse Practitioner and Chief Advanced Practice Provider at MedStar Montgomery Medical Center. She previously served as Director of the American Association of Critical Care Nurses, served on the Nurse Staffing Think Tank, and on the Nurse Staffing Task Force as a Nurse Advisor.

She has co-authored on topics including nurse staffing and resilience during the COVID-19 surge. Dr. Henry has lectured locally and nationally on the role of Advanced Practice Registered Nurses in promoting a healthy work environment.



Speaker Introductions

Dr. Katie Boston-Leary
PhD, MBA, MHA, RN, NEA-BC

**Director, Nursing Practice & Work Environment,
Nursing Programs
American Nurses Association**

Dr. Katie Boston-Leary is the Director of Nursing Programs at the American Nurses Association overseeing the Nursing Practice and Work Environment Division and Healthy Nurse Healthy Nation. She is an Adjunct Professor at the University of Maryland School of Nursing. Katie serves as staff on the National Commission to Address Racism in Nursing and is also part of the National Academy of Science and Medicine's National Plan to Address Clinician Well-Being. She was the ANA representative for the Nurse Staffing Think Tank and Task Force.

Her recent research was a qualitative study on nurses' perceptions of power dynamics in the hospital setting. She has written and co-authored numerous articles on staffing, diversity, and leadership.



Innovate the Models for Care Delivery



NURSE STAFFING
TASK FORCE



Innovate the Models for Care Delivery

SESSION OBJECTIVES:

- Describe a process for **evaluating** innovative care delivery models that includes **outcomes for patients and nurses**
- Learn how nurses can **contribute to processes** that compare existing practices with current guidelines
- Identify opportunities for **reducing physical workload** and **cognitive overload**.
- **Identify three ways** in which technology-based innovations affect a nurse's **workload** in the unit or organization in which they work

Nursing Care Delivery Models

...also called **care delivery systems** or **patient care delivery models** detail the way task assignments, responsibility, and authority are structured to accomplish patient care.

Four “Classic” Care Delivery Models

- Total Patient Care
- Functional Nursing
- Team Nursing
- Primary Nursing

Care Delivery Models

...also called care delivery systems or patient care delivery models detail the way task assignments, responsibility and authority are structured to accomplish patient care.

Care Delivery Redesign

...willingness to advance new ways of delivering care to patients starting with intentionally caring for the teams that do

Requires investing, innovating, taking calculated risks, rapid cycle testing, implementation and scaling up new and patient centered models of care

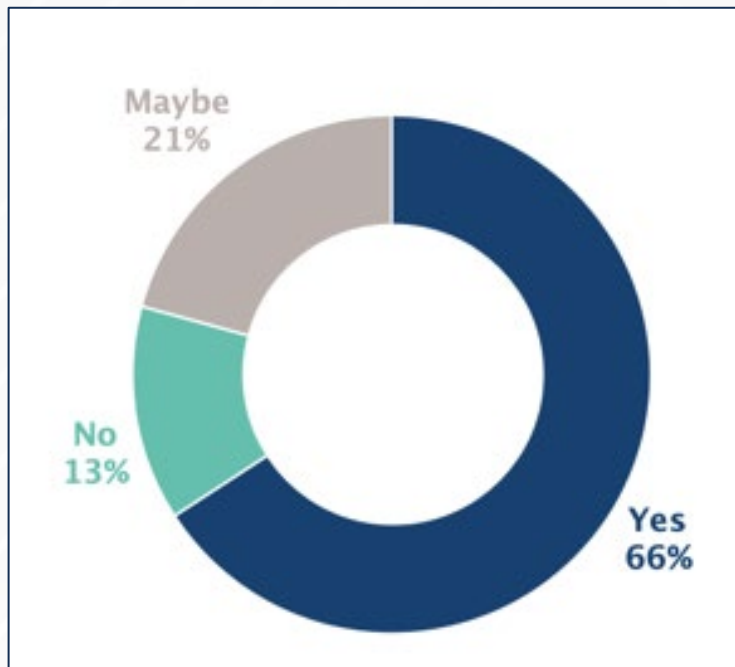
Polling Questions

- **Do you believe your organization's care delivery models need to be improved and/or changed?**
 - Yes
 - No
 - Maybe

Assessing Critical Care Gaps

(Studer/Joslin/ANA Model of Care Insights Study, 2023) n=~3500

All Respondents: Do you feel that your organization's current care delivery models need to be improved?



Acute Care Responses

Acute care leader: 72% Yes

Acute care frontline: 67% Yes

Nurses' Perceptions of the Quality of Care in Their Units/Organizations

18

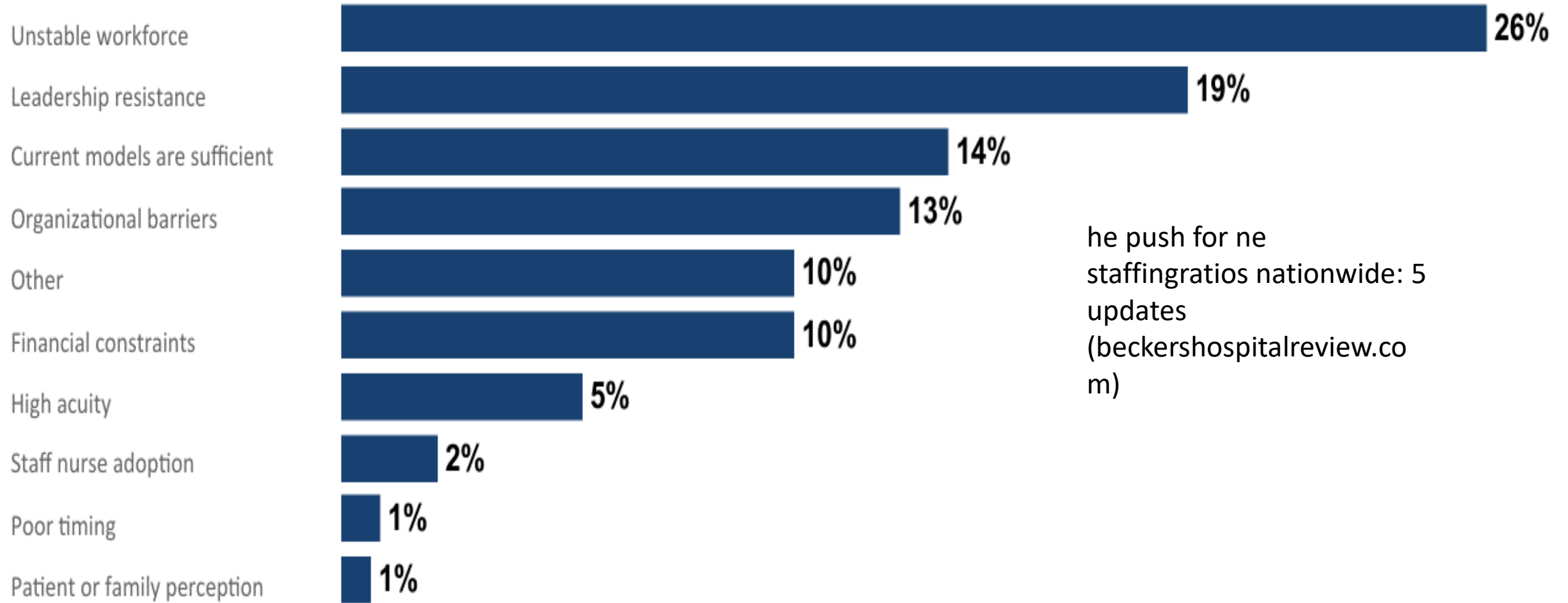
- American Association of Critical Care Nurses Survey of Nurse Work Environments
 - **2018**
 - **23.5%** of nurses rated the quality of care in their organization as Excellent
 - **43.7%** rated the quality of care in their unit as Excellent
 - **2021**
 - **15.7%** of nurses rated the quality of care in their organization as Excellent
 - **29.5%** rated the quality of care in their unit as Excellent

Ulrich, B., Cassidy, L., Barden, C., Varn-Davis, N., & Delgado, S. (2022) National nurse work environments- October 2021: A status report. *Crit Care Nurse*, 42(5): 58-70.

Polling Question

- **If you have not made any changes to your care delivery models, what are your top reasons?**
 - **Unstable workforce**
 - **Leadership resistance**
 - **Current models are sufficient**
 - **Financial constraints**
 - **Organizational barriers**

If you have not made any changes to your care delivery models, what are your top reasons?



the push for new staffing ratios nationwide: 5 updates (beckershospitalreview.com)

Innovative Care Delivery Models: Operational Definition

- Care delivery models that combine high-tech and high-touch for high quality care with an **inclusive** and **integrated** approach for **patient and nurse satisfaction**, reduction of practice pain points and **improved outcomes**
- Innovating our care delivery models does not require a complete redesign
 - Rather a focus on changing **specific components** of the care delivery model and **evaluating the impacts** of those changes



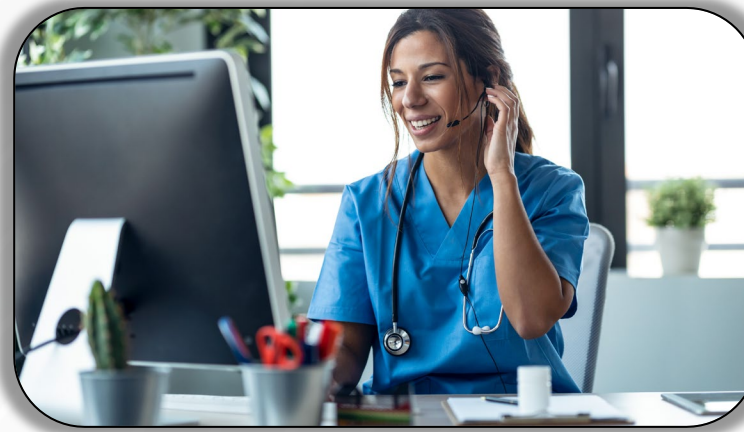
Hybrid



NURSE STAFFING
TASK FORCE



Tri-brid Care Delivery



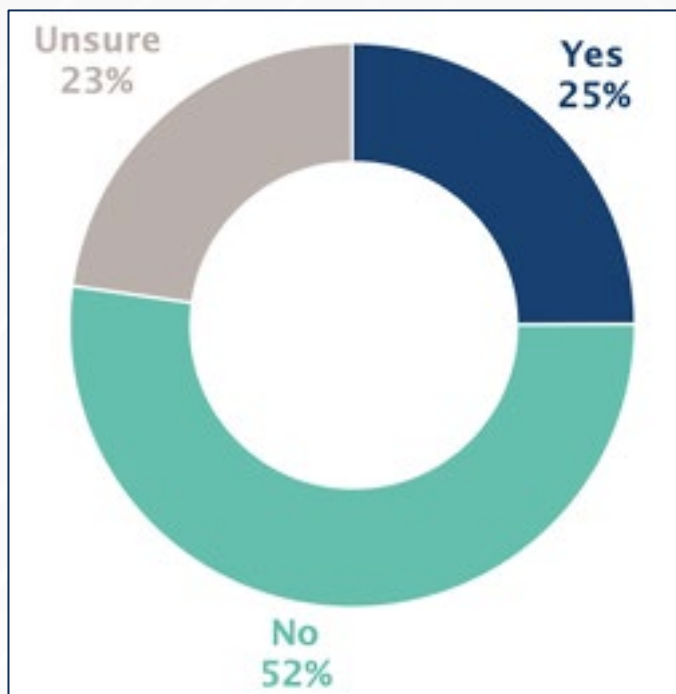
Tri-Brid Care Delivery – Operational Definition

Care delivery models that combine high-tech and high-touch for high quality care with an inclusive and integrated approach to:

1. ↑ Patient satisfaction
2. ↑ Nurse satisfaction
3. ↓ Practice pain points & workload

Care Delivery Model: **Virtual Nursing**

All Respondents: Since the pandemic, has your organization implemented or considered implementing **virtual nursing**?



Acute Care Responses

Acute care leader: 33% Yes

Acute care frontline: 13% Yes

Gap assessment: Critical

Exemplars



NURSE STAFFING
TASK FORCE





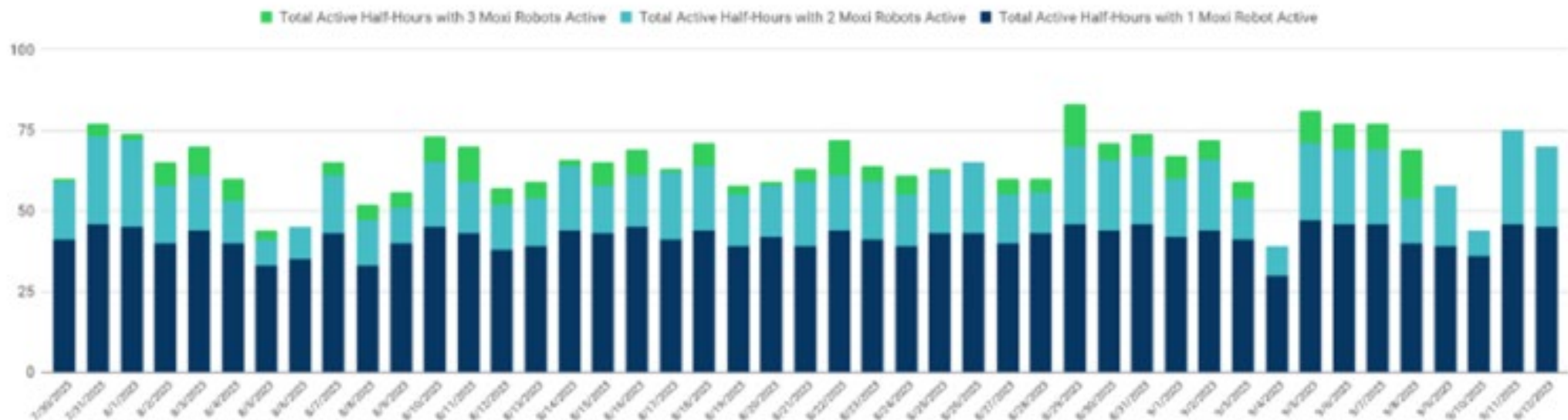
**Sylvain "Syl" Trepanier, DNP,
RN, CENP, FAAN, FAONL
Chief Nurse Executive,
Providence St. Joseph
Health**

“Sixteen weeks into the pilot (when this manuscript was last revised), we saw **significant improvement in all metrics**. More specifically, we have noticed a **decrease in the length of stay**, a nearly **40% decrease in turnover**, a **near-zero vacancy rate** for ancillary staff such as certified nursing assistants (CNAs), and an annual expected **cost avoidance of \$500 000** for the pilot unit.”

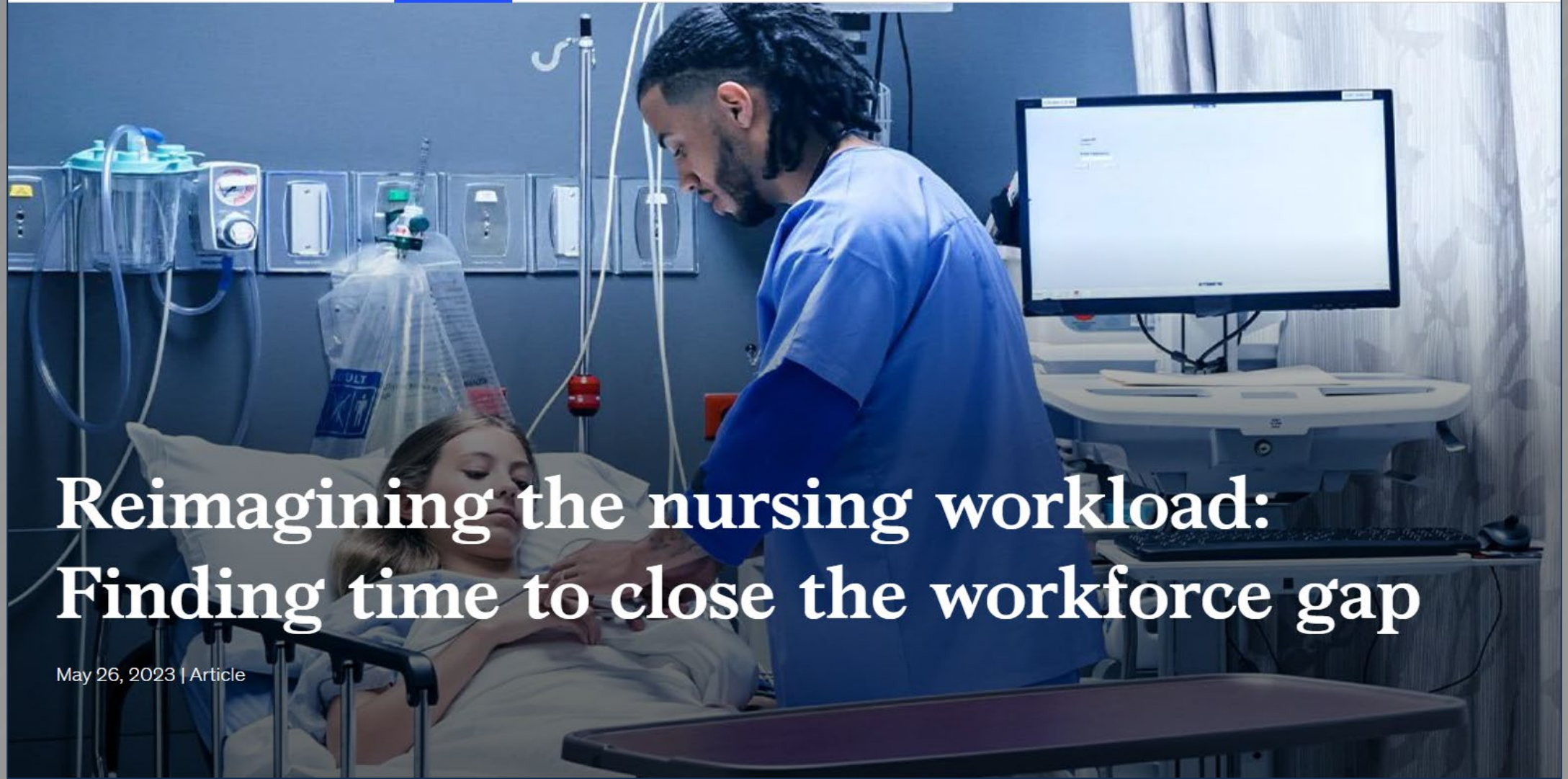


**Richard G. Cuming, EdD, MSN, RN, NEA-BC, FAAN, Chief
Operating Officer at ChristianaCare**

Active Half-Hours per Day



Over the last 45 days, the Christiana Care Moxi Fleet is actively completing deliveries for an average of **69.49 Active Half-Hours per Day**, or **34.74 Active Hours per day**.



Reimagining the nursing workload: Finding time to close the workforce gap

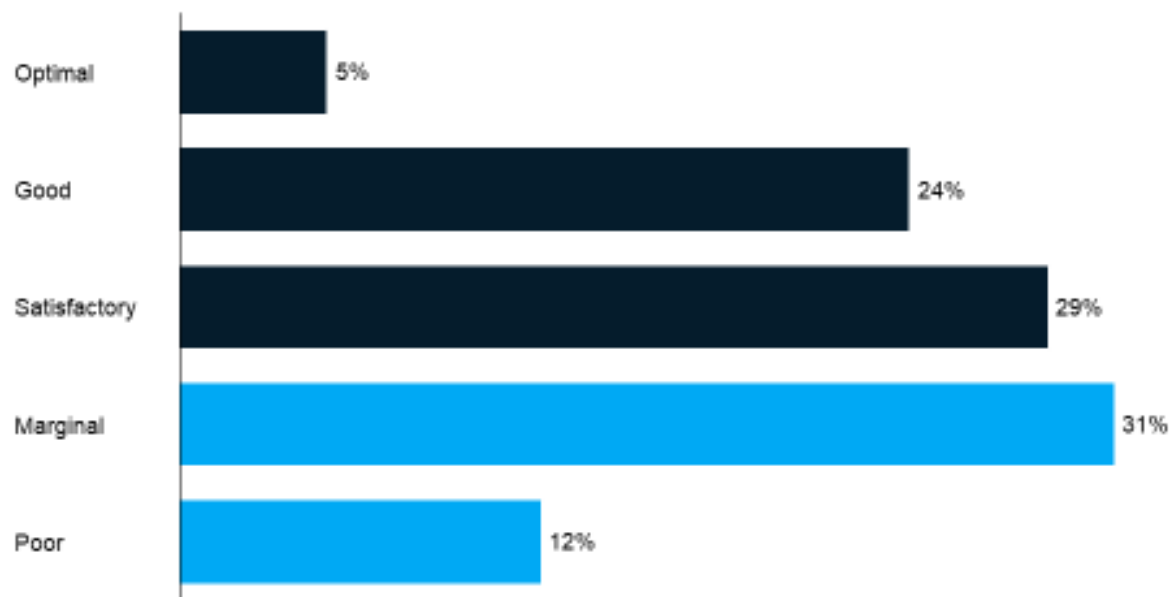
May 26, 2023 | Article

43% of surveyed RNs indicated they had marginal or poor control over their workload

CONFIDENTIAL

My control over my workload is (% of respondents)

All Respondents
(N=7,104)



Q8. My control over my workload is:

Source: May 2023 American Nurses Foundation Nurses Survey

Respondents gain more control over their workload **with the increase in the number of years as a nurse**, ranging from **54%** for RNs with less than 5 years of experience, to **59%** for RNs with 21-30 years of experience

Respondents **not providing direct care have better control (65%)** than respondents providing direct care (55%)

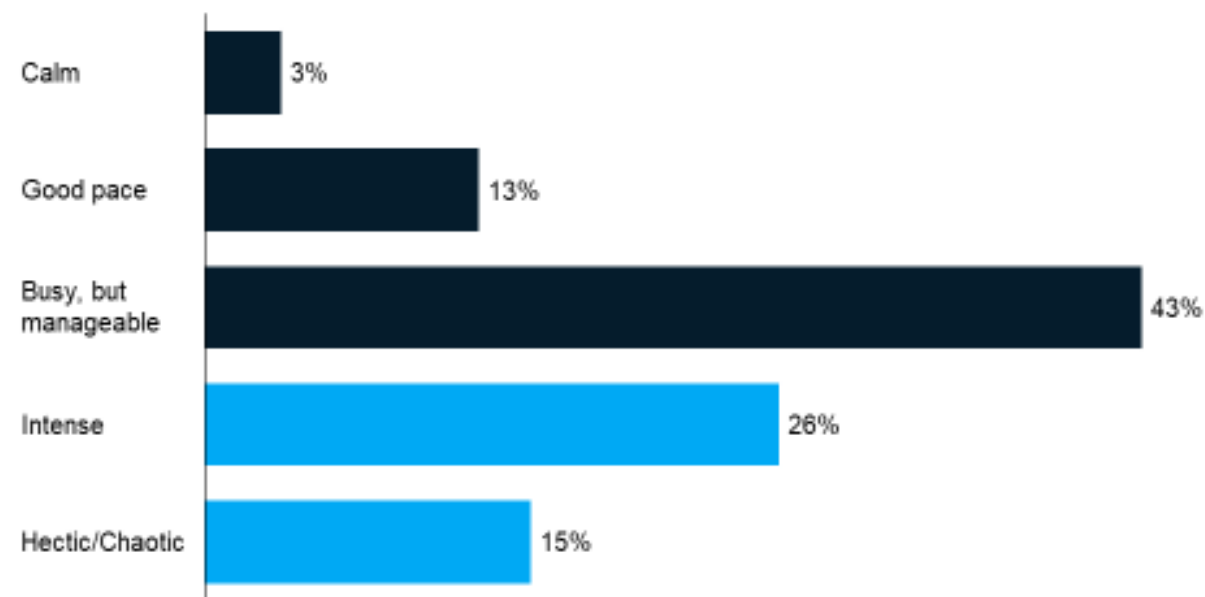
McKinsey & Company 18

41% of surveyed RNs find their work area as intense or hectic

CONFIDENTIAL

Atmosphere in work area (% of respondents)

All Respondents
(N=7,086)



Q10. Which term best describes the atmosphere in your work area today or the last time you worked?

Source: May 2023 American Nurses Foundation Nurses Survey

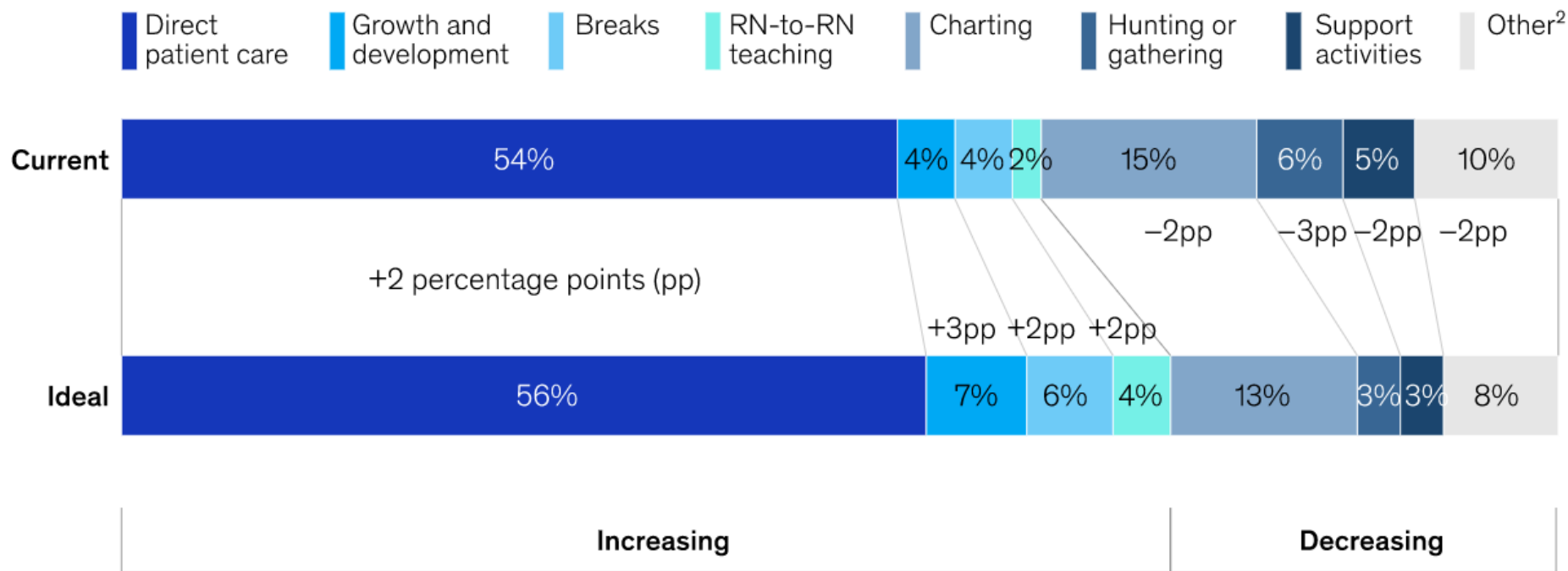
The percentage of respondents who find their work area as intense or hectic **decreases with the increase in the number of years as a nurse**, ranging from **47%** for RNs with less than 5 years of experience to **39%** for RNs with 21-30 years of experience

This percentage is **higher for RNs providing direct care** (44%) than for RNs not providing direct care (33%)

McKinsey & Company 19

Surveyed nurses want to spend more time with their patients, coaching fellow nurses, and participating in professional-growth activities.

Activities identified by registered nurses (RNs) where more or less time could be spent during a typical shift,¹ % of shift (n = 240 respondents)



¹Presented if the delta between current and ideal activities is greater or less than 10 minutes.

²Includes communicating with providers and nurse-to-nurse handoff.

Source: McKinsey 2023 Nursing Time Survey

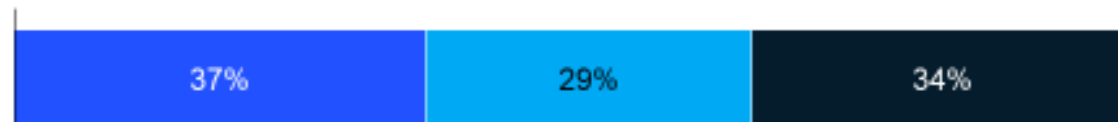
Organizational support was perceived by fewer than 37% of the respondents

Extent to which respondent disagree or agree with each statement (% of respondents)

CONFIDENTIAL

■ Agree ■ Neutral ■ Disagree

My organization values my contributions to its wellbeing (N=5,962) (% of respondents)



My organization takes pride in my accomplishments at work (N=5,971) (% of respondents)



If I did the best job possible, my organization would notice (N=5,962) (% of respondents)



My organization really cares about my wellbeing (N=5,962) (% of respondents)



My organization responds to my complaints (N=5,972) (% of respondents)

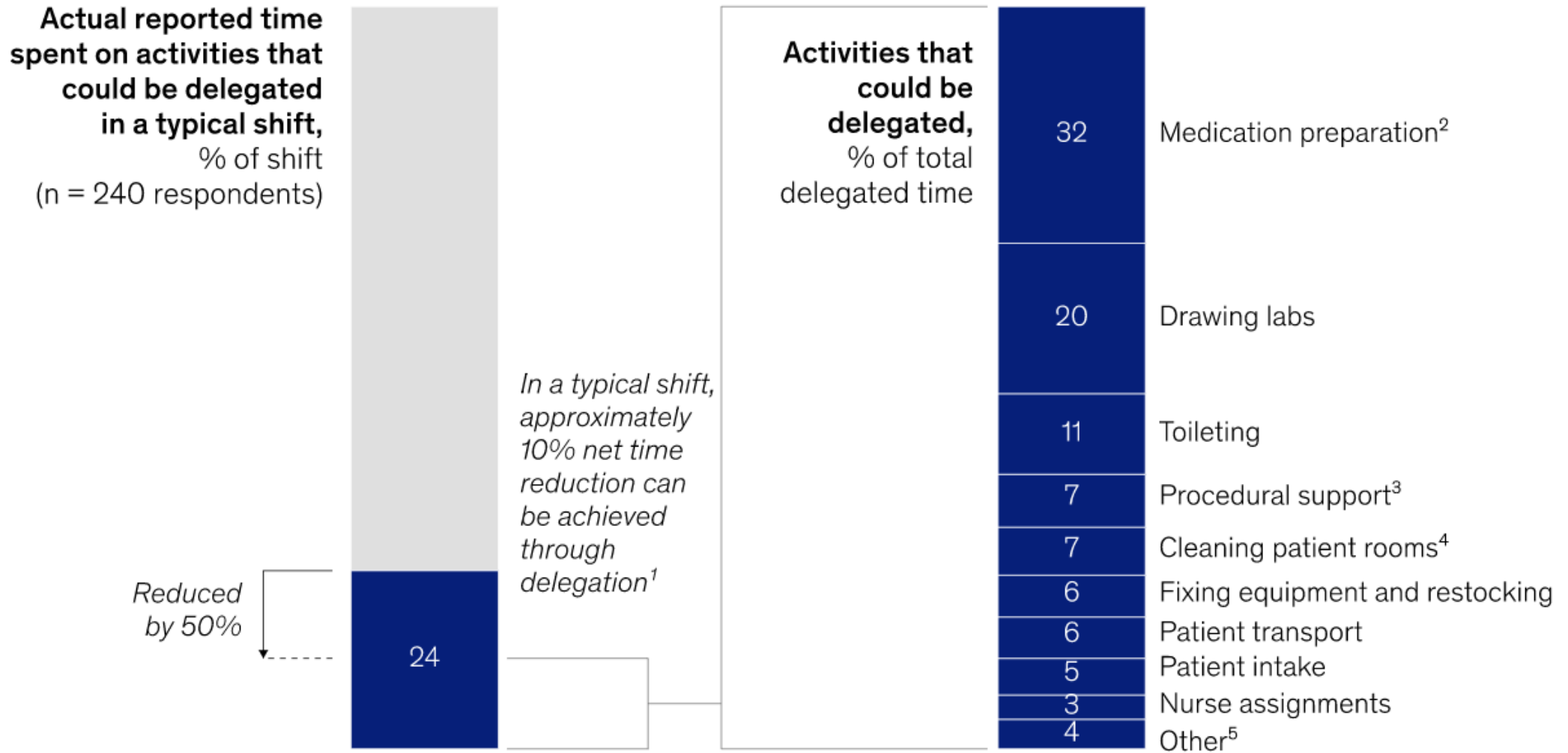


Q20R1. Survey of Perceived Organizational Support

Source: May 2023 American Nurses Foundation Nurses Survey

McKinsey & Company 20

Delegation could reduce net nursing time by approximately 10 percent.



Note: Figures do not sum to 100%, because of rounding.

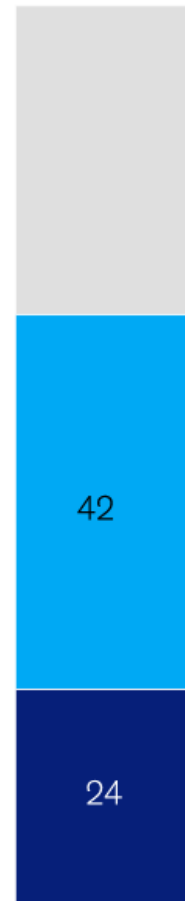
¹Actual time saved is dependent on current situation of particular health system. ²Includes administering and preparing medicines. ³Includes assisting in imaging, transport, and holding patients. ⁴Includes emptying trash and changing linens. ⁵Includes checking medication counts, checking emergency carts, and completing insurance information.

Source: McKinsey 2023 Nursing Time Survey

In a typical shift, approximately 20 percent net time reduction can be achieved through tech enablement.

Actual reported time spent on activities that could be decreased through tech enablement in a typical shift, % of shift (n = 240 respondents)

Reduced by 50%



In a typical shift, approximately 20% net time reduction can be achieved through tech enablement¹

Activities that could be tech enabled, % of total tech enablement time



Nurses desire to spend less time on documentation, hunting and gathering, and administrative and support tasks

Documentation²

Hunting and gathering³

Medication administration⁴

Nursing handoff

Interdisciplinary communication

Patient turning

Delivering food and water

Other⁵

Note: Figures do not sum to 100%, because of rounding.

¹Actual time saved is dependent on current situation of particular health system. ²Includes documenting patient education, head-to-toe assessment, progress notes, and vital signs. ³Includes searching for individuals, information, medication, or gathering supplies and equipment. ⁴Includes scanning medicines, waiting for pharmacy to deliver medicines, and double verification. ⁵Includes updating whiteboards, audits, and reports.

Source: McKinsey 2023 Nursing Time Survey

Reimagining the nursing workload is a **real and tangible solution** that could **alleviate the strain on the current workforce**, and **potentially improve workforce shortages.....**

1. Our analysis finds that reimagining the nursing workload through delegation and the use of technology could potentially create net **time savings of 15 to 30 percent during a single 12-hour shift.**
2. We estimate that full or partial delegation of activities to non-nursing roles, including technicians, nursing assistants and patient care technicians, food services, ancillary services, and other support staff, **could reduce net nursing time by five to 10 percent during a 12-hour shift.**

Redesigning care models: Adjusting how nurses spend their time

As we consider how to alleviate nursing workforce challenges, one area of intervention could be evaluating how current care models can be redesigned to better align nursing time to what has the most impact on patient care. Performing below-top-of-license or non-value-adding activities can create inefficiencies that lead to higher healthcare costs and nurse dissatisfaction. Rigorously evaluating whether tasks can be improved with technology or delegated to allow nurses to spend time on activities they find more valuable could help to reduce the time pressures felt by nurses.

[5] In our analysis, we reviewed the activities nurses say they would ideally spend less time on and considered whether delegation and tech enablement of such tasks could free up nurses' time.



While this is an important fix, it is not an overnight fix – true change will require operational and cultural investment...

1. It will be critical for hospitals to bring **both discipline and creativity to redesigning care delivery** to effectively scale change and see meaningful time savings
2. **Close collaboration** beyond nursing is also paramount to ensure **alignment across the care team and hospital functions** including administration, IT, informatics, facilities, and operations.
3. **Investment in education** and additional onboarding may be needed to **upskill** and **train staff on expectations** as work is shifted across roles.

Resistance to Change

How would you rate your organization's resistance to change?



Very resistant to change

Resistant to change

Neutral

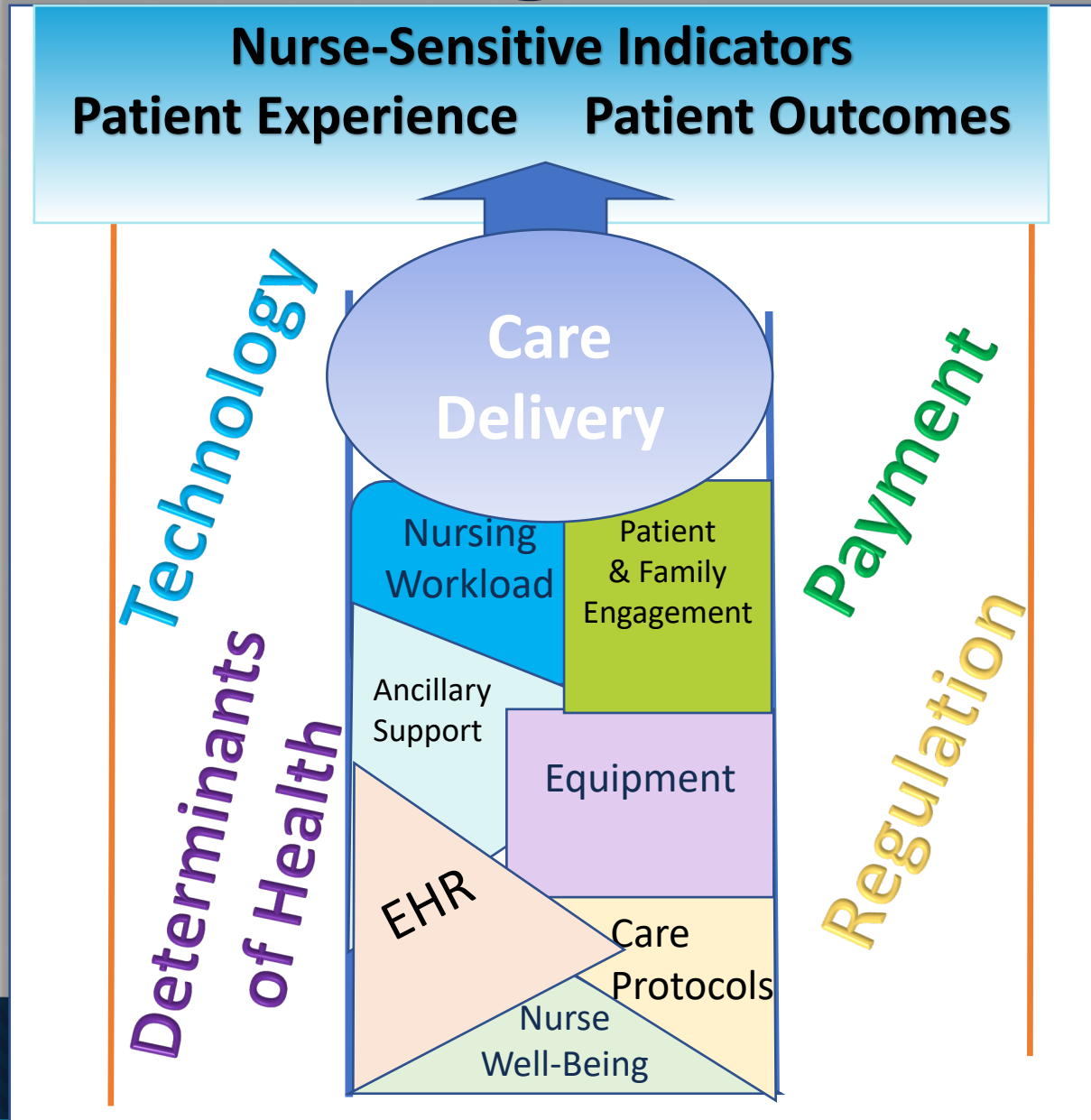
Not resistant to change

Not at all resistant to change

Polling Questions

- **There are numerous studies that indicate that healthcare organizations struggle with implementing change. Which group in your opinion is the most resistant to change?**
 - Nurses
 - Nurse Managers and Director
 - C-suite
 - All the above

Factors Impacting Models of Care Delivery



Making Peace with Lions



NURSE STAFFING
TASK FORCE





- **Changed his thinking** and mindset about his “enemy”
- Thought of other **methods to address his problem** to save what was important to him
- Trial and error
- Kept his “enemy” in mind to **figure out solutions**
- Took on **calculated risk** (dismantled mother’s radio)
- Developed an **innovative solution**
- Spread the word
- **Scaled up** and **implemented broadly** to help others

Key Takeaways: Innovate Models of Care Delivery ⁴⁶

1. **Modernize care delivery models** and ensure they are inclusive, evidence-informed, and technologically advanced
2. Establish innovation in care delivery models as a **strategic priority** within organizations
3. Reduce **physical workload** and **cognitive overload** and prioritize **high value patient care** by incentivizing the de-implementation of **high burden/low-value** nursing tasks

Q & A



**NURSE STAFFING
TASK FORCE**



Discussion Questions

1. Has there been a change to the care delivery model or strategies in your organization over the last 3 years?
2. What care delivery models or strategies have you heard of or have implemented that addresses all three of the following tenets:
 - Nurse engagement
 - Patient outcomes
 - Nurse workload

Upcoming Sessions



Sept. 14, 2023

Creating a Healthy & Supportive Nurse Work Environment



Sept. 28, 2023

Innovative Care Delivery in Nursing: A Paradigm Shift in Healthcare



Oct. 19, 2023

Achieving Excellence in Healthcare: Nurse Staffing Standards

Transforming Cost into Value: Recognizing Nurses' Unique Contribution

Sept. 21, 2023



Maximizing Nursing Efficiency: The Future of Regulatory Innovation

Oct. 05, 2023



FROM
DATA
TO  **ACTION**

The Nurse Staffing Task Force
Project ECHO[®]

Tackling the Nurse Staffing Crisis

Thank you for joining us!



**Think Tank
Recommendations**



**Task Force
Recommendations**



**NURSE STAFFING
TASK FORCE**

