

Case #23

Compromises efficiency by not anticipating system-based needs

Sue is at the end of her 2nd year of residency and has worked with you previously on hospital pediatrics. She seems invested in her patients and the care team, and is well-liked by the nurses. She has several times provided research papers to support her evidence-based decision making. You have noticed, however, that two of her patients had sedations delayed because they were not properly NPO prior to the procedure. Today, a discharge was delayed because a medication prior authorization was not completed (despite the discharge medications being planned for more than 3 days). She is very apologetic over the situation and seeks you out to discuss this morning's delay.

Author: TL

Feedback Script

Case 23 – Compromises efficiency by not anticipating system needs

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| <p>Step 1: Action Identify the Trigger Behavior</p> <ul style="list-style-type: none"> • <i>Describe specific examples</i> | <ul style="list-style-type: none"> - Does not anticipate needs in advance (eg. Prior auth before discharge, NPO for MRI, etc) |
| <p>Step 2: Subcompetency Identify Milestone-based correlation</p> <ul style="list-style-type: none"> • <i>Correlate behavior to milestone/EPA anchor</i> | <p>PC2: Organize & prioritize responsibilities to provide patient care that is safe, effective & efficient—Level 1</p> |
| <p>Step 3: Evidence Target High Yield Feedback Points</p> <ul style="list-style-type: none"> • <i>Real issue behind behavior</i> • <i>Identify impact of behaviors</i> | <p>Not anticipating steps required to carry out patient care plans results in extended patient stays, increased cost, potential for frustrated patients/families, and puts patient at higher risk for iatrogenic illnesses.</p> |
| <p>Step 4: Script Create Brief Script</p> <ul style="list-style-type: none"> • <i>No more than 3-4 sentences</i> • <i>Neutral language</i> • <i>Focus on behaviors and actions</i> | <p>I appreciate that you have developed some patient care plans based on current evidence. Where you can continue to work is on anticipating patient needs. I have noticed that some patient care items (imaging, discharges) have been delayed because prerequisite tasks were not completed. In instances where protocols mandate specific steps be completed prior to carrying out the care plan (prior auths, NPO for x hours, etc), failure to anticipate these steps causes longer LOS, bigger healthcare bills, treatment delays, and higher risk of hospital-acquired infections.</p> |
| <p>Step 5: Strategy Describe Possible Plan for Improvement</p> <ul style="list-style-type: none"> • <i>Create 1-2 specific methods for improvement</i> | <ul style="list-style-type: none"> - Anticipate discharge needs at the time of admission - Print & keep handy the list of NPO times required for sedation and imaging studies to reference prior to ordering these procedures - When discharge planning (writing prescriptions, sending dc summaries, etc), include a step for verifying any paperwork needed (FMLA, prior auth, etc) - Take advantage of the experience of the case managers on determining discharge needs - Are there others you can think of? |