A tedious manual process for documenting and printing care education for patients was slowing down the discharge process and making it difficult for Phelps County Regional Medical Center (PCRMC) to meet Meaningful Use requirements.

Additionally, the hospital wanted to standardize evidence-based patient education and clinical content across the continuum of care using a single, quality source of information. The emergency department (ED) clinicians at PCRMC — who were already using the online CareNotes® system — recommended that CareNotes be used as a facility-wide solution because it is evidence based and provides relevant, specific information based on patients’ needs, such as discharge, inpatient, pre-care education, and more.

However, the online solution, while delivering quality content quickly via the Web, required nurses to first find the patient’s diagnosis in the electronic medical record (EMR) and to then go to CareNotes online to find the instructions needed.

**Course of Action**

To dramatically improve consistency, efficiency, and responsiveness, PCRMC instead chose the Integrated CareNotes solution from Thomson Reuters. Integrated CareNotes not only offers the same high-quality, evidence-based patient and care education information as the online solution, but also integrates it into the facility’s HIS system for seamless, easy access. Plus, CareNotes is developed using the same Micromedex® evidence based clinical decision-support already used for medication safety and more at PCRMC. This creates clinically consistent evidence across caregivers via the same interface for all departments throughout the hospital.

As a result, the process for distributing and documenting patient education is much easier and is greatly streamlined after implementing Integrated CareNotes.

Now in the ED, patient instructions are attached to a chief complaint dictionary within the EMR. The nurse simply accesses patient specific CareNotes through the EMR, checks the recommended instructions, and prints them for the patient. The patient receives the physician instructions, as well as educational instructions in a single packet. The electronic copy of the patient education is also stored in the EMR automatically.

Similarly, inpatient nurses are now able to find all patient education resources in one place within the EMR, without deviating from their existing clinical workflow, saving valuable time to focus on patient care.
RESULTS

The EDM specialist at PCRMC, Marlene Kleeschulte, RN, BSN, estimates that Integrated CareNotes saves approximately three to five minutes for every patient discharged directly from the ED. Since the department averages 80 patients per day who are treated and sent home, this results in four to six hours of gained efficiency per day.

An additional benefit from the improved workflow from using Integrated CareNotes is the increase in patient education documentation distributed. “The documentation given to inpatients immediately went up 50 percent from where we started,” said Pam Feeler, RNC, director of nursing informatics at PCRMC. “And documentation given rose to 80 percent in the ED.”

And, Feeler explains, “Our goal is to ensure we give every inpatient at least one Integrated CareNotes document to achieve our target of 100 percent compliance.”

At PCRMC, the clinical staff who use Integrated CareNotes saw immediate time savings benefits. Because the implementation of the program was straightforward and required a minimal amount of effort from the IT staff, the impact on compliance was swift as well.

Now, the hospital is able to focus on preparation for Meaningful Use Stage 2 criteria, having successfully met Stage 1 requirements quickly and cost-effectively.

“Thanks in part to Integrated CareNotes, we’ve already met the Stage 1 requirements for Meaningful Use and improved our nurses’ efficiency.”

Pam Feeler, RNC, RN-BC Nursing Information
Director of Nursing Informatics
Phelps County Regional Medical Center

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