

Morgantown, West Virginia

Transforming care at the bedside, patient-driven care, and exemplars of patient-centered care

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Methodology

A multidisciplinary meeting involving nursing, physicians, pharmacy, and care management was held seven days a week to discuss and formulate patient's plans of care. Designated respiratory therapists, nurses, physicians, physical therapists, and occupational therapists further enacted these plans on the unit. A nurse from 8 Southeast was utilized hospital wide as a designated swab nurse for screening patients to help maintain consistency and conserve personal protective equipment. Leadership continued to support and monitor staff efforts and adjust nurse to patient ratios (3:1) to aid in improved outcomes and safety. Communication was facilitated on the unit by means such as designated times during the day in which the patient families were contacted to maintain consistency, offering technology such as iPads to give opportunities for patients to Facetime their loved ones, and utilizing walkie talkies during code situation to limit foot traffic in rooms but allow adequate communication to occur.

Introduction

With heightened awareness of the COVID-19 pandemic and its effects on surrounding areas of the communities served, WVU Medicine worked quickly to devise a surge plan and place it in to action. At J.W. Ruby Memorial Hospital a coordinated multidisciplinary effort was enacted with an Incident Command Center being formed, a cohorted COVID-19 unit was created, and a dedicated service line was put in to place to serve the COVID-19 population. Within the Heart and Vascular Institute, 8 Southeast was transformed into the COVID-19 cohort unit for Step Down Status and Floor Status COVID-19 patients, focusing on implementing evidenced-based, patient-centered care to promote healing and positive outcomes.



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Conclusion

With the support of leadership, staff, and the community, WVU Medicine was able to provide the most up to date treatments and act quickly to provide exemplary care to patients. Utilizing this support and treatments, as well as interdisciplinary collaboration, many positive outcomes were witnessed with this patient population.



Results

With the consistent dedication, hard work, and collaboration, 8 Southeast cared for several hundred plus patients during it's tenure as the cohorted unit. Procedures created and adapted during this time are continuing to be utilized hospital wide in the care provided to COVID-19 patients, as 8 Southeast has decentralized, the COVID-19 population is being cared for hospital-wide at this time.

References

Lippincott Procedures. (2020). Prone Positioning. Retrieved from https://procedures.lww.com/lnp/view.do?pld=6068323

Vollman K.M., Dickinson S, Powers J. Pronation therapy. In: Wiegand DL, ed. AACN Procedural Manual for High Acuity, Progressive and Critical Care. 7th ed. Philadelphia, PA: Elsevier Saunders; 2016:142-163.

Vollman, K.M. and S.P. Dickinson. Why Prone, Why Now? Improving Outcomes for ARDS Patients. AACN Critical Care Webinar Series 2017 [cited 2020 March 27, 2020]; Available from:

https://www.aacn.org/education/webinar-series/wb0042/why-prone-why-now-improving-outcomes-for-ards-patients