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Evaluation of the implementation of the medical surveillance unit

Background: The Medical Surveillance Unit (MSU) was developed after an internal review supported the need for intermediate level of patient care, within the Pasqua Hospital in Regina, Saskatchewan. Minimal published Canadian literature describing such intermediate care units led the MSU through an 18 month evolution where models of care, staff education, and patient management strategies were developed. The purpose of this study was to examine the effects of MSU implementation on hospital-system and clinical outcomes, including: hospital length of stay (LOS), MSU LOS, 30 day hospital readmission, mortality, EARS scores, and AT scores.

Methods: A retrospective chart review in a random sample of 298 patients was conducted examining the effects of MSU implementation on hospital-system and clinical outcomes.

Results: Univariate analyses revealed several findings within 3 phases of implementation including: an increase in patient comorbidities ($p < 0.05$), and improvements in hospital LOS ($p < 0.05$), and MSU LOS ($p < 0.001$) between phases. The clinical documentation of the vital signs necessary to calculate an EARS score drastically improved from 15% in Phase 1, as the EARS tool was readily used by staff in later phases ($p < 0.001$). Lastly, the use of the AT in Phase 3 significantly increased the resource intensity of the patients admitted to the MSU in comparison to Phase 2 ($p < 0.001$).

Conclusion: Results revealed that this model of care leads to important improvements in hospital-system and clinical outcomes. The replication of this model of high functioning surveillance should be considered across Saskatchewan and beyond.

Biography

Lori Garchinski is currently the Executive Director of Critical Care, Cardiosciences, Medicine Inpatient units and the Lead for the Provincial SMART IV Pump Program with the Regina Qu'Appelle Health Region. She graduated in 1989 from the University of Saskatchewan, College of Nursing with a Bachelor of Nursing with Distinction. She obtained her Master of Health Studies through Athabasca University in 2013 and completed her LEAN Leader training in March 2015. Lori started her career 28 years ago as a bedside nurse in an open heart, neurosurgical and trauma ICU. Through her career she has also held the role of Clinical Educator and Manager of the Surgical Intensive Care Unit, Manager of Orthopedics, and Director of the Cardiac Program all within the Regina Qu'Appelle Health Region. Lori was the national president of the Canadian Association of Critical Care Nurses (CACCN) from April 2002 – March 2004 and served as a board member of CACCN prior to this term. She is currently finishing her Canadian Healthcare Executive program and enjoys the challenge that leadership provides. Lori has a passion for nursing, teaching and patients.

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