

## Transforming Clinical and Fiscal Outcomes through Staff Nurse Driven Change

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CSI Academy  
Clinical Scene Investigator

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## Learning Outcomes

- ❖ Describe the history and key components of the AACN CSI Academy curriculum.
- ❖ Explain how the program engages and empowers staff nurses.
- ❖ Review fiscal outcomes associated with the AACN CSI Academy.
- ❖ Simulate the Clinical Scene Investigator experience.

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*Being on the "front lines" of patient care gives nurses a unique perspective on how to improve the quality and efficiency of the healthcare system.*

-- Anonymous

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## American Association of Critical Care Nurses

- ❖ Largest specialty nursing organization in the world
- ❖ Representing 500,000 nurses
- ❖ Dedicated to providing knowledge and resources necessary to provide optimal care to critically ill patients

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[www.aacn.org](http://www.aacn.org)

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## AACN Mission

Patients and their families rely on nurses at the most vulnerable times of their lives. Acute and critical care nurses rely on AACN for expert knowledge and the influence to fulfill their promise to patients and their families. AACN drives excellence because nothing less is acceptable.

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## AACN Vision

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AACN is dedicated to creating a healthcare system driven by the needs of patients and families **where acute and critical care nurses make their optimal contribution.**

## AACN Values

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- ❖ **Ethical accountability and integrity** in relationships, organizational decisions and stewardship of resources.
- ❖ **Leadership to enable individuals to make their optimal contribution** through lifelong learning, critical thinking and inquiry.

## AACN Values

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- ❖ **Excellence and innovation** at every level of the organization to advance the profession.
- ❖ **Collaboration** to ensure quality patient- and family-focused care.

## What Does AACN Offer?

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- ❖ Clinical Practice
  - ❖ Standards, Practice Alerts, Beacon Award, Grants
- ❖ Certification
- ❖ Education
  - ❖ NTI, CE, E-learning, Webinar series, **CSI Academy**

## Clinical Scene Investigator (CSI) Academy

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- ❖ 16-month nursing leadership & innovation training program
- ❖ Empowers hospital-based staff nurses as clinician leaders & change agents
- ❖ Initiatives measurably improve patient & fiscal outcomes
- ❖ Project examples:
  - ❖ delirium, VAP, CAUTI, CLABSI, pressure ulcers, falls, unplanned readmissions & communication breakdowns

## CSI Objectives

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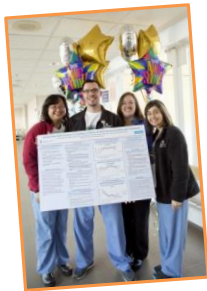
- ❖ Demonstrate the components of innovative project management
- ❖ Develop, plan and implement an innovative project that targets a patient/family or clinical outcome on the unit

## CSI Objectives

- ❖ Create measureable improvements in patient/family, clinical or organizational outcomes
- ❖ Effective communication, collaboration and innovation

## Clinical Scene Investigator (CSI) Academy

- ❖ Designed as “experiential” workshops
- ❖ Time to work in teams and across teams
- ❖ Carefully outlined sequence of learnings upon which to build confidence & move projects forward
- ❖ Brainstorm about the project



**“We’re inspired to participate in future QI projects that will improve care delivery and optimize patient outcomes.”**

*-- Beth Israel Deaconess Medical Center CSIs --*

## Clinical Scene Investigator (CSI) Academy

- ❖ Define the project
- ❖ Plan the details
- ❖ Use social entrepreneurship to move project forward
- ❖ Learn how to: **C**elebrate, **S**cale, and **I**nspire
- Results shared at “Innovation Conference”
- ❖ **CSI Innovation Database** [www.aacn.org/csi](http://www.aacn.org/csi)

## The Journey

- ❖ Original program
  - ❖ 7 hospitals in Kansas City (2008 – 2009)
- ❖ AACN June 2012
  - ❖ Create, develop & implement project impacting patient-centered outcomes, cost savings or cost diversion
  - ❖ Launched in 6 cities across the U.S.
  - ❖ 6 – 7 hospitals in each city awarded \$10,000 grants
  - ❖ Application process & economic impact
  - ❖ Signed agreement by CNE & CEO
  - ❖ External Faculty (AACN past leaders)

## The Journey Continues

- ❖ Evaluating CSI 1.0
- ❖ CSI Academy 2.0
  - ❖ Seattle CSI is currently in progress
    - ❖ First LTC (Long-term Care) part of cohort
    - ❖ First Military Hospital
  - ❖ Banner Health System
- ❖ Future



**"Nurses are hard workers and we take pride in the work we do. We have a desire to make things better. So why improve handoff communication? Because it's the right thing to do for our patients. Although changing culture can be slow and difficult."**

-- South Shore Hospital CSIs --



## CSI Academy Curriculum Topics

- ❖ **Creativity & Innovation**
  - Examples of past CSI Academy projects
  - What is creativity & Innovation? (TED Talk)
  - Creativity Exercises
- ❖ **Leadership and Team Work**
  - DISC® Personality Assessment
  - Navigating conflict
  - Emotional intelligence
  - Various roles of team members



## CSI Academy Curriculum Topics

- ❖ **Problem Identification**
  - Force Field Analysis, PDSA cycle & Tests of Change
- ❖ **Strategic Communication**
  - Public speaking & presentation tips
  - Elevator speeches
  - Influence Map
- ❖ **Project Implementation**
  - Logic Models & Drill Down Plans
  - SMART goals
  - Differentiate process vs. outcome measures
  - Creating & managing budget



## CSI Academy Curriculum Topics

- ❖ **Business Case for Quality**
  - Calculating percent reduction
  - Getting buy-in from senior leadership (C-Suite)
  - Demonstrate adding value
    - Cost savings, risk prevention, cost avoidance & return on investment (ROI)
  - *If we (nurses) don't talk about the money, someone else will...and it won't be a nurse!*
- ❖ **Data Collection/Analysis**
  - Who, what, when, where & how



## CSI Academy Curriculum Topics

- ❖ **Social Entrepreneurship**
  - "Pragmatic and results-oriented" methods to bring about social change
  - Examples of social entrepreneurship
  - Nurses as social entrepreneurs
  - Kotter's 8-Step Change Model
- ❖ **Scaling & Sustaining Projects**
  - Appreciative inquiry ("What's going well?")
  - Types of scaling
  - Sustainability tips
  - Writing an abstract

**We must be more than the most trusted profession. We must shift the conversation to our real role in healthcare.**

***"Nurses are quality agents who ensure safe passage through a complex healthcare system."***

**“To maintain the momentum it will be important to celebrate our wins, acknowledge the efforts of staff and to provide them with the gift of feedback.”**

*-- Newton-Wellesley Hospital CSIs --*



**Project Types and Market**

	Indianapolis	Raleigh/Durham	Boston	Austin	Philadelphia	New York City	Total
Increased Early Mobility	2	4			2	1	9
Delirium Prevention			4	1	1	1	7
Pressure Ulcer Prevention	2		2	2	1		7
Improved Communication	1	1		2			4
CAUTI Prevention		1				3	4
Improved Patient Handoffs			1	1			2
Falls Prevention	1	1					2
Noise Reduction				1	1		2
CLABSI Prevention				1		1	2
VAP Prevention	1						1
Improved Rounding					1		1
Alcohol Abuse Management						1	1
Nurse/Patient Satisfaction					1		1

**AACN CSI Academy Pilots**

- ❖ **Indianapolis (June 2012-October 2013)**
  - ✓ Fiscal impact of \$5.2 million dollars
- ❖ **Raleigh/Durham/Chapel Hill (October 2012-February 2014)**
  - ✓ Fiscal impact of \$2.5 million dollars
- ❖ **Boston (November 2012-March 2014)**
  - ✓ Fiscal impact of \$8 million dollars
- ❖ **Austin (January 2013-May 2014)**
  - ✓ Fiscal impact of \$1 million dollars
- ❖ **Philadelphia (March 2013-July 2014)**
  - ✓ Fiscal impact of \$ 2.7 million
- ❖ **New York City (September 2013-November 2014)**
  - ✓ Fiscal impact of \$4.5 million dollars



**Million Dollar Question**

**How much money collectively among the 6 CSI cohort cities was saved**



**SHOW ME THE MONEY!!!**



**Total Fiscal Impact/Cost Avoidance of 35 CSI teams who have completed program is over \$28.4 million dollars!!!**

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**Patients' and families' lives that have been improved??**

**Priceless!!!**

We are a part of


**SAVING LIVES**

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**Transforming how frontline staff nurses see themselves??**

**Powerful!!!**



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**“Because of the positive response from staff concerning our project, nursing administration has expressed interest in exploring other staff nurse driven projects.”**

-- Tufts Medical Center CSIs --

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**“We are deeply grateful to AACN for the opportunity to improve care for our patients and grow as nurses.”**

-- Brigham & Women's Hospital CSIs --

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**National Benchmarks**

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Outcome Measure	Cost
CAUTI <sup>10</sup>	\$6,913
CLABSI <sup>10</sup>	\$12,378
Delirium <sup>10</sup>	\$8,199
Falls <sup>10</sup>	\$9,491
Pressure Ulcers <sup>12</sup>	\$43,180
VAP <sup>10</sup>	\$9,076
Ventilator Day <sup>11</sup>	\$1,522
Outcome Measurement Data	
ICU Day <sup>11</sup>	\$3,500
Ventilator Day <sup>11</sup>	\$1,522

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Hospital	Clinical Outcome(s)	Annual Fiscal Savings
Baystate Medical Center	↓ percentage of CAM-ICU positive scores by 5% (10% reduction)	\$860,895
Beth Israel Deaconess Medical Center	↓ percentage of CAM-ICU positive scores by 22% (60% reduction)	\$1,770,840
Brigham and Women's Hospital	↓ sacral/coccyx/gluteal cleft pressure ulcers by 63% (8 weeks) ↓ all pressure ulcers by 14% (19 weeks)	\$1,994,234
Massachusetts General Hospital	↓ total vent days by 1.21%	\$304,400
Newton-Wellesley Hospital	↓ average LOS by 7.82 days (2 years)	\$1,491,665
South Shore Hospital	↓ communication incident reports to 0	\$1,050,000
Tufts Medical Center	↓ pressure ulcers by 50%	\$518,160

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**Beth Israel Deaconess Medical Center Boston**  
**“T.H.I.N.K. YES WE CAM”**

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**Project Goals:**

- ❖ Achieve ≥90% accuracy in delirium assessments using CAM-ICU tool
- ❖ Achieve ≥90% inter-rater reliability in delirium assessments
- ❖ Facilitate meaningful interdisciplinary discussion around delirium assessment and sedation management
- ❖ Decrease benzodiazepine use by 50% in patients with documented delirium

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**Beth Israel Deaconess Medical Center Boston**  
**“T.H.I.N.K. YES WE CAM”**

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**Project Outcomes:**

- ❖ >90% accuracy in delirium assessments was sustained (greater than 80% in patients with altered RASS)
- ❖ 90% to 100% inter-rater reliability in delirium assessments was sustained
- ❖ Meaningful interdisciplinary discussion around delirium assessment sedation management occurred
- ❖ Benzodiazepine use was decreased by >80% in patients
- ❖ 0% benzodiazepine use in patients with documented delirium was sustained
- ❖ Incidence of delirium was reduced by 60%
- ❖ Resulted in an incremental cost savings per patient of \$4,919, with a projected annual cost savings of \$1,770,840 (based on a monthly savings of \$147,570).

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<p><b>Collaborate to Extubate</b></p>	<p><b>RISE &amp; SHINE</b></p>
<p><b>DON'T GET DELIRIOUS</b></p> <p><b>TAKE SLEEP SERIOUS</b></p>	<p><b>T.H.I.N.K. YES WE CAM</b></p> <p><b>Prevent &amp; Treat Delirium</b></p>

<p><b>Don't Fumble the Hand-off:</b>  <b>Tackling Effective Communication</b></p>	<p><b>NO Pressure</b></p> <p>IN TUFTS MEDICAL CENTER ICUS</p>
<p><b>Face the Pressure</b></p> <p>Protect from the Devices</p>	<p><b>REMOVE THAT FOLEY</b></p> <p>CAUTI's Angels</p>

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**“We made a conscious decision to celebrate the things we were doing well and to focus our efforts on the areas where we had room to improve.”**  
*-- Massachusetts General Hospital CSIs --*

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**Showcasing CSI Teams**

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- ❖ [Duke Raleigh Hospital – Walk This Way Early Progressive Mobility in the ICU](#)
  - ❖ <http://www.wral.com/icu-program-puts-patients-back-on-their-feet/13459626/>
- ❖ [Baystate Medical Center – THINK Delirium: Don't Get Delirious, Take Sleep Serious in the ICU](#)
  - ❖ <https://www.youtube.com/watch?v=vv3W20PozNw>

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**“CSI Academy’s belief in the value of investing in frontline nurses has had a profound effect on us and the imprint of this experience has forever changed us as professionals.”**

*-- Baystate Medical Center CSIs --*



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## CSIs in Action

- ❖ Using the clinical scenario at your table work with your fellow CSIs to achieve the following:
  - Identify 4 different individuals to serve as a team leader, recorder/note taker, time keeper & reporter
  - Come up with an innovative slogan or catch phrase to represent your team
  - Answer the following questions
    - What are the 1 – 2 biggest drivers likely to be contributing to your identified clinical problem?
    - What’s your SMART goal? (Keep it simple)
    - What are the 1 – 2 interventions your team believes will make the biggest difference?
    - What is your cost savings or cost avoidance? (Show us the \$\$\$\$\$!!)

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## Questions? Insights?



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