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### **Title**

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# Changing the Care Delivery Model using Clinical Nurse Leaders (CNL) and Licensed Vocational Nurses (LVN) in the Oncology Setting

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**TRENDING:** UC San Diego Health has a new care delivery model that utilizes clinical nurse leaders and licensed vocational nurses practicing at their maximum scope. Innovation and inquiry are the foundation of performance improvement and UC San Diego Health is a quality-focused institution. The integration of the clinical nurse leader (CNL) and licensed vocational nurse (LVN) into the patient care delivery model have driven excellent patient outcomes as evidenced by nursing sensitive indicator results as well as influencing efficiency (length of stay and discharge metrics) and staff and patient experience.

In 2003 and 2007, the American Association of Colleges of Nursing developed white papers on the CNL role as a model for master's level clinical nursing leadership at the microsystem level (targeting nursing units from 10-15 beds). Secondary to the large physical footprint of the Jacobs Medical Center, having a resourceful, knowledgeable, and consistent leader in each pod is of paramount importance. Those in the CNL role echo the magnet components by operationalizing transformational leadership and

Oncology, at Jacobs Medical Center have implemented the CNL model. There are five CNLs in total each covering a 12-bed pod with each working Monday-Friday 8 hours a day. This model allows the CNLs to act as patient advocates, quality outcome managers, collaborative discharge planners, risk anticipators, and inter-professional team facilitators.

The CNL leads hospital wide quality initiatives such as Wound Wednesday and Foley Friday.

Their direct support of staff and bedside care drives down catheter-associated urinary tract infections (CAUTI) and hospital acquired pressure ulcers (HAPU). Furthermore, the regularity of their presence is conducive to implementing

performance improvement projects. The CNL's of 5FG have initiated a turn team to reduce HAPU rates. The 4FGH team has focused on reducing central line associated bloodstream infections (CLABSI) through a "Crushin' CLABSI Campaign".

Organizationally, patient flow and discharge metrics are key focus areas.

*The CNLs and LVNs in Jacobs Medical Center are the pioneers of the new care delivery model.*

ensuring empirical outcomes. They are able to give real time feedback and stimulate meaningful, constructive conversation. Furthermore, the CNL functions as a transit to disseminate information to their bedside nursing teams, as they are content experts.

Currently, both 5FG, Medical Oncology, and 4FGH, Surgical



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The CNLs and LVNs are an integral part of balancing patient satisfaction and meeting discharge goals. At this time, there are two CNL driven initiatives focusing on patient flow.

- A urology clinical pathway for cystectomy patients' targets shortening their length of stay by streamlining processes through the standardization of inpatient care.

- An abdominal transplant discharge project focused on early and efficient patient teaching.

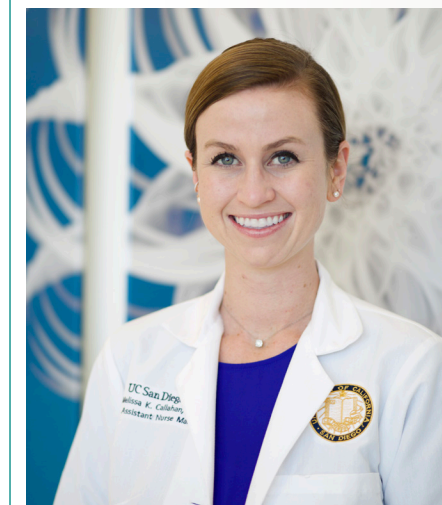
The CNLs and LVNs work collaboratively alongside bedside nurses to facilitate meeting patients' needs and help with timely discharges. For example an LVN can insert/remove IVs and hang IV fluids without additives. They can also pass medications, assist in nursing care, and provide break coverage for RN's. This results in more staff readily available to focus on optimizing key

patient outcomes.

The CNLs and LVNs in Jacobs Medical Center are the pioneers of the new care delivery model. They emulate the mission and vision of UCSD Health and are an advanced part of the collaborative team that delivers next level patient care.



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