

## **UC San Diego**

**Spring 2015 - UC San Diego Health Journal of Nursing: The Unique Power of Nursing**

### **Title**

Nursing Inquiry and Innovation: Annual Nursing Research and Evidence-Based Practice Council Conference

### **Permalink**

<https://escholarship.org/uc/item/8fw9t3c6>

### **Journal**

UC San Diego Health Journal of Nursing, 8(1)

### **Author**

Dibsie, Laura, MSN, RN, CNS

### **Publication Date**

2015-04-01

Peer reviewed

# Evidence-Based Practice/QI/Research/Innovations

A comprehensive list of all the publications and presentations by UC San Diego nurses.

NAME	UNIT	PROJECT TYPE	PUBLICATION CITATION	TITLE OF TALK OR POSTER	CONFERENCE INFORMATION
Burkard, J.F., Tyler, R., Jones, S.F., & Lee, E.T.	PACU	Podium Presentation	Abstract available at Virginia Henderson Global Nursing e-Repository.	Evidence-based outcomes to detect obstructive sleep apnea, identify co-existing factors, and compare characteristics of patient's discharge disposition.	(2014, July). Presentation presented at Sigma Theta Tau International's 25th International Nursing Research Congress, Hong Kong, China. Abstract available at Virginia Henderson Global Nursing e-Repository: 66995.
Karen Mitchell	ED Hillcrest	Podium Presentation	Abstract available at Virginia Henderson Global Nursing e-Repository.	ED community placement project (EDCPP): Right service-right venue approach in managing ED frequent users.	(2014, July). Presentation presented at Sigma Theta Tau International's 25th International Nursing Research Congress, Hong Kong, China. Abstract available at Virginia Henderson Global Nursing e-Repository.
Judy Davidson	All	Podium Presentation	Development of a Tool to Explore Blame-Related Distress. STTI Odyssey Research Conference, October 2014		
Judy Davidson	Both	Podium Presentation		Creating a culture of evidence-based practice: Design your own evidence-based practice institute	Magnet, Dallas, October 2014
Bryan Do	Hillcrest	Podium Presentation		Improving Burn Documentation: A multisystem approach	Western Region Burn Conference/ American Burn Association Las Vegas, November 6-8, 2014.
Judy Davidson and Shannon Chakedis	Both	Podium Presentation		Development of a tool to explore blame-related distress	Sigma Theta Tau Odyssey Research Conference, November 14, 2014, Ontario

\* See Pages 41-47 for the full list of Projects



# Annual Nursing Research and Evidence-Based Practice (EBP) Council Conference Nursing Inquiry and Innovation

By Laura Dibsie, MSN, RN, CCRN, CNS

Many hours of work go into planning a large conference. The Nursing Research and EBP Council members that comprise the planning committee devote time above and beyond council meetings, to provide an exceptional education event for UC San Diego nurses. The 2014 conference was the 7th annual event and was attended by 160 nursing participants. All of the attendees were honored to hear Anne B. Hamric, PhD, RN, FAAN, a national leader in compassion fatigue research, share the work being done in that arena. The Human Resources Department was a generous sponsor for our keynote speaker, in recognition of the important work Dr. Hamric is doing for health and well-being of nursing and healthcare professionals. Over 50 other projects were presented as podium and poster presentations. (See Tables 1 and 2 for speaker lists and poster presenters)

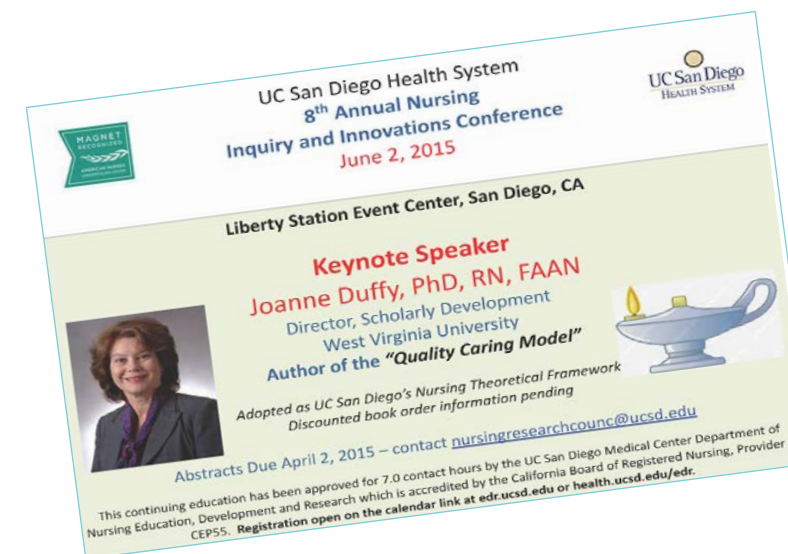
Three poster presentations were recognized for their outstanding work and received free registration to the 2015 conference.

- Sherry Careau, RN, Sulpizio Cardiovascular Center ICU: Nursing Barriers to Effective Workflow Study
- Shar Moseley, RN, Thornton PCU: Implementation of a Comfort Care Order Set
- Lisa Ross, RN The Use of iPads for the Non-pharmacological Management of Agitation in Individuals with Dementia

The day, overall, was a huge success. June 2, 2015 will be the 8th Annual conference and will return to the Liberty Station Event Center in Point Loma. It is rewarding to see the Council's conference emerging as one of the highest quality and professional nursing conferences in the area. The planning is in full swing and it is shaping up to be another stimulating and intriguing day. The keynote

speaker this year is the author of the Quality Caring Model for Nursing, Joanne Duffy, which serves as the theoretical framework for UC San Diego Nursing's new professional practice model. Potential poster and podium presenters submitted over 50 abstracts. The projects include many of those completed by unit and organizational shared governance councils, research by nurses at UC San Diego, and completed throughout the UC System and San Diego area hospitals as well. This year we are proud to add an art exhibit to our conference, celebrating the manner in which art is used to help transfer knowledge into practice. To date, nearly 100 attendees have registered, but the venue can accommodate many more! Registration is available at [health.ucsd.edu/edr](http://health.ucsd.edu/edr).

The conference planning committee is proud to be the recipient of the 2015 UC San Diego Nursing Team Award, and is determined to provide everyone with another outstanding day! We hope you can join us and look forward to seeing you there!



TOPIC	SPEAKER	ADDITIONAL AUTHORS	HOSPITAL/UNIT
Exploring Distress caused by Blame for a Negative Patient Outcome	Judy Davidson, DNP, RN, FCCM	Shannon Chakedis RN, OCN Donna Agan PhD	UCSD/EDR
<b>QUALITY IMPROVEMENT PROJECTS</b>			
Does Environment and Technology Affect Nursing Productivity: A study in medication administration	Kim Savidan MSN, RN, ENL, PHN		UCSD Thorton/ 2 East
Improving Inpatient Hypoglycemia Management	Brittney Serences MSN, RN, FNP-BC, BC-ADM	Suzanne Lohnes MA, BSN, CDE Diane Pearson NPH, RN, CDE Kristen Kulasa MD Patricia Juang MD	UCSD/EDR
Inpatients' Need for Comfort and Preferences for Integrative Medicine	Lori Montross PhD, Assistant Professor, Director	Gene (Rusty) Kalenburg MD Lauray MacElhern Kim Reynolds Dr Elen Beck Erin Raskin Andrea Trejo Ellen Nyheim MSN, RN	UCSD Inpatient Integrative Medicine
Improving Patient Sleep Quality in the ICU	Russell Haight BSN, CCRN, MICP		Sharp Grossmont
<b>INNOVATIVE PROJECTS</b>			
An Innovative Approach to Skill Mix	Cristina Cazares-Machado MSN, RN, BS		UCSD Hillcrest/ 6East
Improving Oncology Practices in Hong Kong: An international educational collaborative	Lori Johnson RN, MS, OCN		UCSD/EDR
<b>NURSING RESEARCH STUDIES</b>			
Identification of PTSD Symptoms in Post-ICU Patients	Heather Warlan PhD, RN, CCRN	Lois Howland DrPH, MSN, RN Ann Mayo DNSc, RN, FAAN Cynthia Connelly PhD, RN, FAAN	UCSD Hillcrest/CCU
Correlational Study of Sleep Apnea Patients' Characteristics with Discharge Locations	Ester Lee MBA, MNP, RN	JoAnn Daugherty PhD, RN, CNL Joseph Burkard DNSc, DPNC, CRNA	UCSD Hillcrest/ Peri-Anesthesia
The Effectiveness of Dexmedetomidine on Pain Management and Rate of Respiratory Depression on Obstructive Sleep Apnea Patients: A systematic review	Cynthia Postel, RN	Crystal Smith, RN April G Cate, RN	UCSD NICU
<b>EVIDENCE-BASED PRACTICE PROJECTS</b>			
A Developmental Approach to "Safe Sleep" in NICU Patients Preparing for Discharge	Cynthia Postel, RN	Crystal Smith, RN April G Cate, RN Peggy J Castor, RN Cristina O Sullivan, RN Erika Clemens, RN	UCSD NICU
Implementation of an Evidence-based Preceptor Program	Jessica Brady BSN, RN, CCRN	Laura Dibsie MSN, RN Patty Graham MSN, RN Frann Teplick MSN, RN Meredith Miller RN	UCSD Thornton/ICU
Inflammatory Bowel Disease: Emphasis on pneumococcal vaccine administration	Courtney Thompson RN, BAN PCCN		UCSD/GI Procedures
Bringing EBP to Inpatient Pain Assessment and Management	Cassia Yi MSN, RN, CCRN, CNS	Bev Morris RN, CNP, MBA	EDR
<b>KEYNOTE ADDRESS</b>			
Moral Distress: From Research to Translation into Practice	Ann B. Hamric, PhD, RN, FAAN		Virginia Commonwealth University

	POSTER	PRESENTER	HOSPITAL/UNIT
<b>QUALITY IMPROVEMENT</b>	Incorporating 3 clinical pathways into the Change of Shift Report Form on FMCC	Lindsey Patnaude RN, Frann Teplick MSN, RN, James Estoesta RN, MSNc, Jenffer Lockrem RN, MSNc	UCSD FMCC
	Triage Redesign Implementation and Pod Project: TRIPP	Marlena Montgomery RN, CEN, Bernadette Cale RN Beverly Kress BSN, RN	UCSD ED
	UC San Diego Thorton Hospital 2E Call Back Program	Jessica Brady BSN, RN, CCRN	UCSD 2 East
	Bridle Use: Decrease in X-ray Exposure, Nursing Cost, and Restraint Days	Felipe Gutierrez MSN, CMSRN, FNP, Donna Cahill MSN, RN-BC CNS, Janet Murphy, RN	Scripps Mercy
	Infection Control and the Psychology of Compliance	Patty Graham MSN, RN, Trish Bielski RN, MSc, Norvie Payton RN, MSc, Nancy Barker RN, Shannon Hall, RN, BSN	UCSD CCU
	Developmental and Initial Testing of a Family Presence Audit Tool	Patty Graham MSN, RN	UCSD CCU
	The role of staff education in CAUTI maintenance bundle compliance	Andrea Bacuetes SN, Megan Clowar SN, Mark Ebert SN, Katie Wald SN, Alysa Willis SN, Dianne Warmuth MSN, RN, Ellen Nyheim MSN, RN, Judy Davidson DNP, RN, FCCM	CSU San Marcos
	Promoting RN certification in the Behavioral Health Unit	Sarita Shakya MSN, RN-BC	Scripps Mercy BHU
	Evaluation of the Huddle	Roxana Hazin SN	UCSD System Wide
	Program: Regulatory readiness and knowledge	Ellen Nyheim MSN, RN, Judith Pfeiffer PhD, RN, NEA-BC, PMHCNS-BC, Judy Davidson DNP, RN, FCCM	
	Descriptive study of noise level in Progressive Care Unit	Julie Zimmerman MSN, RN	UCSD EDR
	Open visitation in the NICU	Michelle Carson RNC, MSN, Mary Ekno RN, Kathy Hoang RN	UCSD NICU
	Improving Interdisciplinary communication with the NICU	Michelle Carson RNC, MSN	UCSD NICU
	Charge Nurses' Handoff: Leading the way at the bedside	Melvin Ersando RN, Karen Armenian MSN, RN, CMSRN	UCSD 6 West
	<b>EVIDENCE-BASED PRACTICE PROJECTS</b>	Improving staff nurse compliance using the "teach-back" method	Edna Culp RN, MSNc, Judith Pfeiffer PhD, RN, Laura Giambattista BSN, RN
Implementing Evidence-based Practice to Reduce Alarm Fatigue		Julie Zimmerman RN, MS, Mark Miller RN, MSNc	UCSD 2 East
ED Community Placement Project: "right service-right venue" recidivism reduction strategy		Karen Elizabeth Mitchell, RN, MSN, Christian Tomaszewski MD, MBA, Catherina Madani MSN, RN	UCSD ER
Implementing CAUTI Maintenance Bundle in the PCU		Hsiu Jan Chen RN, Diane Warmuth RN, MSN, Hannah Chhatah RN, MSN	UCSD Hillcrest PCU
Improving Transitions of Care		Laura Giambattista RN, BSN, Sherry Carreau RN, BSN	UCSD EDR
Implementation of a Comfort Care Order Set: Improving patient comfort and nurse knowledge		Shari Moseley BSN, RN, CCRN	UCSD 2 E
Implementing a Central line Dressing Team to Decrease CLABSI		Arlene Ferrer RN, BSN, OCN, Faye Dunable RN, Aran Tavakoli RN, MSN, AOCNS	UCSD 3 W BMT/Onc
Perceptions of Progressive Care Nurses on the Value of Certification		E Balasuit RN	Sharp Memorial
Evaluating the Effectiveness of a Standardized Preceptor Program		Nicole Ward RN, CCRN, Jessica Brady BSN, RN, Frann Teplick MSN, RN-BC, CNS, Judy Davidson DNP, RN, FCCM, Patty Graham MSN, RN, Laura Dibsie MSN, RN	UCSD System-wide
Benefits of Formal Education in Mentoring		Kristina Christensen RN, BSN, Catie Madani RN, MSN, Sabrina Boone RN, MSN	UCSD TICU
Nurse Led Follow U-up Phone Calls for Stroke Patients		Elaine Moriera Ali RN	UCSD 10 East
The Use of Motivational Interviewing in Inpatient Stroke Patient Education		Monica Neslage RN	UCSD 10 East
Video Monitoring: Improving Patient Safety and Efficiencies in Increased Observation		Jay Estacio RN, Laura Vento MSN, RN, CNL, Paige Burton, MSN, RN	UCSD Acute Care
The Implementation of Bedside Shift Report Utilizing AIDET		James Lee Estoesta RN, MSNc, Frann Teplick, RN, MSN	FMCC
Implementing a Mentoring Program on Labor & Delivery		Wendy Ellingsen RN, Jocelyn Angel, RN, Fran Teplick RN, MSN	UCSD L & D
<b>NURSING RESEARCH STUDIES</b>	Nursing Barriers to Effective Workflow Study	Shari Carreau RN, BSN, Catie Madani RN, MSN, Mobe Montesa RN, BSN, MASH, Cassia Yi RN, MSN	UCSD CVC ICU
	Indication Based ECG Monitoring Reduces Inappropriate Utilization	Ala Garza MSN, RN	UCSD 10 East
	Inhaled Aromatherapy for the Reduction of Anxiety in Hospitalized Blood Marrow Transplant Patients: Pilot Study	Julie Chrisco RN, Aran Tavakoli RN, MSN, AOCNS	UCSD 3 W BMT/Onc
	The use of iPads for the non-pharmacological management of agitation in individuals with dementia	Lisa Ross BSN, RN-C, Ipsit Vahia, MD, Sarah Ranirez MS, Cheng Vang, BS	UCSD SBH

# 2014 Nursing Research Conference Poster Presentation Award Winners

## Lisa Ross, BSN, RN-C

Lisa Ross, BSN, RN-C was awarded "Innovative Poster of the Year" at UC San Diego's Nursing Research, EBP, and Innovations conference. Lisa began her career at UC San Diego Health System when she was hired as a CN II in the Senior Behavioral Health unit, a 14-bed acute care geriatric psychiatry unit located on 7 East at our Hillcrest location. She was an experienced hospice nurse as well as a psychiatric nurse. Lisa has advanced her practice by becoming ANCC certified in Adult Mental Health/Psychiatric nursing. In addition to sharing her work at the national NICHE conference in April, 2014, she was also selected to share her research at the national American Psychiatric Nurses conference in October, 2014. Lisa is actively expanding her ability to meet the varied needs of the senior population by being an active member of the Holistic Nurses Committee. See (Insert hyperlink to poster pdf) to view Lisa's award winning poster on Tablet Devices (iPad) for Control of Behavioral Symptoms in Older Adults with Dementia

Lisa is also one of UC San Diego Health System's Geriatric Resource Nurses having completed this program through the Nurses Improving Care for Healthsystem Elders (NICHE) education resource website. UC San Diego Health System earned exemplar designation by the NICHE organization for providing excellence in care for seniors through many programs in our health system. There are approximately 500 NICHE designated hospitals in the US, Canada and Mexico but only 34 exemplar sites. Nurses interested in expanding their knowledge about care for seniors on any unit in any setting can become a Geriatric Resource Nurse with tutoring provided as needed. The program is free and at completion 30 CE's are awarded. Please contact Judith Pfeiffer at jpfeiffer@ucsd.edu for additional details.

## Sherry Carreau, BSN, RN

Results of a time and motion study in the ICU at Sulpezio Cardiovascular Center ICU sought to identify barriers to effective and efficient nursing care of postoperative open-heart surgery patients receiving 1:1 nursing care. The poster representing this study, and the outcomes, was presented by Sherry Carreau, BSN, RN and received recognition from the conference participants. No significant barriers to nursing workflow were identified, and the observers noted 40% of nursing time devoted to direct patient care activities. The study provided an initial understanding of ICU nursing workflow activities in the care of the immediate postoperative care of cardiac surgery patients.

Sherry Carreau attended Nursing school at Creighton University in Omaha, NE. She worked as an ICU nurse at Creighton Hospital for 2 years, then moved to San Diego where she worked as an ICU nurse in TICU and then CVC ICU. In 2012, Sherry became a Transitions Coach and is now a member of the Nursing Education Development and Research Department. She and her husband (a UC San Diego Resident) have 3 beautiful children (5 yrs, 2 yrs, and 4months). Keeping track of, and taking care of her family fills her time away from work. She enjoys spending time with her kids, going to movies, and getting out to enjoy adult time with her husband and friends.

### Nursing Barriers to Effective Workflow Study: An Observational Study

Sherry Carreau, BSN RN, Catherina Madani, PhD(c) RN, Mobe Montesa, MHA RN, Cassia Yi, APRN  
scarreau@ucsd.edu

#### Background

- Innovative efforts at reducing waste and improving efficiency are the current reality and future challenges facing the nursing workforce
- Staff-to-patient ratios are one area under consideration as a means to reduce waste, while maintaining quality patient-and-family-centered care
- In order to properly understand barriers to nursing workflows when caring for 1:1 patient ratios assignments, a comprehensive approach must be undertaken
- A time and motion observational method has been effective in elucidating the nature of ICU nurses' work activities and offers a more in depth understanding of the ICU as a unique work environment
- The information regarding work activity patterns of 1:1 ratio assignments can be used by administrators and managers in a variety of ways, such as evaluation staffing needs, assessing training needs, understanding workload, or understanding how nursing care changes when with the introduction of technologies such as EMRs.

#### Results

**Nursing Activity Taxonomy**

Nursing Activity	Required Activity
Medication Administration	Medication Administration
Assessment	Assessment
Documentation	Documentation
Communication	Communication
Education	Education
Emotional Support	Emotional Support
Equipment Management	Equipment Management
Environmental Management	Environmental Management
Family Communication	Family Communication
Healthcare Coordination	Healthcare Coordination
Medication Administration	Medication Administration
Monitoring	Monitoring
Patient Care	Patient Care
Preparation	Preparation
Recovery	Recovery
Respite	Respite
Staffing	Staffing
Transportation	Transportation
Wound Care	Wound Care

#### Discussion

- Overall nurses spent 40% of their time in Direct Patient Care activities, 31% in Indirect activities, less than 1% of time in Delayed care activities, and 28% of time in Non-Patient Care activities.
- Nursing time spent on Direct Care across shifts was highest in the immediate postop period, as would be expected.
- This may be helpful in other institutions who perform open heart surgeries when considering nurse to patient ratios.
- Would have been ideal to observe equal number of PTE to CABG/Valve patients for comparison (PTE vs. CABG/Valve patients)
- Limitations include: possible Hawthorne effect, nurses asking the observers for more physical space which led to some inaccurate observations. Some activities have been recorded due to late care and early exitation, some observers recording nursing activities.
- Despite these limitations this study provides an initial understanding of ICU nursing workflow activities in the care of immediate postoperative care of cardiac patients.

#### Objective and Methods

**SETTING:** UCSD Sulpezio Cardiovascular Center Intensive Care Unit

**OBJECTIVE:** To identify any barriers to effective and efficient nursing care of postoperative open-heart-surgery patients receiving 1:1 nursing care

**SAMPLE:** ICU nurses caring for immediate post-op open heart surgery patients

**METHODS:**

- Descriptive Observational Time and Motion Design
- Nurses were recruited anonymously from a single unit (CVC ICU) to participate in the study
- 4 observers were trained and audited for consistency in categorizing nursing activities
- The observers utilized a Motorola Xoom Tablet to collect the data with the Time Keeper application
- This app allowed us to record simultaneous events, multiple categories, and document narrative notes.
- The observation was initiated upon the arrival of the patient to the ICU, and concluded when the patient was either 24 hours post-op or discharged.

#### Conclusions

- We did not find any significant barriers to nursing workflow
- While nurses are busy with direct patient care in the immediate post-op period, they become more busy with non-direct patient care activities as the post-op period progresses
- The data, taken as a whole, provides a rich description of ICU nursing activities for open-heart surgery patients.

#### References

Mohr, A., Chaboyer, W., Michalek, M. (2009) Understanding the work of intensive care nurses: A time and motion study. *International Journal of Nursing Practice* 15(1), 21-22

DeGarden, F., Campbell, L., Beale, E., MacLellan, J. (2008) Reorganizing Nursing Work on Surgical Units: A Time-and-Motion Study. *Nursing Leadership* 24(6), 373-381

Wendlandt, L., Huffield, C., Ling, L., Cronbach, N. (2011) How much time to nurses have for patients? A longitudinal study quantifying hospital nurses' patterns of task time distribution and interactions with health professionals. *BMC Health Services Research* 11(1), 1-19

## Shar Moseley, BSN, RN, CCRN

Shari Moseley, BSN, RN, CCRN was awarded EBP Poster of the year at the 2014 UC San Diego Nursing Research and EBP conference for her in-process project to develop a comfort care order set. Shar conducted a community survey to identify comfort care order sets from many other hospitals. She then analyzed them for commonalities and evidence-based practices. Additionally she surveyed nurses about issues related to caring for patients with comfort care status. Following her analysis, she constructed a draft UC San Diego order set, in collaboration with the pharmacy and Howell service. The order set has been approved and added to EPIC, and is available system-wide. She hopes that this inter-professional project will decrease delays in care, increase consistency in the approach to comfort care, decrease unnecessary laboratory tests and treatments, and improve symptom management.

Shar is the mother of twin 3 year olds. She says, "They comprise one half of my heart each". She is healing touch certified and donates 8 hours/month to patients at UC San Diego who can benefit from healing touch. She sits on the Infectious Disease Committee, the Nursing Quality Council, and her unit-based Shared Governance Committee. She is one of the 50 trained staff that will work in the Infectious Disease Care Unit (IDCU), if needed. Shar is grateful for all the help and support received throughout her career. She is returning to school to pursue doctoral studies and is anxious to correlate the post data from her project and publish her results.

### UCSD Comfort Care Order Set (CCOS): Improving Patient Comfort

An Evidence-Based Hospital-Wide Practice Change  
UC San Diego Health System, San Diego, California  
Shar L. Moseley, BSN RN, CCRN | smoseley@ucsd.edu

#### Catalyst

- No current order set exists for patients transitioned to Comfort Care (CC) at UCSDHS
- Current practice is for MD to first text orders resulting in:
  - Orders that conflict with goals of care not being discontinued
  - Orders missing for interventions associated with comfort at end-of-life
- UCSD Palliative Service not being consulted at time of transition in 71% of CC patients
- No required learning module for educating RN's on EOL care currently exists at UCSDHS

#### Analyze

101 Comments to the Palliative Care (Howell) service for patient comfort management care

Comparison of UCSDHS Palliative Care Orders vs. Palliative Care Orders from Other Hospitals

#### Advancing/Adopting

- Nine comfort care protocols were evaluated from hospitals for consistency and evidence-based practice
- Literature was reviewed for new and unique interventions
- A pre-survey was sent to UCSDHS RN staff to determine needs (187 respondents)
- A complete protocol was drafted and approved and submitted to EPC for build
- Education Rollout on LMS (Learning Management System) planned for June-July 2014

#### Acquire/Appraise/Ask

**SETTING:** UCSDHS is a 552 bed tertiary care Medical Health System in Southern California

**EBP Change Model:** San Diego Evidence Based Practice Institute Model, Brown, Knoff

**Internal Evidence to Support the Practice Change:**

- No currently existing CCOS
- Continuation of unnecessary, uncomfortable and costly interventions
- Evidence of Underutilization of Palliative Care Service at EOL among supported in literature as improving Quality of Death and Dying & improved patient and caregiver outcomes

**Literature Review:**

- Systematic review key words: "palliative", "end-of-life", "comfort care", "quality of death", "care bundles", and "hospice"
- Inclusion time frame: 2000-2010
- Databases searched: PubMed, CINAHL, and Cochrane
- 816 titles identified; 127 articles were reviewed; 16 titles met inclusion criteria

**PRICO Question:** Will the availability of a Comfort Care Order Set (CCOS) vs. the standard practice of MD's first texting orders when patients transition to Comfort Care (CC) improve RN confidence and knowledge of interventions for patient and family care at End-of-Life (EOL) and increase utilization of Howell Palliative Care Service at UCSDHS.

#### Conclusions: (in Progress)

- Palliative Service involvement at EOL significantly improves Quality of Death and Dying (QODD) for patient & caregivers (Curtis et al, 2002)
- CCOS will include automatic consult to UCSD Howell Palliative Care Service
- Invasive treatments are associated with lower QODD scores (Curtis et al, 2002)
- CCOS includes discontinuation of orders for ancillary tests and procedures which are counter indicated in EOL care
- Pre-survey data indicates need for RN education related to EOL issues

#### References

Curtis, JR, Parikh, DL, Engberg, SA, et al. Assessment of the Quality of Death and Dying: Validation Using After-Death Interviews with Family Members. *J Pain Symptom Manage* 2002; 24: 173-179

Moses, G, Sheppards, LR, Lorenz, KA et al. Systematic Review of Satisfaction with Care at the End of Life. *J American Geriatrics Society* 2008; 56: 124-129

Young, RD, Campbell, ML, Curtis, JR et al. Recommendations for end-of-life care in the intensive care unit: A consensus statement by the American College of Clinical Case-Medicians. *2008; 56: 605-607*

### Tablet Devices (iPad) for Control of Behavioral Symptoms in Older Adults with Dementia

Lisa Ross, BSN, RN-C, Sarah Ramirez, Alok Bhatt, Cheng Vang, Jennifer Gahan, Elizabeth Ryer, Omid Salaami and Dr. Ipsit Vahia

#### Background

- Polypharmacy, and use of antipsychotic medications, is a rapidly growing area of clinical concern.
- Medications to manage behavioral symptoms in older adults can have serious adverse effects including falls and delirium.
- Medications have limited efficacy in controlling problem behaviors.
- Evidence-based safe and cost effective management of behavioral symptoms in dementia include non-pharmacologic interventions.

#### Results

**Figure 1: Patient M**  
82 y.o. Caucasian Female;  
DX: Dementia NOS, Psychosis NOS;  
MoCA: 8/30

#### Discussion

- Preliminary data indicate that use of iPads for older psychiatric inpatients is both safe and feasible.
- Engaging patients in activities that recruit visual attention can reduce agitation.
- Use of technology in older adults can be limited due to lack of familiarity with touch-based devices.
- There may be difficulty engaging patients with delirium, lower cognitive functioning and/or visual or hearing impairments.
- Is it the iPad or the personal interaction which helps control the symptoms?
- We have also identified other practical uses, such as translation and to facilitate communication with the aphasic patient.

#### Objective and Methods

**SETTING:** UCSD Medical Center Senior Behavioral Health Unit

**OBJECTIVE:** To determine whether iPads as a clinical tool for patients at risk of behavioral agitation may reduce the use of behavioral PRN medications.

- Assess older adult's ability to familiarize themselves with touch screen technology and assess feasibility and safety of iPad use.
- Establish protocols for individualizing iPad and app selection.
- Outcome Measure:** Reduction in the use of PRN antipsychotic medication.

**THEORETICAL FRAMEWORK:** Three theoretical models for non-pharmacologic interventions:

- The unmet needs model addresses underlying needs causing inappropriate behaviors.
- Behavior/learning model-problem behaviors are learned through reinforcement by staff who provide attention when problem behavior displayed.
- Environmental vulnerability/reduced stress-threshold model-reduced stimulation levels or provision of relaxation techniques.

**TREA (Treatment Routes for Exploring Agitation):**

- Focus on: prevention, accommodation and flexibility for intervention.

**METHODS:**

- iPads are used for purpose of engagement and also for acute de-escalation on the unit.
- Nursing staff and volunteers supervise iPad use.
- Primary outcome measure is reduction in the number of elective PRN doses administered.

#### Conclusions

- This non-pharmacological intervention may reduce the use of medication use which may in turn decrease harm in the geropsychiatry patient.

#### References

Cohen-Mansfield J. Nonpharmacological Management of Behavioral Problems in Persons with Dementia: The TREA Model. *Alzheimer's Care Quarterly*. 2000; 1: 22-34.