SCCM Choosing Wisely KEG meeting June 15, 2022

Choosing Wisely: National APRN Collaborative

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- APRNs bring value often behind the scenes. These roles are cost effective, provide return on investment. This session highlights ways APRNs can impact APRN led initiatives
- What quality metrics that can be attributable to a PA or NP on the team? Sometimes difficult to tease out. They began by integrating specific indicators into EHR, ie, DVT prophylaxis, weaning to extubate, time on mechanical ventilation, outcomes (cauti, clabsi, etc.).
- Literature highlighting ways APRN impact outcomes.
 - Outcomes of Nurse Practitioner-Delivered Critical Care. Chest 2016;149:1146-1154.
 - No difference in 90-day survival, similar ICU LOS, lower risk-adjusted hospital LOS, Lower ICU mortality, Lower ICU readmissions
 - Outcomes of adding acute care nurse practitioners to level I trauma service.. J Trauma Acute Care Surg 2014;76:353-357.
 - Increased volume of cases, reduced ALOS and hospital charges, increased direct discharges and care team satisfied/found addition of ACNPs beneficial.
 - Dedicated RRT: decreased hospital and ICU LOS and mortality; increased throughput,
 ICU bed days saved, care team satisfaction.
 - Expanded services in grant-funded project re: neonatal abstinence syndrome; midwifery and women's care.

Vanderbilt APRN Choosing Wisely Campaign

- A lot of work completed in the beginning to lay the groundwork before they got started. Not everyone is familiar with choosing wisely. They pulled very interested NP and PA to identify what they wanted to target. Encouraged selecting only 1 or 2 targets (labs, x-ray, etc.) and made sure everyone on board and engaged. They worked for about a year creating information sheets, inservices, etc.
- CVICU targeted chest x rays 130% at baseline (patients getting more than 1 CXR per day). CXR rates decreased 17% in five months
- Reduce blood draws in burn ICU. Reduced unnecessary lab draws and also demonstrated cost benefit

Forming the national collaborative

- They wanted to launch a national collaborative to meet monthly. APRN teams who had completed projects would present. Then as outside teams wanted to implement projects, this collaborative team was able to provide coaching.
- Published on this national collaborative lasted 3 years.
- Wide variety of choosing wisely initiatives were undertaken. Outpatient, ED, ICU, etc. Promoting mobility for hospitalized older adults.
- These teams implemented a number of high value care initiatives.