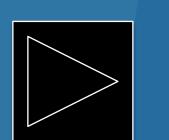
HARVARD MEDICAL SCHOOL Hematology/Oncology Admissions

Tara Meekins RN and Tonia Valeri RN Ambulatory Units: Shapiro 7, Gryzmish 7

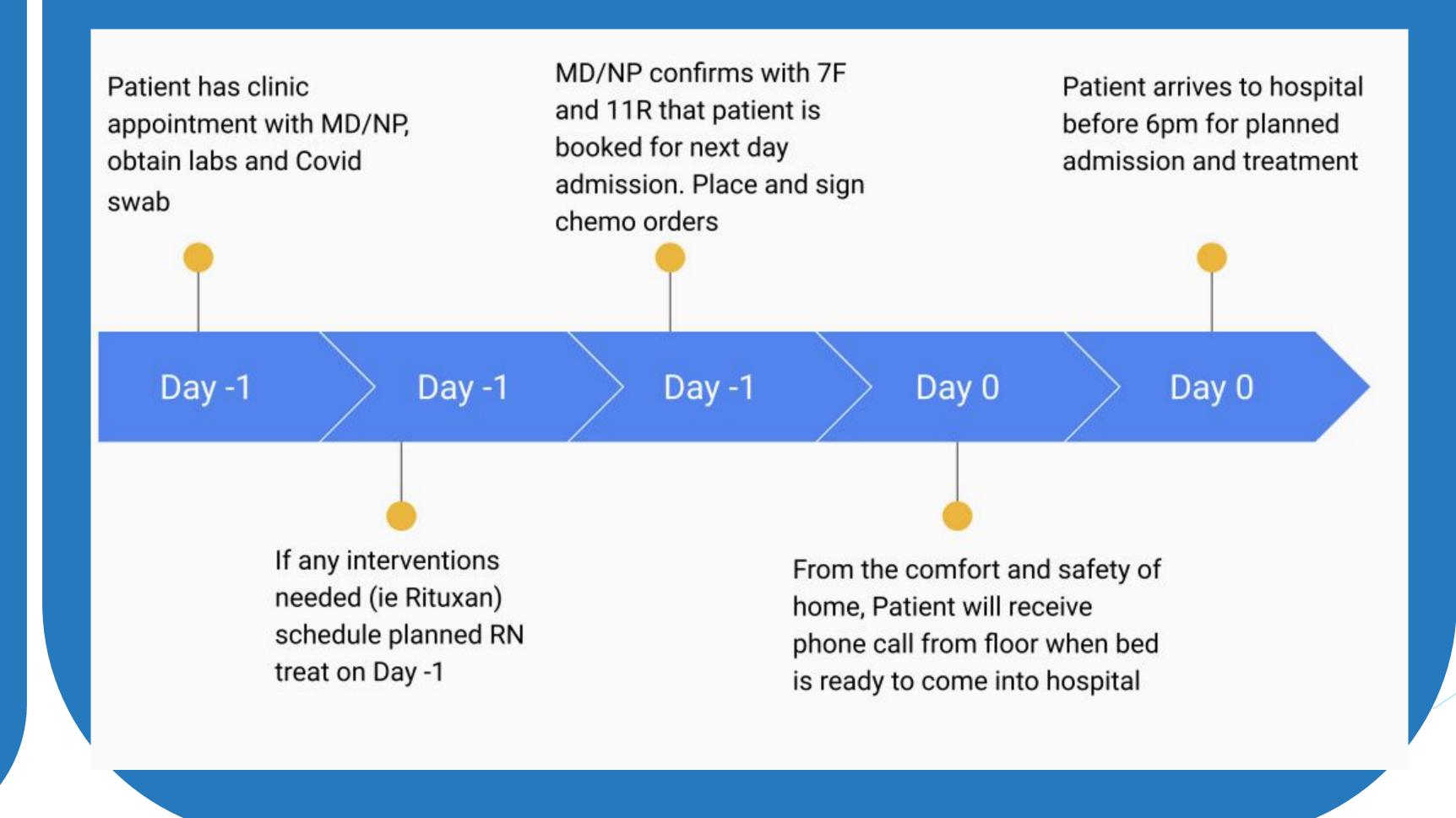


Introduction

Our project is geared towards Hematology/Oncology clinic patients who have scheduled clinic visits with same day admission for chemotherapy. Our clinic volume has increased with higher levels of acuity as well as the added burden of social distancing during the Covid pandemic which has made it difficult to accommodate patients waiting in clinic purely for an available admission bed which can take many hours. In order to provide treatment for our scheduled treatment patients safely and without excessive delay, we needed to alter our planned admission process.

Method

The change of practice adopted is to schedule the patients for planned chemotherapy admissions to clinic 24 hours before their planned admission. The clinic visit entails a pre-admission Covid swab, labs, any schedules test (i.e. EKG/PFT/CXR) and physician exam that will authorize next day admission. This also allows for high cost drugs (ie Rituxan) to be administered on the day prior to admission.



Conclusion

Changing our planned admission method to having our patients come to clinic 24 hours in advance to their planned admission (as opposed to same day) has increased patient and health care team satisfaction.

This has resulted in a quicker clinic visit for the patient and allowed the patient to wait in the comfort of their home the next day to await for a hospital bed for their planned in-patient chemotherapy regimen.

This increases patient safety as it allows time for a Covid swab to result and helps support social distancing by reducing crowding in the clinic.

This has also helped healthcare team members, giving adequate time to analyze lab results and organize appropriate oncology intervention with appropriate bed placement (ie shared or private room).

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Advantages of next day Planned Admits

Increased patient satisfaction, allowing them to wait comfortably at home for an available bed as opposed to in a busy clinic lobby for prolonged time.

This will also help increase safety, ensuring a covid swab is done with a reliable result time for that covid swab before admission.

Next day admission allowed a quicker clinic visit which reduced waiting for a bed in a crowded lobby.

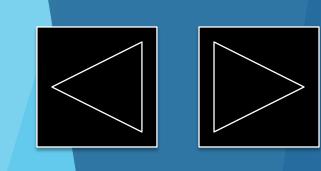
Allows clinician to verify that patient is in the book for planned admission to ensure a bed will be available the next day.

Limited bed holds for patients that may not be eligible for the planned admit due to abnormal lab results. This results in better utilization of limited in-patient beds.

Fiscally, this allows providers to charge for a clinic visit as it won't be on same day as admission.

This also allows us to charge for any RN intervention or treatments such as administration of Rituxan as it is separate from admission day. We can't credit a charge on the same day as admission from the clinic.

Resource Nurse can now focus on supporting nursing care to the scheduled patient treatments in the clinic and focus on unplanned admissions as opposed to acting as a liaison to the same day admission process (checking bed status and providing updates and then transportation for patient to get to floor).



Advantages of next day **Planned Admits**

This allows physicians time to fully review lab results along with patient evaluation to determine safety of planned admission for chemotherapy.

This also allows time to write the chemotherapy regimen in advance (Day -1), ensuring it is signed and ready to be verified on admission (Day 0).

This gives time for all the healthcare team members to prepare for the admission, including nursing and pharmacy.

Ultimately this reduces delays, increases safety and satisfaction for the patient being admitted.

Proposal for Planned Admissions

- 1. Moving forward, all planned admissions will have Clinic visit (MD/NP appointment) with labs and Covid swab done the day prior to planned admission. Along with labs and covid swab, the practitioner will verify with 7F or 11R that the planned admission is in the book and that the patient is cleared to be called from home the following day to come in when bed is ready. MD will place and sign future Chemotherapy order. Day -1
- 2. Patients will be called at home by the admitting floor the following day when room is available to come into the hospital for planned admission.

Day 0

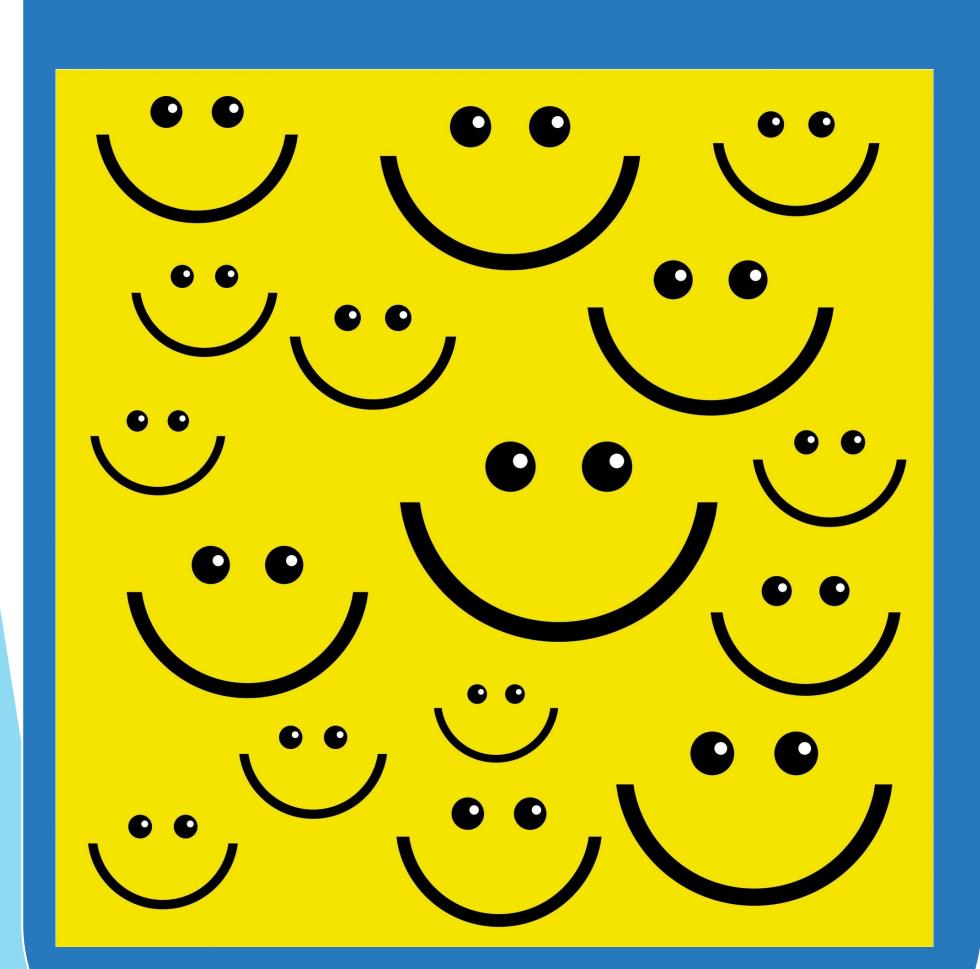
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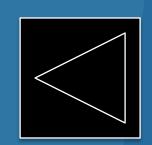


Allowing nurses the time to evaluate practice and work environment to find areas of improvement and empowering them to help implement changes to these areas help improve patient satisfaction and outcomes along with increased workplace satisfaction.



Disadvantages of Same Day Admissions

- Patients voice frustration and dissatisfaction with the long wait time before their bed is available for them. They voice feeling "forgotten about" when they are left in an exam room or in a busy lobby.
- As the clinic volume has increased with higher levels of acuity, it is becoming very difficult to accommodate patients waiting in clinic purely for an available admission bed. We have limited spaces to provide scheduled treatments and have increasingly had a waiting list for patients to come back to treatment area due to no beds or chairs available. This results in a very full lobby and delays in care.
- It becomes harder to provide safe environment with social distancing with clinic volume increasing.
- It is and will continue to be important to have a covid swab result to determine treatment and bed placement, there are times when same day admissions have not had their covid swab done or resulted in time.
- There are instances when planned admissions were not communicated correctly and the floor has no bed reserved, resulting in a scramble to find a bed, sometimes after 6pm which delays onset of planned treatment to the next day.
- Treatments or interventions done in clinic can not be billed if patient is admitted on same day. Hospital does not get reimbursed for high cost drugs like Rituxan administered in clinic if patient is admitted the same day.



Changing Disadvantages to Advantages

Shapiro 7 - Gryzmish 7 - Feldberg 7

This change was initiated by the nurses in the ambulatory setting to help with our admission process. Oncology is increasingly moving to the outpatient setting which has resulted in large clinic patient volumes. This is a challenge to our limited physical space and limited time in the clinic day. The Covid pandemic has added to this, having to ensure proper patient symptom screening and maintaining social distancing.

Our planned admission process was one area we focused on to help reduce crowding in the clinic. We worked in collaboration with the physicians, admitting floors and pharmacy to ensure the proposed changes were safely implemented.