

Title:

Failure to Rescue Nursing Grand Rounds

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Session Title:

Evidence-Based Practice Posters Session 2

Keywords:

failure to rescue, nursing practice and trends in patient care

References:

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Abstract Summary:

Failure to Rescue Nursing Grand Rounds was presented to bedside nurses and nurse leaders at a large academic medical center. Four sessions were presented in 2016 with at least fifteen to twenty to be presented in 2016,

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
By the end of this session learner will be able to analyze factors that contribute to failure to rescue events	Power point explaining typical failures in patient care, real life case providing background information of patient, along with relevant factors which were missed or overlooked leading to failure to rescue event. Interactive content allowed for pauses in material, which allowed participants time to ask and answer questions from content experts

<p>At the end of this session learner will be able to construct events in nursing practice which could assist in preventing failure to rescue events</p>	<p>Audience explaining how they will take information provided to prevent failure to rescue events in their own practice: discussion of the use of emergency response team, chain of command, analysis of patient trends, subtle changes in patient status, understanding and using hemodynamic trends.</p>
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Abstract Text:

Failure to rescue (FTR) is explained as a healthcare professional's failure to recognize changes in a hospitalized patient's condition which could result in life threatening consequences (Thielen, 2014). Another definition of FTR is the death of a patient due to complications which were not acknowledged early in treatment and resulted in a patient death (Patient Safety Movement, 2014). The United States healthcare system incurs a two billion dollar price tag on FTR events that result in 68% of patient deaths include surgical patients who had treatable complications, pressure ulcers, post-operative respiratory failure, and post-operative sepsis. (Patient Safety Movement, 2014).

FTR does not only involve failure to recognize a change in a patient's condition, but must include continuous observation regarding a patient's current status. Recognizing and taking necessary steps when changes occur, as well as notifying members of the treatment team. (Garvey, 2015). Nurses, especially those at the bedside, are trained in patient assessment. Nurses must also be trained in recognition of patient status changes with critical analysis of these changes that could lead to patient harm (Garvey, 2015). The education of nurses should include observing trends such as alterations in laboratory values, changes in mental status, and vital sign variations which could lead to early identification of patients at risk for FTR. These changes would lead to interventions which could prevent FTR events.

In nursing school student nurses are taught disease processes, patient assessment, and tasks necessary to begin a career as a competent and safe nurse. Though evidence-based practice (EBP) is taught to BSN prepared nurses, the assimilation of EBP is enhanced in daily nursing practice. Nursing grand rounds (NGR) assists front line staff with the integration of EBP, improved understanding regarding research, and up-to-date research findings which can be incorporated into daily nursing practice (Hagle & Millenbruch, 2011). NGRs should not just be a continuance of education, but should include experiential learning that includes engaging front line staff. The Goals of NGRs are necessary to develop outcomes which enhance the nursing profession. Goals include prolonged knowledge and nursing skills through a continuum of care which may assist in Benner's novice to expert framework (Furlong, D'Luna—O'Grady, Macari-Hinson, O'Connel, & Pierson, 2007). NGRs, along with assisting with professional development would support further skill possession and knowledge necessary to translate EBP and research into practice (Furlong, D'Luna—O'Grady, Macari-Hinson, O'Connel, & Pierson, 2007).

The case study format is widely used in medical grand rounds and NGRs (Amola, Brandenburg, & Tucker, 2010). A patient case study can assist nurses to review care provided to the patient, assess patient's pathophysiology and disease processes, examine evidence-based and best practices related to care, and comprehend the "big picture" related to that particular patient (Amola, Brandenburg & Tucker, 2010). In presenting a case study the nurses can review all factors related to care and apply their own nursing practice to the presentation.

In an academic medical center a team of nurses which included a Clinical Nurse Specialist, Quality Nurse Specialist, Manager of the Emergency Response Team, and a nurse on the Emergency Response team looked at failure to rescue events at their institution. Four cases were presented to nurses at the institution in an interactive format between the presenters and nurses. A pre questionnaire was given to participants on Failure to Rescue, along with a post questionnaire sent a month later to these participants.

In the three months prior to these nursing grand rounds there were 10 documented Failure to Rescue Cases, three months after there were five cases. The plan for this year is to expand the number of times Failure to Rescue is held and to plan places in the institution that are more accessible to the bedside nurse, along with WEBEX presentations.