



## **ST. CLOUD HOSPITAL DEVELOPS ELECTRONIC PLANS OF CARE LIKED BY NURSES AND USED TO IMPROVE OUTCOMES**

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— Roberta Basol, care center director at St. Cloud Hospital

### **OVERVIEW**

When leaders identified that electronic plans of care (EPOCs) were not being fully leveraged at St. Cloud Hospital, they realized that a means of making the tools more appealing to end-users was needed. Relying on evidence-based content from Zynx Health, the hospital was able to produce new, streamlined EPOCs that ultimately provide nurses with the content that they want—and need—to enhance care delivery.

### **CLIENT**

A part of CentraCare Health, St. Cloud Hospital is the largest healthcare facility in central Minnesota. The hospital offers a full spectrum of inpatient and outpatient services, from state-of-the-art care for heart disease and cancer to preventive health screenings and behavioral health counseling. St. Cloud has nearly 5,000 employees and a medical staff of approximately 400 physicians.

A survey of nurses, which rated the satisfaction levels on a 1 to 4 scale, revealed satisfaction improved as follows:

- **2.44 to 2.76** with the statement “Care plans contain pertinent patient problems.”
- **2.55 to 2.89** with the statement “Care plans are built to be used by competent clinicians.”
- **2.40 to 2.88** with the statement “Patient outcome standards are part of the documented plan of care.”
- **2.20 to 2.53** with the statement “I am able to identify the source of evidence for a care plan intervention.”
- **1.92 to 2.15** with the statement “I use the content of the care plan to plan the care of my patient for my shift.”
- **1.72 to 2.30** with the statement “I use the content of the care plan of my patient to move to the next level of care.”
- **1.95 to 2.71** with the statement “The care plan directs the education plan for the patient.”
- **2.20 to 2.67** with the statement “The content of the care plan represents current evidence-based practice.”

## CHALLENGE

Getting to the “fruit-at-the-bottom-of-the-pie” can sometimes prove challenging when it comes to healthcare information technology. Leaders at St. Cloud Hospital wanted to make sure that clinicians could easily access the really “sweet” content in EPOCs, making the tools eminently more valuable in the quest to deliver optimal care cost efficiently.

The problem was that the hospital had built its care plans using content from home grown language and complex terminology. This resulted in users being unable to obtain the information they desired. In essence, nurses lacked access to the evidence-based best-practice content necessary to make real, positive differences in the way clinical care was delivered.

“Our biggest concern was that the nurses really didn’t find our current care plan content valuable or meaningful,” explained Roberta Basol, RN, care center director at St. Cloud. “When we started on EPIC in 2007, we built our own care plans with nursing content. We didn’t do a good job with documenting progress toward goals. It wasn’t evidence-based. It was a mess.”

## SOLUTION

In November 2012, leaders decided to use ZynxCare, which enables the hospital to leverage evidence-based content to create EPOCs that reduce care disparities, prevent avoidable and unnecessary readmissions, and minimize errors. To obtain clinician buy-in, leaders emphasized that all this new clinical content would be seamlessly integrated into the existing EPIC electronic medical record.

“We had to make sure that our staff really understood that functionality was EPIC—and content was from Zynx. The evidence-based products that Zynx supports really allow you to make that content customizable for what your needs are, and that was perfect for us,” Basol noted.

In addition, leaders then ensured that the EPOCs would resonate with the clinicians.

“We had to come up with a care plan that is more meaningful—something that the nurses would actually use, instead of something that they would routinely bypass,” Basol stated.

As such, the EPOCs include a statement of the medical condition, a broadly written goal that describes the expected results, and the care treatment required to resolve the presenting problem.

Perhaps the most important guiding principle lies in making sure that the EPOCs focus on the unique and relevant problems of each patient. In essence, the EPOCs should center on answering a single question: “What is keeping this patient from moving to the next level of care?”

“We had to keep in the forefront that anything we put in the plan of care was related to moving the patient to the next level of care,” Basol explained. “And, that for some patients, depending on what’s going on with that patient, there may be only 1 problem on their care plan. In the past, we might have had 15 problems in a care plan, with none being particularly relevant.”

For example, when a patient with diabetes is admitted to the hospital for a hip fracture, the details related to diabetes care do not need to be included in the interdisciplinary plan of care if the diabetes does not prevent the patient from advancing to the next level of care.

Similarly, instead of building a care plan that bombards users with a variety of evidence and orders, these plans are more focused for the following reasons:

- The developers acknowledge that various elements of the care plan are found throughout the patient's record in a variety of documents (eg, provider orders, notes, clinical documentation) and concede that it is unnecessary to repeat this information.
- The developers recognize that clinicians are competent and experienced. As such, the plans are not written for a novice who seeks detailed instructions to every aspect of care. This individual completes education, orientation, and, with experience, becomes a competent clinician. For someone who has already gained the knowledge and skills needed to provide compassionate, safe, and effective care as defined within the practices of their profession the content of the EPOC supports efficiency and provides direction.
- The developers sought to eliminate orders and evidence that are considered a minimum standard of care (eg, "orient the patient to the unit" or "give the patient a bath").



## RESULTS

With these principles in place, St. Cloud has developed more than 50 new, more streamlined EPOCs, all of which rely heavily on content from Zynx Health. According to a survey of the hospital's nurses, the care plans are providing better access to content that can truly make a difference in patient care. More specifically, overall satisfaction with "the way care plans are built and used for patients" increased from a score of 2 to 2.5 on a scale of 1 to 4 (with 1 being the lowest level of satisfaction and 4 the highest).

In addition, the new care plans scored higher on the following measures:

- Are built to be used by competent clinicians.
- Contain pertinent patient problems.
- Patient outcome standards are part of the documented plan of care.
- Content is actually used to plan the care of patients each shift.
- Content is leveraged to move the patient to the next level of care.
- Support the ability of the clinical team to provide consistent care.
- Helps St. Cloud Hospital reach clinical and financial outcome goals as defined through value-based purchasing and core measures.



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