



Hillrom™



CARE OF CARDIAC MONITOR PATIENTS

UT Medical Center Modernizes the Care of Cardiac Monitored Patients Resulting in Improved Patient Safety.

OVERVIEW

CUSTOMER

UT Medical Center

LOCATION

Knoxville, Tennessee

CUSTOMER PROFILE

- A 685-bed hospital and one of the top cardiac centers in the southeast.
- Cardiac monitored patient population utilized an average of 89% of the 196 channels allotted for monitoring.
- Patient throughput hindered due to constraints of Biomed networks resulting in some inpatient units only monitoring 20% capacity with 80% of beds being without the ability to monitor patients.
- Inflexibility of cardiac monitoring lead to inefficiencies in staff utilization, staff oversight, and asset management.

CHALLENGE

- Operating under a decentralized (unit-based) cardiac monitoring system that was dependent upon a paper-heavy manual process.



CENTRALIZATION & MODERNIZATION OF CARDIAC MONITORING

SOLUTION

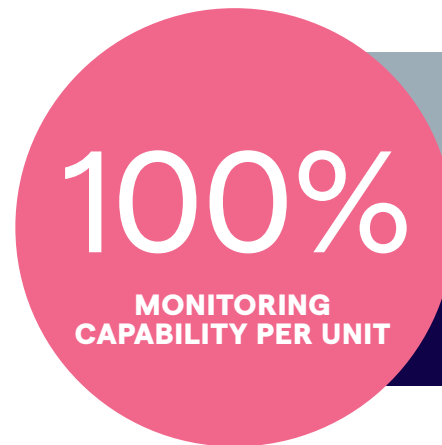
Debra Barton, Administrative Director Patient Care Services Coordinator, witnessed each of these inefficiencies firsthand, "For our facility, non-centralized

meant non-standardized." Leadership agreed that centralization of cardiac monitoring was a necessary step toward the goal of improving patient safety and enhancing patient care. However, with all of these challenges in mind, simply approving a facilities project would not offer a comprehensive solution. When the nurse is removed from the primary site of monitoring, it is imperative to ensure that an effective communication and documentation process is in place.

Technological advances in healthcare are abundant and organizations are comfortable utilizing solutions to help adjunct patient care. According to Brant Sloan "the difficulty lies in matching the proven and effective technology that is best suited to support the organizational initiatives." Sloan was tasked with leading UT Medical Center through an internal evaluation of policy and procedure and researching which digital solution best met their needs to solve the challenges associated with monitoring. The health system required a technology solution that makes the centralized monitoring process more innovative, collaborative and efficient. Excel Medical offered this technology in the form of a vendor agnostic, paperless documentation solution that enhances clinical collaboration and solves the challenges UT Medical Center faced. The decision was clear to Sloan, "Centralization and modernization of cardiac monitoring could not have been actualized without the Excel Medical's technology platform."

RESULTS

Excel Medical provided a technology platform to modernize the cardiac monitoring process. To the end users (leadership, clinicians, and monitor techs), the results were immediate and significant.



PREVIOUS STATE
BEDS WITHOUT THE ABILITY TO MONITOR PATIENTS

CURRENT STATE
100% MONITORING CAPABILITY PER UNIT

VS



PREVIOUS STATE

| COMPONENT | CHALLENGE |
|---------------------------------|--|
| Documentation | Incomplete and non-standardized. |
| Communication and Collaboration | Difficult and siloed across clinical care teams. |
| Staff Utilization | 10 Monitor Tech required per shift; Dual roles, eyes-off-monitor; Nurses performed tasks better suited for unlicensed personnel. |
| Resources | Recurring costs: printer paper, ink, and printer maintenance, EKG strip paper, adhesive, mounting sheets, shredding costs, and scanning to medical records. |
| Access to Cardiac Data | Limited; Clinicians wasted time locating cardiac data; Lack of mobility options in sharing data; Inability to view near real-time waveforms without being tethered to the central station. |
| Asset Utilization | Restricted ability to track assets; Bed-centric approach; Inability to automatically transfer patient data into the EMR. |
| Throughput | Segmented processes on patient movement; Inefficient use of capital, physical bed locations, and human resources. |
| Competency & Compliance | Manual audit process limits oversight and segregates staff supervision. |

CURRENT STATE

| COMPONENT | RESULTS |
|---------------------------------|---|
| Documentation | Comprehensive; Electronic documentation allows for quick interpretation and annotation; Nurses easily validate strips at their convenience. |
| Communication and Collaboration | Data is easily shared across disciplines; Alarm data can be seen immediately after notification. |
| Staff Utilization | 4 Monitor Tech required per shift (60% staff reduction); A team approach and role independence. |
| Resources | Paperless process; Drastic reduction in costs of consumable resources and physical capital. |
| Access to Cardiac Data | Immediate; The care team can access alarm strips and near real-time waveforms remotely; Record keeping is standardized and data is accessible throughout the continuum of care. |
| Asset Utilization | Ability to relocate and track assets from central location; Cardiac monitoring is patient-centric. |
| Throughput | 100% monitoring capability per unit; Systems approach to optimizing patient movement; Reallocation of current assets based on supply & demand. |
| Competency & Compliance | Clinical leadership utilizes embedded reporting tools to track compliance and staff competency. |



CONCLUSION

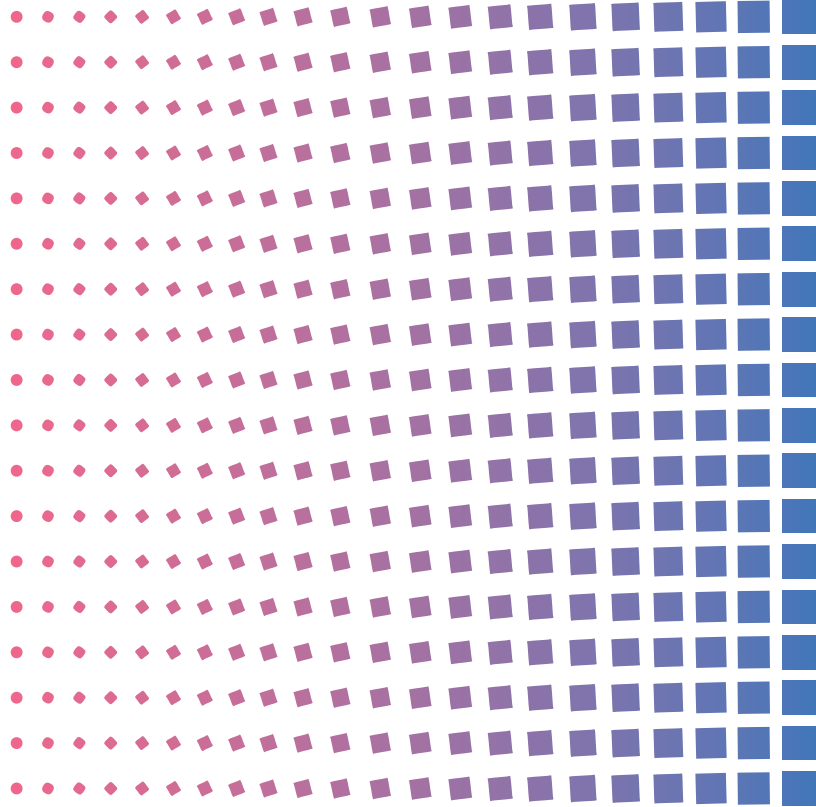
UT Medical Center embarked on a journey to enhance patient care. Like many healthcare organizations, aligning strategy and solutions for clinical efficiencies can be overwhelming. UT Medical Center found a partner committed to adapting solutions to fit their desired future state, making clinical adoption of the innovative technology and solution their highest priority. The addition of this transformational solution was made possible by visionary leaders at the medical center. Debra Barton and Brant Sloan continue to champion initiatives and leverage the technology to take the next steps toward “reducing the footprint of telemetry.” Through incremental milestones UT Medical Center is creating lasting change that is truly impacting the care of the cardiac telemetry population.



PREVIOUS STATE
10 MONITOR TECH
REQUIRED PER SHIFT

CURRENT STATE
4 MONITOR TECH REQUIRED PER
SHIFT (60% STAFF REDUCTION)

VS



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For more information, please contact your local distributor or Hillrom sales representative at 1-800-535-6663.

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References

1. The University of Tennessee Medical Center. Hillrom/Excel Medical Customer Interview. Data on File with Hillrom.

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