Top Story

Technology and the State of Falls Prevention – a Talk with Pat Quigley

AvaTalk recently interviewed Patricia Quigley, PhD, MPH, ARNP, Associate Director, VISN 8 Patient Safety Center of Inquiry in the Department of Veterans Affairs. The wide-ranging conversation included why fall rates are not significantly declining, the need for better risk assessment, what the VA is doing about falls and why video monitoring is such a promising addition to fall prevention strategies. Quigley is nationally known for clinical research, publications and presentations on patient safety, particularly in fall prevention. Read the interview.

Clinical Research

In JONA: AvaSys Saves UCSD $2.5 Million in 2 Years, a 29-Fold ROI

The Journal of Nursing Administration (JONA), a leading publication for nurse executives, in early July published a peer-reviewed article on results from a pilot of the AvaSys TeleSitter Solution at University of San Diego Health System. The JONA article describes how the 595-bed, Magnet-designated health system purchased six mobile carts and dramatically reduced sitter costs over two years, saving $772,000 in the first year and $1.7 million in the second. With the total cost of the AvaSys system in the first two years being $82,482, the return on investment calculated system-wide, combined with a nurse-driven sitter protocol and administrative oversight, was 29.2 times the initial investment.

In the same time period, the health system outperformed or...
equaled benchmarks in most quarters for falls and falls with injury. The article concludes: “Over time, the UCSDHS experience has demonstrated that nursing culture can shift and trust in the effectiveness of a new technology such as video monitoring to address patient safety.” Read the full article.

**AvaSure in the News**

**Video Monitoring Reduces Falls and Cuts Hospital Costs**
Hospitals that deploy remote video monitoring systems staffed with dedicated, trained observers can reduce patient falls significantly, avert employee injuries and reduce associated costs, Healthcare Risk Management reports in a major feature article on AvaSys and TIRR Memorial Hermann in Houston. Read more.

**Madonna First Hospital In Nebraska To Deploy Video Monitoring System**
Madonna Rehabilitation Hospital is now the only hospital in Nebraska to have installed the AvaSys video monitoring system to enhance the care experience for patients and their families, NBC affiliate WOWT in Omaha reports. Read more.

**AvaTalk Blog**
This blog appears at avasure.com and is updated frequently.

**Vendor, Health System RNs Should Partner to Improve Care**
*By Lisbeth Votruba, MSN, RN, PCCN, Vice President of Clinical Quality and Innovation, AvaSure*

“Are you ready to leave the Dark Side yet?”

Rhonda Collins, MSN, RN, Vice President and Chief Nursing Officer of Vocera Communications, still gets asked this question by former colleagues years after leaving the world of hospital nurse leadership. “I used to think it was funny,” she told me, but now she knows it reflects a misunderstanding of the role nurses who work for vendor companies can play in improving patient care. Read more.

**Spotlight**

‘Jack in the Box’ Goes Beyond Call of Duty
Jack Halmon, an AvaSys monitor tech at HCA St. David’s North Austin Medical Center in Austin, Texas, won the hospital’s 2015 Patient Care Technician/Unit Clerk Excellence Award. In addition to his success in redirecting patients
at risk of harm, Halmon became a key resource for patient safety, helping streamline the documentation his fellow monitor techs complete hourly on the patients they are observing, said Jane McCurley, DNP, MBA, RN, Chief Nursing Officer at St. David’s.

Halmon is dedicated to the patients he is telemonitoring; he introduces himself through the AvaSys mobile unit, assuring them he is there for their safety and will assist them with calls to the nurse or anything they may need, McCurley said. When he gets coverage to leave the monitoring station for a short time, he will go to the patients’ rooms to introduce himself in person.

“Families have reported they feel relieved to now go home and rest, knowing Jack, or another caregiver, will carefully watch over their loved one,” McCurley said. One family gave the mobile unit the name “Jack” even though they knew Jack was not working every day. Another family named the unit “Jack in the Box.”

One event cited in the award nomination as an example of Halmon going above and beyond the call of duty involved a patient who seemed to be less and less alert when Halmon would talk to him via the monitor unit. He then noticed the patient breathing a bit faster. He called the nurse and the patient was checked but found to be stable. A short time later the patient appeared to be sleeping. Halmon called to the patient but only got some moans. “He zoomed in the camera lens and noticed the breathing was significantly faster and now labored,” the nomination reads. “He called over to the telemetry PCTs, who sit only 10 feet from him and inquired about the patient’s heart rate. They reported it was now in a faster but regular rhythm. Jack immediately called the bedside nurse to assess the patient due to his respiratory status; the nurse went in, assessed the patient, called a Rapid Response and the patient was transferred to ICU for intensive monitoring and care.”

Great Catches highlight our clients’ success stories in averting patient injury, as well as new uses for this technology. We invite our clients to submit their Great Catches to Lisbeth Votruba at lisbeth.votruba@AvaSure.com.

AvaSys monitor techs (AMTs) take pride in compassionately protecting some of the most vulnerable patients. They tend to focus on fall reduction as a metric of patient safety. However, there are many other benefits that are more difficult to quantify. Four stories
demonstrate how AMTs improve family experience, patients’ emotional well-being, staff efficiency and infection control compliance. Read more.

Patient Safety Update

A ‘Never Event’ Highlights Security Challenge for Hospitals
The death of a 26-year-old man who eloped while being treated for a traumatic brain injury illustrates a major challenge facing hospitals around the country: How can a therapeutic institution provide needed care and reasonable access while ensuring the safety of all patients, including some who may be panicky, psychotic or brain-damaged and want to leave against medical advice? Read more.