Welcome to August. I hope all of you are having an enjoyable summer.

This issue shares some of the latest ways Vanderbilt nurses are expanding their practice. In the story above, you will read about VUMC receiving a $3.9 million grant from the state Department of Health to examine innovative and alternative models of nursing practice. It is exciting to consider the possibilities from this multidisciplinary group, which includes a large team of nurses.

In addition, our colleagues at Vanderbilt University Hospital who are piloting the first virtual nurse program at VUMC. This program allows specifically trained nurses to complete tasks remotely, allowing nurses at the bedside more time to care for our patients in person. This is another example of how Vanderbilt nurses are working to improve care for our patients and families as well as improving job satisfaction for nurses. Kudos to all involved.

Enjoy this issue,

Marilyn Dubree, MSN, RN, NE-BC, FAAN

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VUMC starts first virtual nurse program

VUMC RECEIVES STATE HEALTH GRANT

Vanderbilt University Medical Center has received a $3.9 million grant from the Tennessee Department of Health to evaluate innovative models of nursing care that include screening and responding to social drivers of health to better meet the needs of all VUMC patients.

The state’s Healthcare Resiliency Program – Practice Transformation and Extension Grant is intended to “encourage innovations in the delivery of health and healthcare services that foster improved health outcomes,” according to grant criteria. “This could include innovative or alternative care delivery models, enhanced care coordination, investments in technology, innovation, or partnerships which have the potential to change and improve how services are delivered, particularly with respect to minority, rural, and other traditionally underserved groups.”

Vanderbilt’s approved grant project brings together a 27-member multidisciplinary team including researchers, VUMC clinical staff, and faculty from Vanderbilt University School of Nursing to solve two main issues — how to mitigate nursing staff shortages to ensure optimal care quality and patient safety in the hospital and how to improve care for underserved groups following hospital discharge — both issues that have been exacerbated by the COVID-19 pandemic.

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“We have this incredible opportunity with this large multidisciplinary team of researchers, clinical care experts, and clinical care teams to work together to do something that will help our staff and be of direct benefit to our patients,” said project lead Sandra Simmons, PhD, professor of Medicine. “We are implementing this project in real time, where there is this very tangible direct relationship between what we’re trying to accomplish as part of the project and decisions we are making in clinical practice. And that is really exciting to be a part of.”

Nursing staff, both at VUMC and nationwide, came under increased strain during the pandemic, as more experienced nurses retired and turnover increased. As a result, a greater proportion of the workforce is comprised of novice nurses. The project team is looking at alternative care models to better support novice nurses to ensure patient safety and increase nurse job satisfaction and retention.

Simmons said the project will expand existing research funded by the Agency for Healthcare Research and Quality using simulation modeling of optimal hospital staffing to determine which alternative staffing models are most beneficial to both staff and patients. She said the modeling is itself innovative, using time-and-motion data to determine how much time various tasks take in different hospital units with diverse patient care needs, providing reliable and objective data. The resulting data could determine how to apportion nursing care differently and optimally, and how to strategically bolster licensed nursing care with care partners in certain units to free up time for nurses to focus on RN-specific tasks.

The research pairs the expertise of VUMC nurses with VUSN nurse faculty.

“Vanderbilt University School of Nursing has been working with the VUMC Nursing Models of Care team to model and test new ways to augment the ability of nursing care teams to provide care for hospitalized patients who have complex care needs,” said Ruth Kleinpell, PhD, ACNP-BC, FAAN, FAANP, MCCM, Independence Foundation Professor of Nursing Education and associate dean for Clinical Scholarship at VUSN. “We are excited about this opportunity to contribute to advancing the transformation of nursing care with this state grant to better meet the health care needs of the residents of Tennessee.”

The project team is also working to improve the coordination of care services for underserved patients, including those who present with social drivers of health challenges such as financial strain due to medication costs, transportation needs to get to their continued on page 3
medical appointments, housing instability, food insecurity and poor health literacy, all of which are shown to adversely affect health outcomes. Addressing overall staffing shortages in the hospital will also help to improve care for underserved patients, because such shortages affect VUMC’s ability to provide wide-scale screening and referrals to address social drivers of health.

Addressing the needs of underserved populations is twofold — to build screening for social drivers of health into routine clinical practice and, when such needs are identified for Vanderbilt patients, to connect them with community resources after hospital discharge.

The project seeks to build on two existing strategies to improve routine screening for underserved populations. One, the Vanderbilt Discharge Care Clinic, provides follow-up care and coordination of community-based services after hospital discharge, with a goal of reducing hospital readmissions. The other, the Emergency Discharge Clinic, provides similar care after discharge from the Emergency Department.

While VUMC currently assesses health literacy and interpersonal safety, the project team will work with the clinical care teams and the Office of Health Equity to identify screening tools most acceptable to patients and community partnerships that can meet patients’ needs, particularly those in rural and/or medically underserved counties.

“This project is an excellent example of a multidisciplinary partnership that includes Vanderbilt clinical nurse teams and nurse researchers, all with the common goal of improving nurse satisfaction and better outcomes for our patients,” said Executive Chief Nursing Officer Marilyn Dubree, MSN, RN, NE-BC, FAAN. “It truly does take a village, and I am excited to see what this talented group of colleagues will accomplish in the coming years.”

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**VUMC STARTS ITS FIRST VIRTUAL NURSE PROGRAM**

Vanderbilt University Medical Center has started its first virtual nurse program, in which a team of dedicated nurses complete certain tasks such as documentation remotely via a teleconference in the patient’s room, giving nurses at the bedside more time to care for patients in person. The goal of the program is to improve patient-and-staff satisfaction.

The program, which went live at Vanderbilt University Hospital on July 17, is being piloted first on the 36-bed Ventricular Assist Device and Transplant Unit on the seventh floor of Medical Center East, a stepdown unit for heart patients.

Up to three virtual nurses at a time are working on the unit 24 hours a day, initially focusing on admitting and discharge documentation duties, said Wendy Kiepek, RN, MSHI, executive director of HealthIT Operational Services, who is managing the project. They are also virtually rounding — that is, checking on patients and completing chart reviews.

“The energy from the virtual nurses is palpable,” Kiepek said. “It’s exciting to see their level of enthusiasm.”

Patients are asked for permission before they participate in the program. When the virtual nurse is ready to visit the patient, the nurse will virtually “knock,” asking if it’s OK to appear on camera. Only then will the high-resolution camera mounted on the ceiling turn on; otherwise, it is pointed up and cannot see the patient.

The virtual nurse appears on the patient room’s television/entertainment system, and the
patient appears on the nurse’s monitor, part of an integrated technology system from vendor care.ai. Right now, the virtual nurses are physically located in a conference room on the seventh floor, along with other nursing informatics and technology representatives who are monitoring the new program in real time.

“The use of technology to support frontline nurses and staff is critical in today’s health care environment,” said Cindy Phipps, MSN, RN-BC, Vanderbilt Nursing Informatics Services’ lead on the virtual nurse project. “It demonstrates VUMC’s commitment, not only to our patients, but also to staff through the ongoing investment of time and resources in projects such as virtual nursing.”

Jim Sawyers, a heart patient from Goodlettsville, Tennessee, who was recently hospitalized on the unit, said he was happy to participate in the program.

“I think the virtual nursing will speed up service,” he said. “I think that once again, Vanderbilt has raised its hand to say … we have the initiative to make things great. And I think this is one of the things that will. Kudos to them.”

Byers and the virtual nurse team has a constant line of communication with the unit’s nurses physically at the bedside. “The team on the floor has been tremendously helpful and gracious with us letting them know about a patient’s need, and they have responded very quickly,” she said. “I think it’s helping save call light fatigue from the bedside.”

The virtual nurse program is one way Vanderbilt is studying innovative nursing care models to respond to a national nursing shortage, said Jennifer Glenn, MSN, RN, NE-BC, senior associate for Nursing in the Heart/Neuro/Procedural areas, who represents nursing in the virtual nurse project.

The 11 nurses who have been trained to work virtually are all experienced nurses on the unit, she noted.

“We’ve had great success so far,” Glenn said. “The patients love it. Nurses see the value because it’s work taken off their plate and it helps them better manage their patient assignments.”

As a part of the virtual nurse pilot project, Glenn said VUMC is closely monitoring a trove of data, including patient satisfaction, nurse workload and quality data. That will guide the potential future rollout of the program to other areas.

“Once again, Vanderbilt nurses are creating a new, innovative care model that engages a multidisciplinary team, with the shared goal of improving patient-and-family care and nurse satisfaction,” said Executive Chief Nursing Officer Marilyn Dubree, MSN, RN, NE-BC, FAAN. “Congratulations to the entire team that is making the next generation of nursing care possible.”