

HEALTH & REHABILITATION AT WYNDEMERE

Using Our "Third Eye"

to Reduce Re-Hospitalizations





Wynscape Health and Rehabilitation | External Relationships | Haley Peterson

Introduction:

- Wynscape Health and Rehabilitation is a 55-bed skilled nursing facility apart of the Wyndermere campus managed by Life Care Services, located in Wheaton, IL.
- Our Wynscape physicians were on call 24/7 for our residents, and IDT had noticed a trend of resident's being sent out to the hospital more commonly than not when adverse events occurred at night and on weekends, instead of treating them in place.
- This project is an aim to decrease our re-hospitalization rate and improve our treat in place rate by bringing in board-certified physicians through a telehealth company called Third Eye Health (TEH) to provide post-acute care coverage for nights, weekends and holidays.
- Third Eye Health will be utilized by our RNs as a main point of contact for immediate physician response, when necessary, in exchange for calling the Wynscape scheduled physician on-call.
- Communication will happen virtually through the Third Eye Health

Methodology:

For this project, Deming's PDCA cycle was used to figure out what process would work best to implement Third Eye Health into our facility smoothly to reduce our re-hospitalization rate. Using this method was crucial as performing these steps allowed a structured, seamless, and sound transition through the implementation process and guided me along the way.



Plan

Act

Do

Check

Connected with Third Eye Health on working together to provide external physician coverage during our off hours, weekends, and holidays.
Met with Third Eye Health to prepare training materials and resources.

Summary of The Outcome:

Data Review:

- The rate of re-hospitalizations after TEH implementation decreased from 10.4% in January to 8.5% in March.
- Our treat-in-place rate remained stable averaging at 88% during the three months after implementation.
- The data collected does not do justice to the good of what the Third Eye Health implementation has done for our staff and residents. Although data shows an increase for hospitalizations during the month of January these were not reflective of Third Eye Health services as these residents admitted with adverse health conditions that would have sent them out with or without Third Eye Health's orders to do so.
- Third Eye Health has successfully provided external physician coverage through efficient communication

application downloaded on our iPads provided by Third Eye Health, ready for our RNs to use.

Knowledge & Objectives:

Multiple studies have shown skilled nursing facilities with high rehospitalization rates experience a variety of negative impacts. They put an unnecessary strain on their nurses and physicians, waste time and health care resources, and have low patient outcome scores. The utilization of Telehealth technology is a budget-friendly, and efficient way to reduce the risk of sending our residents out. TEH will treat our residents in place to provide the care necessary from a physician in the comfort of their own apartment.

Objectives and Outcomes:

The objective of this external relationships project is to reduce rehospitalizations during our facility's off hours, including weekends and holidays, and increase our treat in place rate through successful telehealth visits with our external Third Eye Health physicians.

Specific Goals:

- 1. Reduce Re-hospitalization Rate
- 2. Increase Treat-in-Place Rate
- 3. Reach 100% Community Acceptance

TEH Provider Capabilities:

• Trained interdisciplinary team and Wynscape physician's on how to access the care coordination summary (24-hour report).

Trained nursing staff on how and when to utilize Third Eye Health.
Trained medical records director on how to integrate Third Eye Health report with our EMR.

• Tested the iPads and practiced using Third Eye Health application by running situational simulations with RNs.

• Assessed the application on the iPad and the accounts to ensure all employees and physicians have access to the service.

• Selected resident's that our RNs will utilize the service for.

• In January, we began to utilize Third Eye Health's services, implementing telehealth technology via our iPad for the nursing staff to utilize to access the TEH application.

• Track utilization after Third Eye Health visits occur through the Care Coordination Summary Report for IDT and physicians to monitor and assess.

Results:

22.1

Unplanned Re-Hospitalizations Before & After Third

Eye Health Implementation

22.1

20

18

16

14

12

10

Unplanned Re-Hospitalizations (%)
 Unplanned Re-Hospitalization Rolling Data

22.1

The bar graph to the left represents the rate of unplanned re-hospitalizations before and after Third Eye Health Implementation in Jan 2023. I have also highlighted with our RNs, resulting in 100% community acceptance.

Third Eye Health improves the quality of care we provide to our residents as we are now more likely to treat our residents in place by utilizing this service.

Recommendations:

I believe that the following should be done in order to maintain success when utilizing Third Eye Health:

Keep Third Eye Health binder up to date including a list of our physicians who use TEH & training materials

Designate DON to train incoming IDT on how to access 24-hour report

Designate DON as the main point of contact to maintain relationship with TEH Designate nursing supervisor to train incoming RNs on when and how to utilize the Third Eye Health application on the iPad.

Conclusion:

Overall, this project taught me about the significance in the process of sending out our residents to the hospital, and the benefits of treating our residents in place. Treating our residents in place not only improves their patient outcome scores, but decreases the workload on our care team, both contributing to the success of our facility and re-hospitalization rates. This project gave me the opportunity to develop my leadership skills by leading the implementation and by building a new relationship, bringing together Wynscape and Third Eye Health.



Act

22.1

Do

Provide an average response time under two minutes

Provide wet signature orders

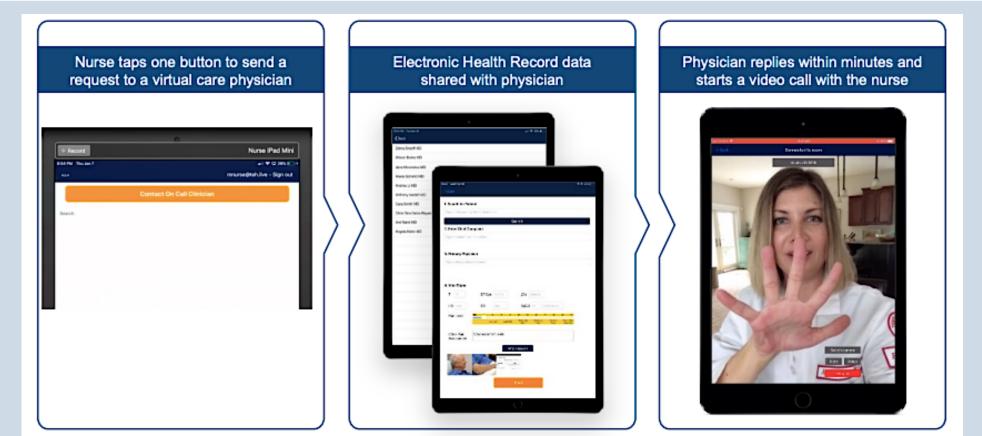
Access the EMR to review patient medical records, record notes, and write orders

Write bridge scripts if necessary, including narcotics if necessary

Speak with family members, PCPs, and local ER physicians upon request

Build working relationships with nurses and staff in SJNF

How it Works:





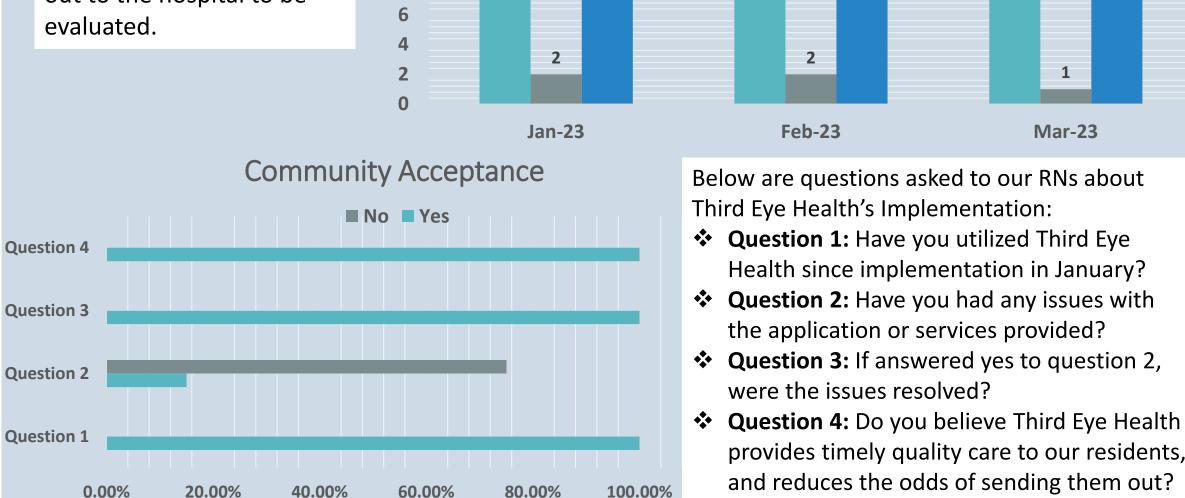
22.1

Treat in Place Rate after Third Eye Health Implementation

22.1

■ Total Number of Visits with Third Eye Health ■ Unplanned Re-hospitalizations ■ Treat in Place

The bar graph to the right represents the number of visits with Third Eye Health, and whether the physician treated the resident in place or sent our resident out to the hospital to be evaluated.



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The Power of **AND**

