



Boca Raton Regional Hospital

BAPTIST HEALTH SOUTH FLORIDA

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Too Many Wounds, Too Few Wound Care

Nurses

**Using Innovative Solutions to Fill the
Gap**

Background & Problem

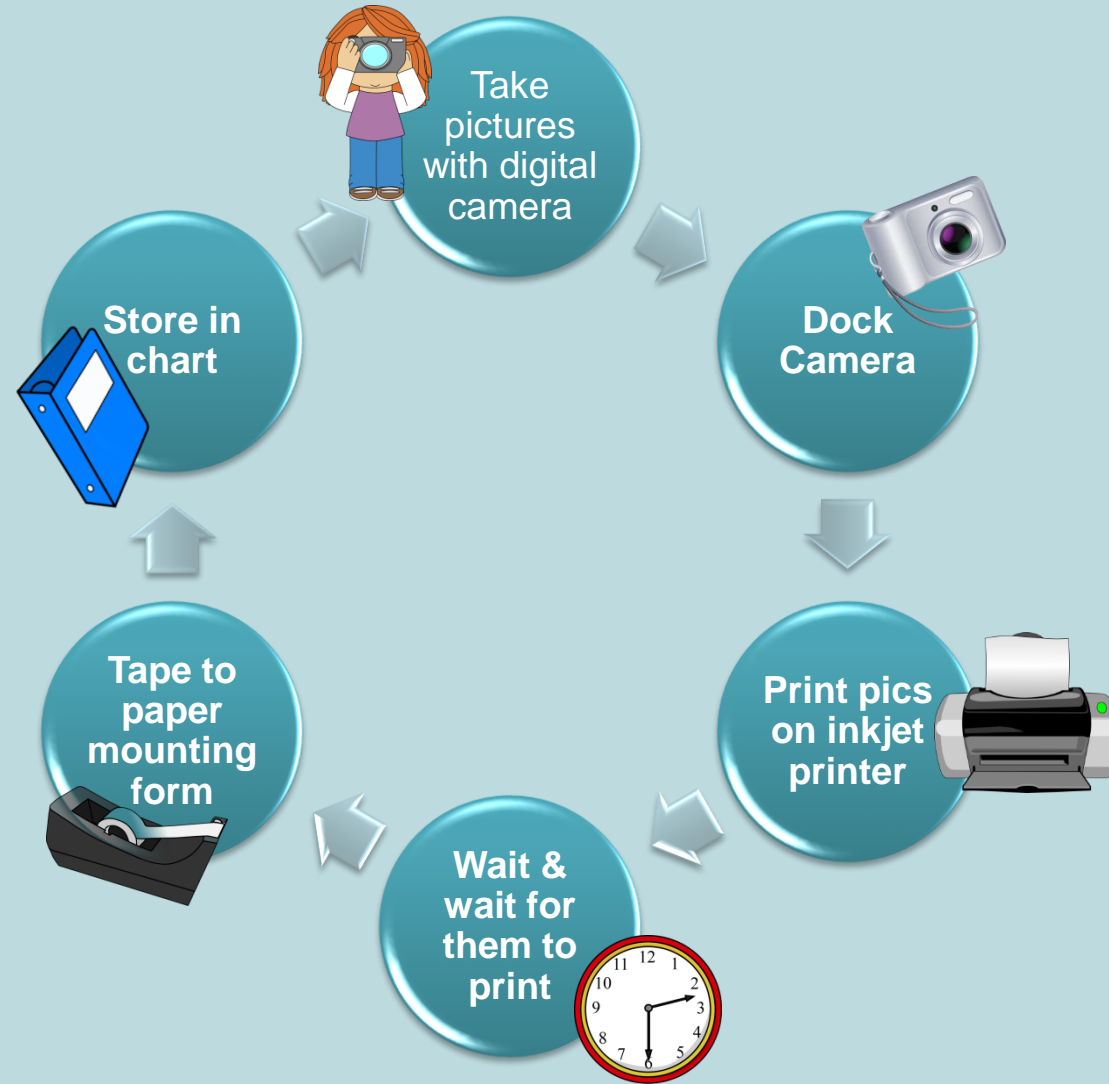
Background

- 📄 Elderly patients high risk for pressure injuries (bed sores)
- 📄 High volume of wound care consults
- 📄 65% Medicare population
- 📄 2.5 FTE for inpatient wound care nurses

Problem

- 📄 Only 29% of consults seen by wound care nurse
- 📄 Wound experts focusing on increasing skills of the bedside nurse to offset the gap

Traditional Wound Photo Process



Wound Care Photo Process

- 📷 Process cumbersome
- 📷 Unstandardized printers from office supply store
- 📷 Ink cartridges inventory impossible to manage
- 📷 Ink jet printing slow (3-5 min/picture)
- 📷 Nurses only photographed “significant” wounds due to time constraints

Example: 5 wounds



Regulatory Impact

- 📺 Hospitals are **measured on outcomes** like hospital-acquired pressure ulcer rates
- 📺 Wounds not documented on admission (even if present) are automatically credited as “**hospital-acquired**”
- 📺 Hospitals are not getting reimbursed for any hospital acquired wounds
- 📺 They are also penalized by CMS on our **value-based purchasing score** which influences reimbursement across the board
- 📺 Pressure ulcer rates ↑ due to **poor documentation** rather than poor clinical care





What Did Clinicians Need?







Mobile App Development

Clinician Input

-  Eliminate the printing process all together
-  Instant accessibility to digital images from any device
-  Barcode scanning to associate image to correct patient matching
-  Ability to describe wound, size, & annotate wound images

Time to INNOVATE!

-  Engaged a tech start up company eager to engage in healthcare
-  Offered to be a beta site in developing a meaningful mobile app for wound image capture



Take Away

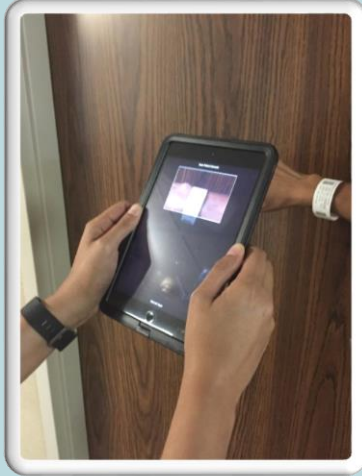
Don't be afraid to approach vendors with great clinician ideas. They just might build them!

Partnering with the Vendor

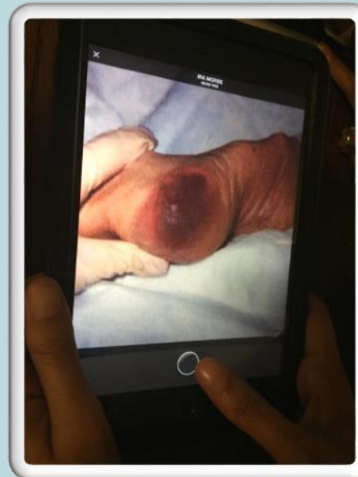
- 📺 Worked with the Vendor, Nursing, Clinical Informatics, & IS
- 📺 Idea to go-live ready in 6 months



New Wound Care App

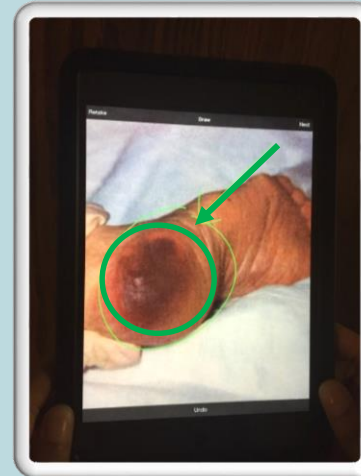


Scan patient armband for patient matching & safety



Take wound image(s) using iPad.

(No printing required)



Document wound details & annotate image



Final document automatically transmitted to EHR

Development Considerations



Device selection

- Purchased iPad minis for each unit







Security

- No image/data stored on the device or the cloud
- Restricted the devices to a single app to prevent compromising PHI
- Required user name/password (associated to active directory for security)



Cold feed final document into EHR

Big Wins!

-  Digital images averaged only 1 minute each **(75% reduction)**
-  Cost for app development = **\$ 0**
-  Annualized savings on photo paper, ink cartridges, & new printers **\$5,000/ year**
-  Soft savings resulting from new efficiencies **immeasurable!**



Ideas are easy.

Implementation is hard.

Guy Kawasaki

quote fancy

Nurse Adoption

- 📷 Easiest implementation ever!!
- 📷 Nurses LOVED the app
- 📷 So intuitive that nurses were training one another *before* Informatics could get there to do so





Taking Wound Care to the Next Level

PUGH

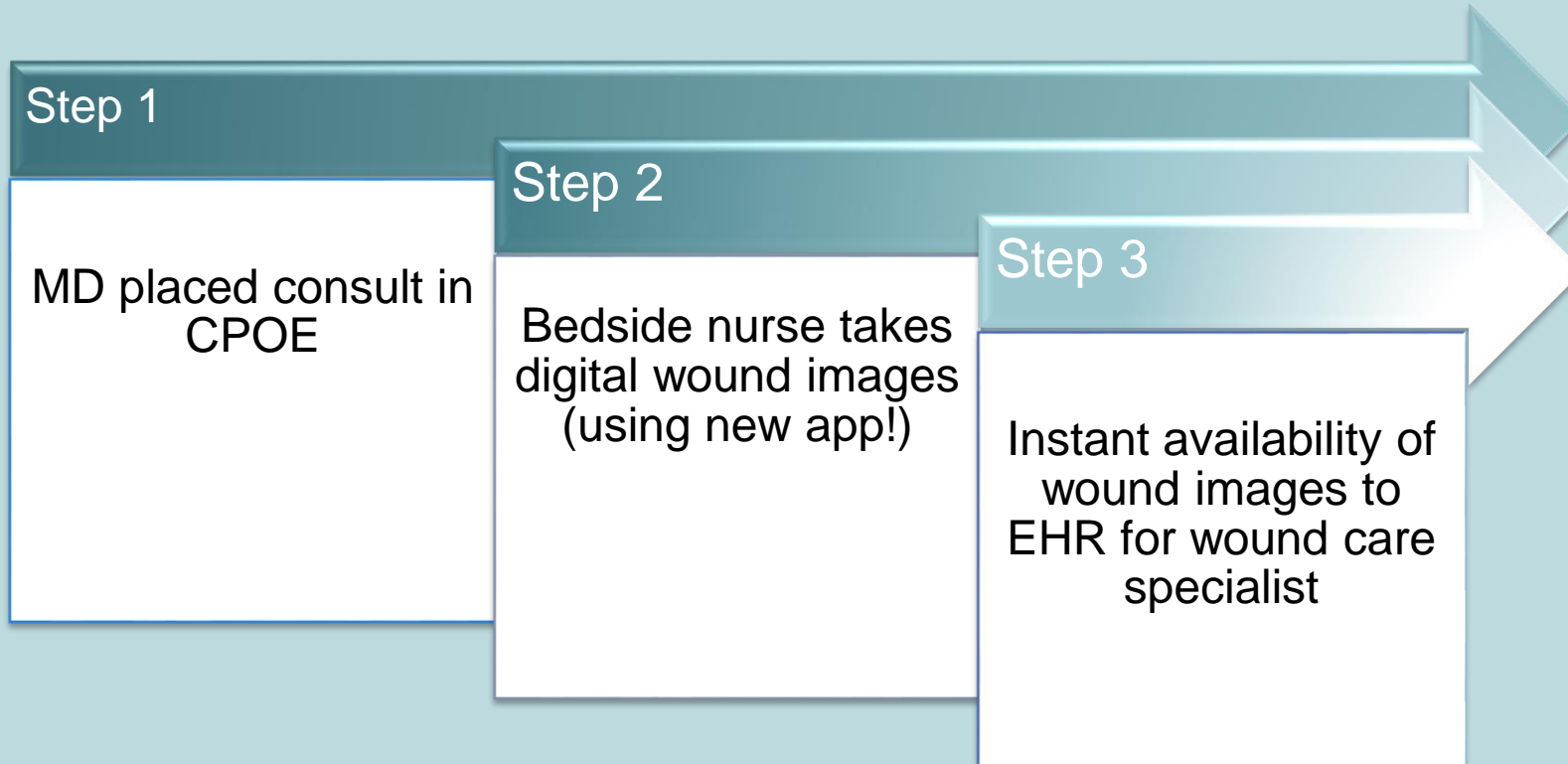


*'Give it to me straight,
how long have you got?'*

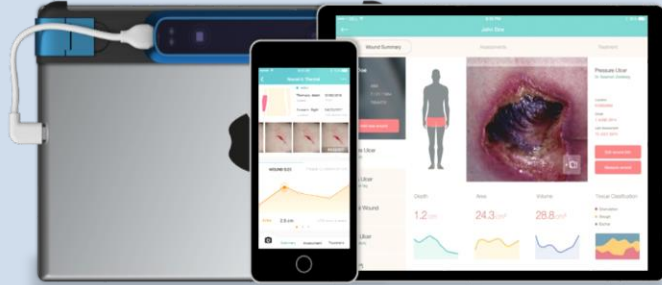
Circling Back to the Problem



New TeleWound Workflow



OPTION # 1



TELEWOUND VISIT (SIMPLE CASES)

- Reviews orders for severity
- Simple wounds managed virtually
- Compares image to treatment orders & clinicians documentation
- Modify treatment orders if needed
- Coaches bedside nurse on inaccurate wound assessments or photo quality concerns

OPTION # 2



BEDSIDE VISIT (COMPLEX CASES)

- Identifies complex wound cases requiring advance assessment
- Physically goes to the bedside to consult in person & provide wound care

Logistics

Reconfiguring the wound care office

- Added an extra computer
- Added 2nd monitors to each device
- Added extra phone lines to each desk

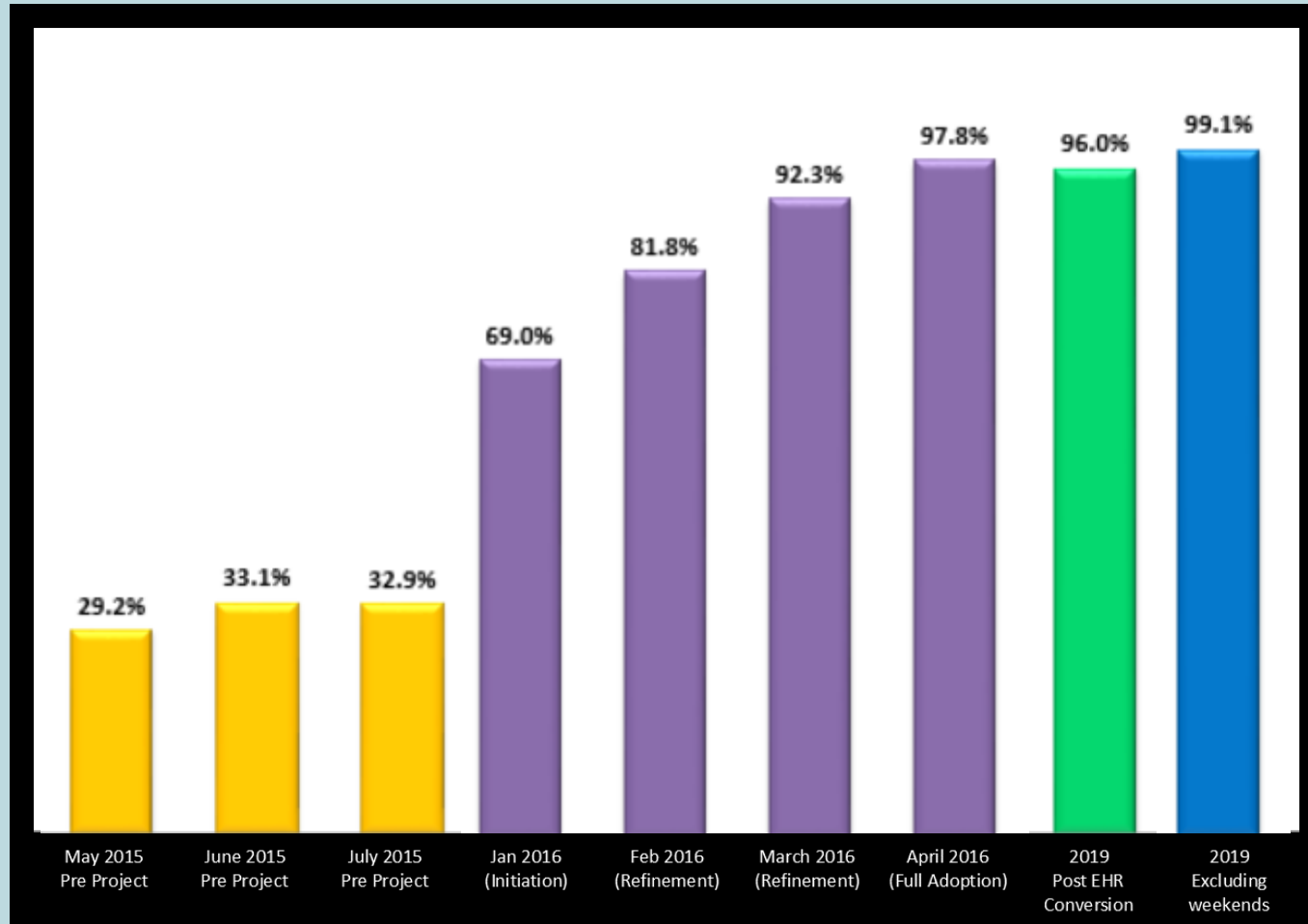


The image shows a black smartphone with a light blue screen. The screen displays a background of vertical columns of binary code (0s and 1s) in a glowing blue color. The word "Outcomes" is centered on the screen in a large, white, sans-serif font.

Outcomes

Value Added

Significantly increase in wound care consults seen



Value Added

- 📷 Minimized legal risk of not executing the wound care consult as ordered
- 📷 Promoted better patient outcomes by having the specialist consistently involved
- 📷 Enhanced the competency of the bedside nurse through structured telemedicine collaboration of care
- 📷 Increased efficiencies
 - Better wound documentation
 - Lower hospital-acquired wound rates
 - More time for nurses to be at bedside
 - No more blindly walking to units
 - No more standing waiting for printers
 - No more order ink/paper ordering
 - No more broken printer/cameras

Why Is This So Innovative?

- 📺 **This is not your mother's telemedicine!** It takes telemedicine to the next level.
 - Innovative use in a hospital setting where the wound care expert is onsite (rather than remote)
- 📺 **231% increase in productivity** (29% to 96%)
- 📺 **NO additional spending on software**
 - Partnered with a start up company to develop an app with
- 📺 **No additional FTEs**
 - Controlled the cost of healthcare
 - Created a force multiplier taking existing FTE and making them more efficient.
- 📺 **Transferable & sustainable.**
 - This model can be adopted by any facility regardless of EHR

Most importantly, it improved patient care & made nurses
happy!



