INSTITUTE FOR INNOVATION

Case Study in Teamwork
Reducing Suffering for Patients at Risk of Causing Violence
Atlanticare Regional Medical Center (Atlantic City, NJ)

TEAM

Atlanticare Regional Medical Center (ARMC) is a 593-bed, Magnet®-designated, teaching hospital with campuses in Atlantic City and Pomona, New Jersey. In 2016, the 4 Wellness care team initiated a program to introduce a new model of care for patients at high risk of causing violence.

SITUATION

ARMC noted an increase in violent, aggressive behaviors from inpatients, resulting in uncoordinated care, delays in care, staff dissatisfaction, increased calls to security, and workplace injuries. Prior to implementing the new care model, all units were caring for patients with enhanced psychosocial needs. However, this resulted in units experiencing delays in psychiatric consults, delays in disposition to extended care facilities that can meet the needs of the patients, and delays in disposition to psychiatric facilities and programs that care for adults with developmental challenges.

Moreover, many patients were behaving in a manner that negatively impacted safety, including violent outbursts and attempts to injure or intimidate anyone with whom they came into contact, including staff and visitors. ARMC decided it was necessary to institute a proactive approach to aggregating medical-surgical patients with enhanced psychosocial needs in a safe, calm environment.

ACTIONS

4 Wellness—a 24-bed, medical-surgical unit located at the City Campus—has experience caring for the unique needs of patients who are acutely withdrawing from opiates and/or alcohol. ARMC created an interprofessional team consisting of registered nurses, patient care associates, administrative associates, security officers, hospitalists and behavioral team members to establish a secure environment on 4 Wellness—including a dedicated security presence, psychiatry support, and a competent, educated staff.

During the pilot program, the 4 Wellness care team worked together with teams throughout the campus to ensure that patients meeting the admission criteria for the unit could be placed appropriately at the time of admission. As patient behavior warranted, transfers were facilitated to 4 Wellness from other medical-surgical units. Patients could also be directly admitted to 4 Wellness from the emergency department and from the Psychiatric Intervention Program.

In planning for the full implementation of the unit after the pilot, leaders took into consideration the potential challenges of caring for this population on a daily basis. Changes were instituted as a result of staff input, including adjusting staffing ratios, maintaining security 24/7 (instead of eight hours as in the pilot), installing doors to the entrance of the unit, adding a nursing team leader to the matrix, and removing any environmental safety risks. Leader rounds occur daily as a sign of support and visibility, and to develop close staff-leader relationships. Daily BOOST rounds promote a collaborative environment in which all disciplines are present to discuss the best individual treatment and discharge planning for each patient.

IMPACT

Through the implementation of the 4 Wellness care model, ARMC provides a therapeutic environment in which patients with enhanced psychosocial needs receive the care they need immediately. Employee injuries related to restraints on other units decreased significantly after the 4 Wellness program was established. For example, 7 Harmony and 4 Michigan both decreased from a 7% injury rate to zero injuries. The Harmony Tower decreased employee injuries related to restraints by 50%.

The team has developed a sense of pride in the patient care they are able to provide on 4 Wellness, and has also improved the experiences of the patients, visitors, and staff of other units at ARMC. The sense of teamwork on 4 Wellness is strong, with 90% of employees responding favorably to the engagement survey item, "My coworkers are friendly and helpful." The new care process has also resulted in improved patient experiences, with the HCAHPS Overall Rating—and ratings on the survey items, "responsiveness of hospital staff" and "communication with nurses"—surpassing ARMC's goal threshold.