

Driving Best Practices and Quality in Multi-Clinic Healthcare System:

Primary Care Clinical Nurse Specialist (CNS) Practice Highlight-Implementation of Vaccine Protocols

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Significance & Background

Establishing a population-based primary care CNS role was identified by nursing leaders as an essential role to facilitate dissemination of nursing best practices and support quality patient care. The primary care specialty encompasses Family Medicine, Internal Medicine and Pediatrics. A major task of this new CNS role was to provide practice standardization across a network comprised of 20 clinic sites. The CNS collaborated with an immunization practice expert who recognized a need for electronic vaccine protocols to support practice standardization and reduce vaccine errors. Through systems navigation, the CNS partnered with nursing leadership and the immunization expert to expand vaccine protocols to the region. The CNS gained staff support, investigated current process and collaborated with nursing education leaders on implementation of an educational plan. Key metrics were identified to support project implementation.

Evaluation Methods

A comparison of current state of vaccine administration and post-implementation of vaccine protocols was completed. The central outcome was to diminish vaccine error rate and promote immunization best practices for primary care by using evidence-based vaccine protocols. Vaccine errors were evaluated for six month time period pre-implementation and post-implementation for system of clinics. Two additional outcomes were identified for the electronic medical record (EMR): increase use of per protocol ordering mode and lower use of verbal ordering mode by nursing staff. Furthermore, we proposed to lessen provider clerical burden when a nurse-initiated protocol could be used to meet patient care needs. Lastly, nursing staff were evaluated on protocol use post-implementation. Random chart audits were completed to support post-implementation practice change.

Outcomes

A preliminary comparison of vaccine data (six months of pre/post data) indicates improvement in vaccine error rate. Other findings demonstrate increased use of protocol ordering mode by nursing staff, reduced use of verbal ordering mode by nursing staff, and reduced use of written ordering mode by providers. Random chart audits confirmed appropriate vaccine protocol use. Classroom and hands on education was provided by nursing education specialists and CNS for 300 plus nursing staff along with the development of an online practice toolkit for reference materials. Staff feedback led to a supplementary reference for frequently asked questions (FAQ) related to vaccine protocols. Additional outpatient departments continue to be added for nursing education to support vaccine best practices.

Implications

Establishing a population-based primary care CNS to promote system-wide practice changes is vital to primary care practice. Traditionally, the CNS role has been largely focused in the acute care setting. The CNS is an essential partner for nursing leadership to promote evidence-based practice and implement practice changes that improve outcomes in primary care. This CNS practice highlight showcased the use of a population-based primary care CNS to improve patient-centered outcomes and safety for vaccine administration. With healthcare transferring focus to preventive medicine versus traditional acute care; this monumental shift provides vast opportunities for the CNS to influence clinical practice and healthcare systems in a primary care setting.