

Achieving Success in Unit Transitions with the Support of a Clinical Nurse Specialist

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Introduction

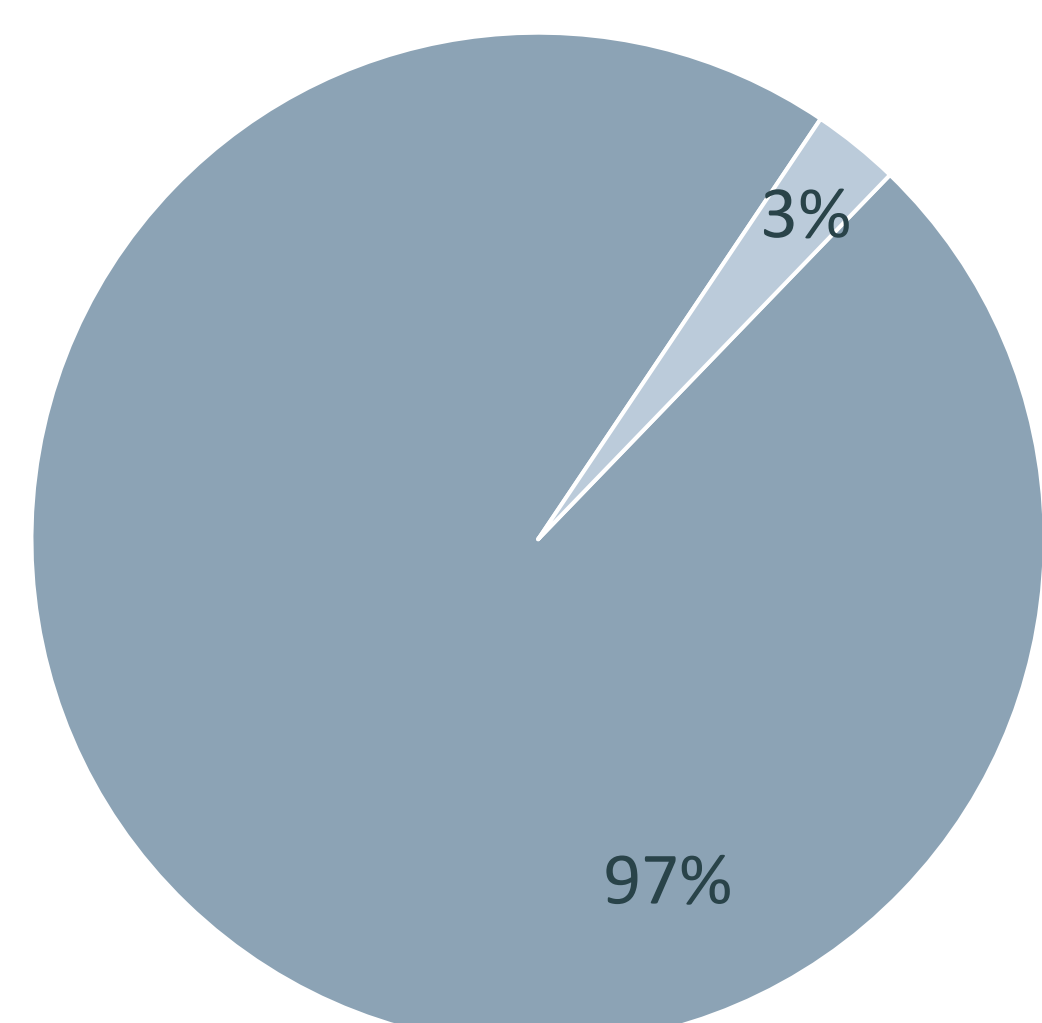
A large health-care system started the physical movement of a realignment project in May of 2023. The cardiac surgical patient population who had previously transferred from the ICU to a 42-bed cardiac surgical care unit (Unit A), with experienced nurses, and management team would now be transferred to a 44-bed cardiac medicine unit (Unit B), with less experience in caring for this population. Utilizing the Cardiovascular Clinical Nurse Specialist to coordinate training and communication with the interdisciplinary team was key to achieving a successful transition of care of cardiac surgical patients.

Objectives

The purpose of this project was to successfully transition the care of the cardiac surgical intermediate patient to an established nursing unit with nursing staff who were inexperienced in caring for this specific patient population. The Cardiovascular Clinical Nurse Specialist (CV CNS) and CNS student followed the CNS spheres of influence to ensure that adequate training, supplies, and processes were in place for the patient, nursing staff, management team, and other interdisciplinary team members to provide a smooth transition of care for the cardiac surgery patient.

Methods

Nurses and Nursing Aides on Unit B



■ No CT Surgery experience

Before Transition

- Attended biweekly interdisciplinary team planning meetings
- Provided education through lecture that covered cardiac, thoracic, and vascular surgery post-op complications
- Taught at Unit B hands-on skills blitz sessions
- Provided short 15-minute education opportunities during staff huddles
- Assessed current supplies and advocated for new supplies for new patient population

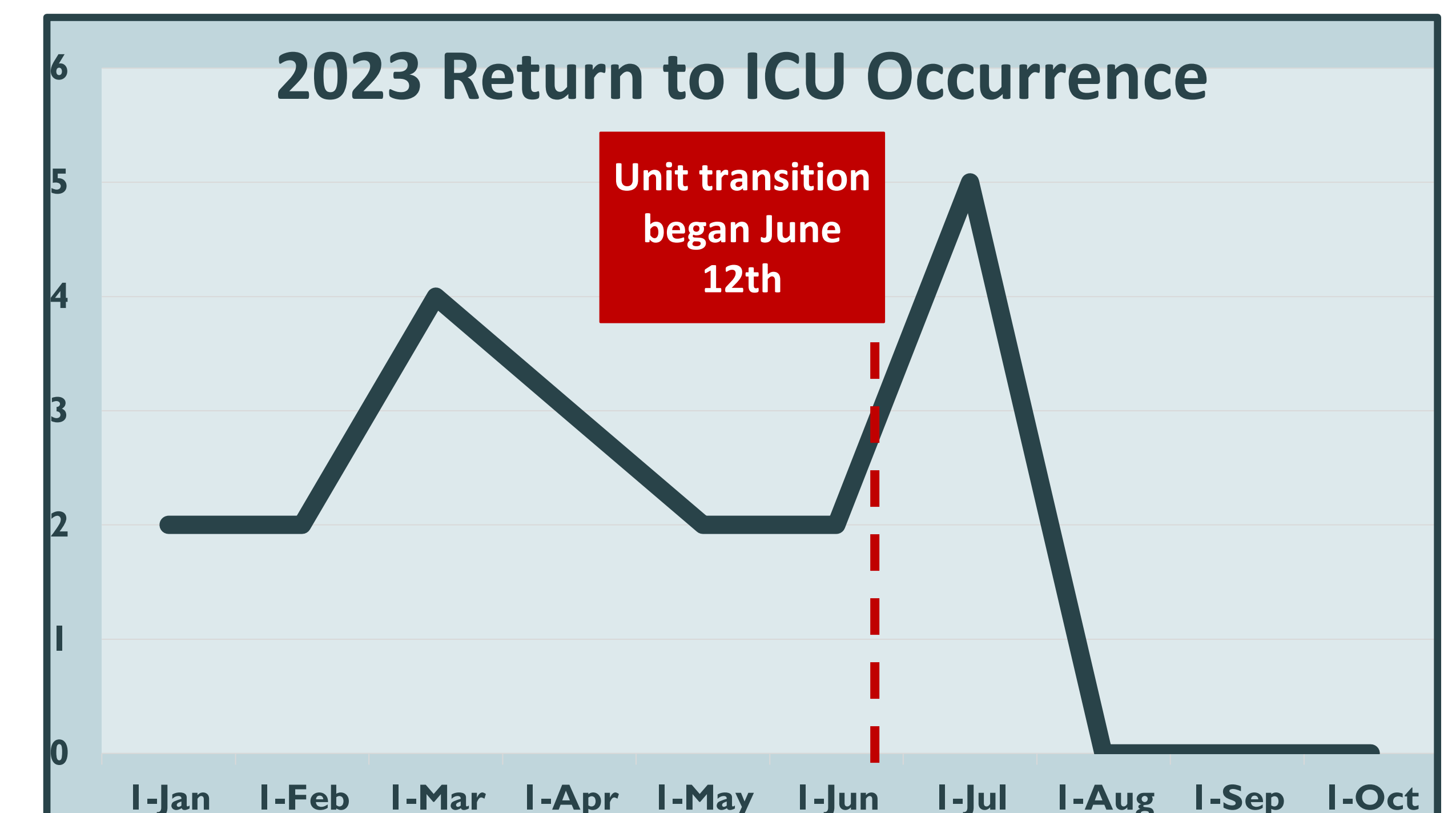
After Transition

- Coordinated getting cardiac walkers
- Met with CT surgery providers, CTICU and cardiac surgical care unit leaders and staff
- Reviewed patient cases that returned to the CTICU
- Rounded on nurses and patients
- Provided real-time education
- Assisted with transfers from CTICU to cardiac surgical unit
- Advocated for EHR documentation enhancements

Outcomes

- Trained 71 staff nurses, and 33 nursing aides
- Reduced number of patients who returned to the ICU
- Created emergency response handouts and education
- Updated post-operative orders set
- Created flyer for patient and nurse education explaining continuum of care

Results



Conclusion

Having a CNS expert with this patient population was vital in creating a smooth transition of care between units. As a student, this was an excellent opportunity to incorporate the NACNS competencies into practice across the three spheres. The project required careful consideration and coordination to ensure success in both processes and patient safety. Because of the unique skillset in project management, innovation, inquiry, and organizational leadership, the CNS is the perfect visionary to identify problems and provide evidence-based, sustainable solutions, ensure practice standards are met, and improve workflow.

Acknowledgments

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References

Available upon request

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