

CNS Impact as a Sepsis Coordinator

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Background

- The need for clinicians dedicated to healthcare outcomes improvement is increasing; there is a lack of literature on the impact of population-specific program coordinators
- The sepsis program at an urban non-profit teaching hospital lacked dedicated leadership; sepsis outcome scores dropped and remained below target for 16 months
- Leadership created a Sepsis Coordinator role to provide advanced expertise needed to align teams and quickly improve sepsis outcomes

Purpose

- Utilizing an Advanced Practice Registered Nurse (APRN), such as a Clinical Nurse Specialist (CNS), to address deficient outcome measures within a hospital setting is an innovative strategy to consider
- The purpose of the Sepsis Coordinator role is to positively impact sepsis outcomes through multiple strategies and interventions

Methods

Onboarding

- Policies, guidelines, practices
- Shadowing/observation
- Partnership with key stakeholders

Daily Sepsis Huddle

- Core team of stakeholders
- Discussion of patients, bundle compliance, follow up
- Interdisciplinary collaboration

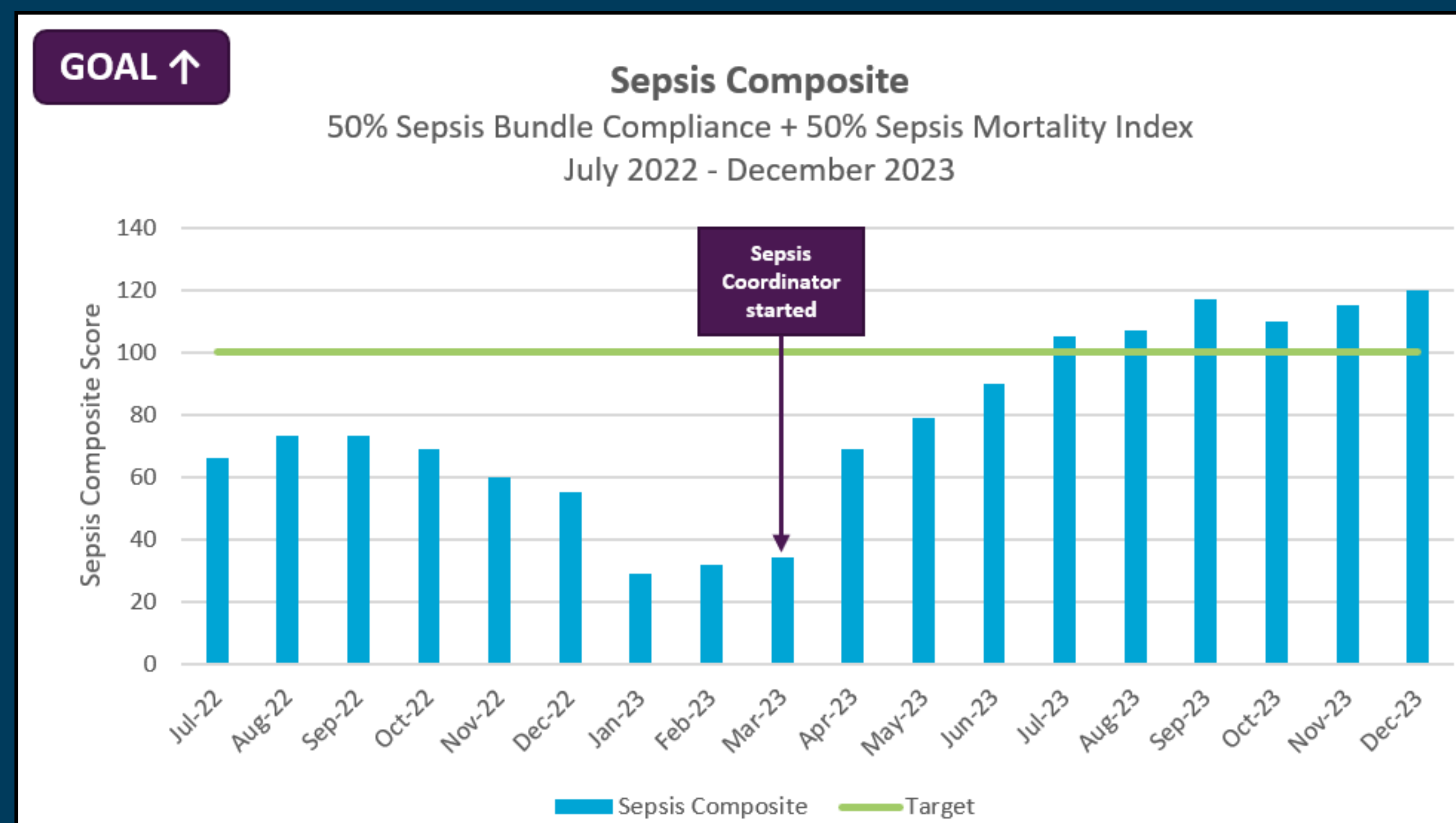
Real-Time Response & Chart Review

- Track sepsis criteria, monitor bundle compliance, capture trends
- Coaching, correction, and follow up in real-time

Standardization of Education

- Strategies: high-fidelity simulation, participation in nursing onboarding, and unit-level education

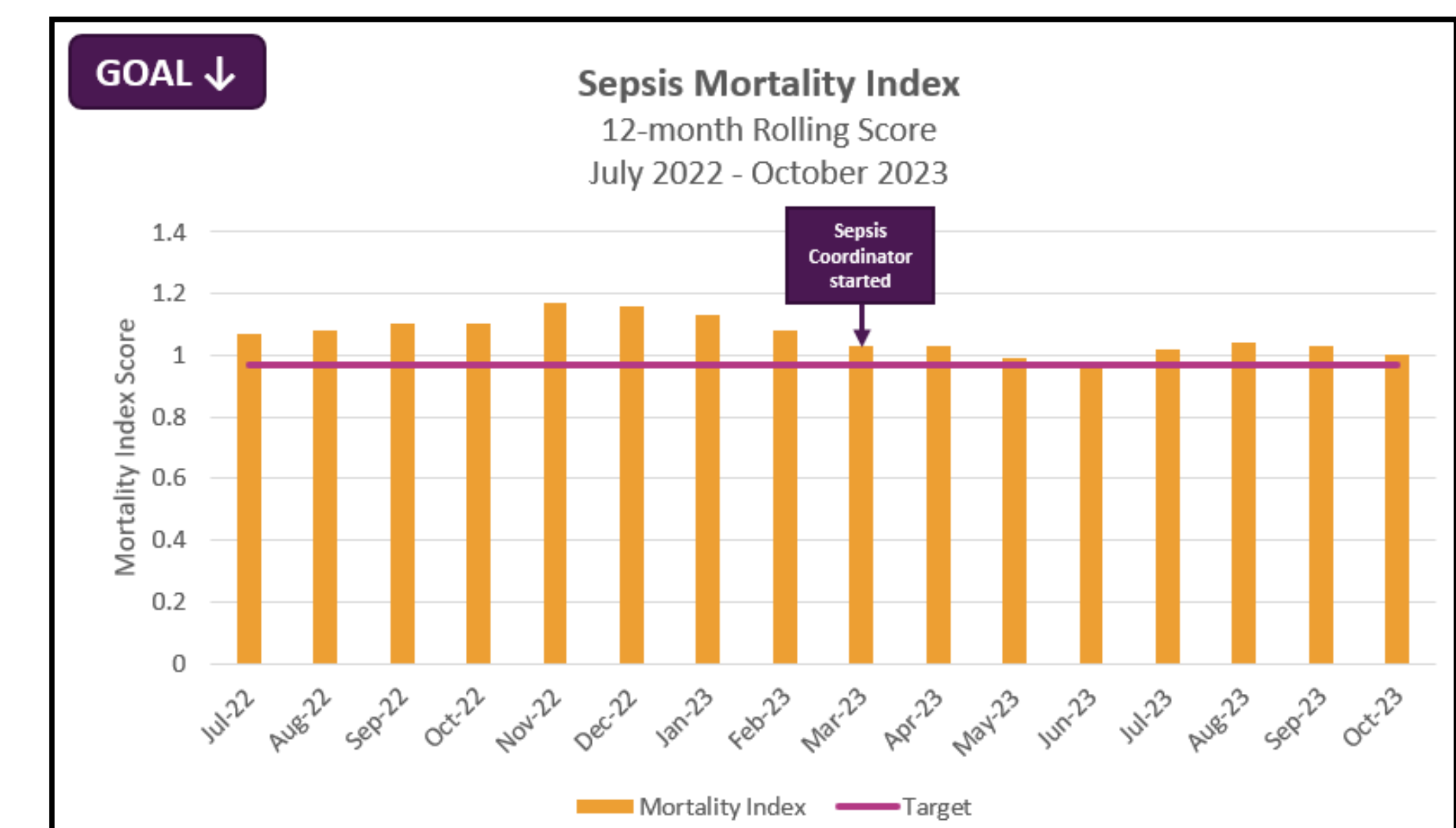
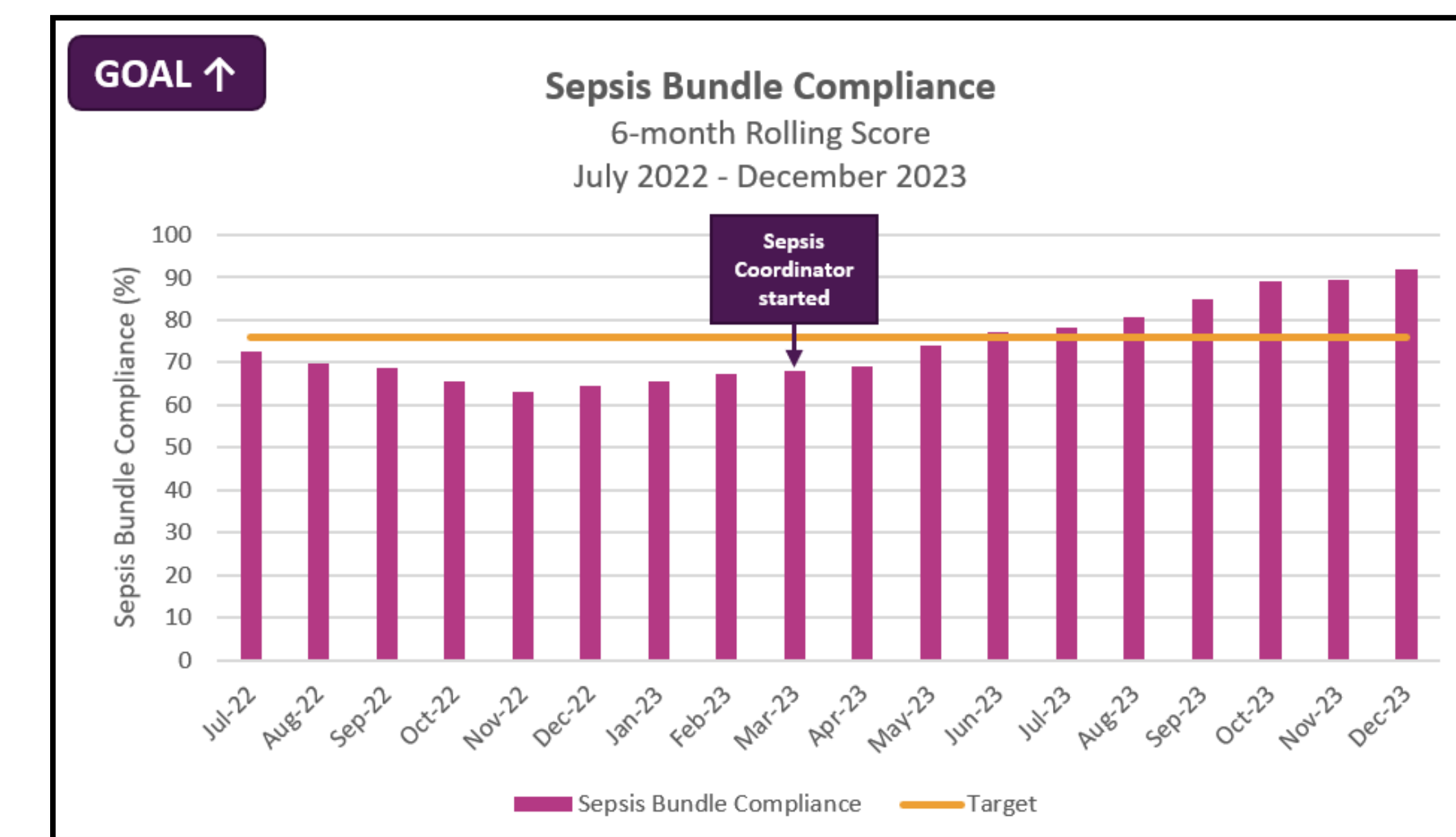
Utilizing a **CNS** in a population-specific role, such as a **Sepsis Coordinator**, can **drastically improve** patient outcomes and safety metrics.



Take a picture to download more information!

Outcomes

- Average bundle compliance increased **25%** over 10 months
- Annual average bundle compliance increased **17%** from 2022 to 2023
- Sepsis Composite met target for first time in **16 months**
- Bundle compliance reached maximum target for the first time



Conclusion & Implications for Practice

- Implementation of a CNS in a Sepsis Coordinator role to address sepsis program needs and poor outcomes has been extremely successful
- Utilizing a credentialed and privileged CNS has provided expedited improvements and is an example of how this strategy can be applied to population-specific outcomes
- There is a need for literature related to CNS practice as population-specific coordinators and the impact on patient safety and outcomes

Acknowledgements

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