

Clinical Leadership Update



March Activities



Published: April 3, 2023

The Clinical Leadership Update (CLU) provides Trinity Health clinicians information on current clinical activities and the opportunity to offer feedback on best practices and proposed system standards. All physicians and clinicians across our shared Ministry are encouraged to provide feedback on the proposed clinical practices in your respective specialty.

This edition of the CLU provides an overview of the general activities of our clinical framework teams over the previous month.





For more information on the Clinical Framework teams, click the link below:

<https://mytrinityhealth.sharepoint.com/sites/SO-ClinicalLeadershipCouncil>

Note: Link to site accessible only when connected to Trinity Health Network

In this issue:

- [FAQ for the CLU](#)
- [TC Decision Report](#) (Includes all Clinical Framework decisions made in the last 45 days. For more information on these decisions, please contact your local Informatics representative.)

Clinical Teams	 Information	 Feedback: Action required	 Final Decision based on feedback	 Implementation Bundle: Action Required	Intended Audience
CIN CLG	1. Clinical Condition Documentation Audit Plan	2. Request for Membership (No Survey)			1. CIN Leaders, CIN Providers, Case Managers 2. CNO, CMO, nursing leadership, IRF nursing leadership
Clinical Operations CEC	1. Nurse Sepsis Inpatient RN BPA 2. MyChart Paperless Billing 3. Pediatric Diet Orders	4. Request for Membership (No Survey) 5. Request for Membership (No Survey)			1. Inpatient Nursing Colleagues, Sepsis Coordinators, Nursing Education, Rapid Response Team 2. Patient Registration, Patient Financial Services, Patient Billing 3. Dietitians, Nutritionist, Pediatric Nursing, Pediatrician 4. Dieticians (Inpatient & Ambulatory) 5. CNO, CMO, nursing leadership, IRF nursing leadership
Medical Groups CLG	1. THMG CCC Priorities				1. Medical Group Providers
Emergency Care CEC		1. Request for Membership (No Survey)	2. SBAR #512 Pediatric Sedative Infusions for ED		1. Emergency Care Providers, Emergency Care Nursing staff, Behavioral Health Providers and Nurses 2. Emergency Care Providers, Emergency Care Nursing

Nursing CLG		1.Request for Membership (No Survey)		1.CNOs, Nursing Colleagues
Pulmonary & Critical Care CEC			1.SBAR #481 Oxygen Therapy Orders	1.Physicians, Advance Practice Providers, Respiratory Therapists, Nursing
Radiology CLG	1.Advanced Visualization Application for MRI Breast	2.Home Reading Station Configuration/ Specifications		1.Radiologists, Imaging Leadership, Imaging Colleagues 2.Radiologists
Surgical Services CEC			1.Six Point Surgical Safety Plan	1. CMO, CNO, OR Tripod Leadership



Feedback: Team has placed a clinical or operational standard/best practice out for clinician response.

Final Decision Based Upon Feedback: Team has identified a clinical or operational standard/best practice and is presenting initial information for implementation.

Implementation Bundle: Team has identified a clinical or operational standard/best practice and is delivering the detailed implementation bundle.

Information: Team information – no action required.

CIN Clinical Leadership Group

Intended Audience: CIN Leaders, CIN Providers, Case Managers



Information

Because accurate identification of the patient's clinical status allows Trinity Health to provide the best individualized clinical care for its patient, the CIN CLG reviewed a proposed standard for clinical condition documentation audit plans aimed at both optimizing CIN performance and advancing CIN operating model 2.0. Key audit plan areas presented for endorsement included goals, benefits, responsibility and resourcing for this work.

The proposed model for auditing required annual review of at least 5 charts per provider by a Certified Coding professional not involved in coding the claim with a focus on mitigating high level risks. Audits ensure the following:

- The medical record sufficiently supports coding to the highest level of specificity for claim/encounter data submission and risk trends,
- Adherence to ICD-10-CM coding guidelines for conditions that are monitored, evaluated, assessed, or treated (MEAT),
- Compliance with ICD-10-CM codes for serious acute or chronic illnesses that are added or delete

The CIN CLG collectively endorsed the **Clinical Condition Documentation Audit Plan**.

Additionally, the CIN CLG reviewed Advance Care Planning practice and TogetherCare workflows and Trinity Health Advance Care Planning initiatives as part of National Healthcare Decisions Day. Workflows specific to practices, TogetherCare smart phrase references and creating bookends as well as scanning of ACP documents were included. The CIN CLG collectively endorsed the workflows and Advance Care Planning initiatives relative to National Healthcare Decision Day.

[Clinical Condition Documentation Audit Plan](#)

Intended Audience: CNO, CMO, nursing leadership, IRF nursing leadership



Feedback

The CIN CLG has openings for the following group membership areas:

RHM CIN Physician Leader/Executive

RHM CIN Operational Leader/Executive

RHM CMO

Interested individuals should contact Ronda Winans: Ronda.Winans@trinity-health.org

Email: Ronda.Winans@trinity-health.org

Leaders: Ronda Winans P.T., M.S., M.B.A., director of continuing care clinical integration and Keith Veselik, vice president and chief medical officer, population health associate professor, internal medicine and pediatrics, Loyola Medicine.

Link to team materials accessible only when connected to Trinity Health Network: [CIN CLG Homepage](#)

Clinical Operations Clinical Excellence Council

Intended Audience: Inpatient Nursing Colleagues, Sepsis Coordinators, Nursing Education, Rapid Response Team



Information

SBAR 529 Nurse Sepsis Inpatient RN BPA: The RUNTIME work group developed visual changes and suppression recommendations to increase the BPA's readability and alleviate alert fatigue of firing frequency. ClinOps. fully supported these recommendations. Please see SBAR for details.

[SBAR #529 Nurse Sepsis Inpatient RN BPA](#)



Information

Intended audience: Patient Registration, Patient Financial Services, Patient Billing

SBAR 378 MyChart Paperless Billing: ClinOps. supported option # 1 recommendation of adding a MyChart announcement that will appear on MyChart Homepage to let patients know they are automatically enrolled in paperless billing. Please see SBAR for details.

[SBAR #378 MyChart Paperless Billing](#)



Information

Intended audience: Dietitians, Nutritionist, Pediatric Nursing, Pediatrician

SBAR 421 Pediatric Diet Orders: ClinOps. supported option # 1 recommendation of creating specific order questions for pediatrics and correct the age breakdowns listed in TogetherCare and the Nutrition Care Manual. Please see SBAR for details.

[SBAR #421 Pediatric Diet Orders](#)



Feedback

Intended Audience: Medical Group Executive

ClinOps. CEC is current accepting applications for a Medical Group Executive for participation. Calls are the first Tuesday from 5-630pm EST and third Wednesday 5-600pm EST of the month. Interested colleagues can email Jim Vandewarker:

jim.vandewarker@trinity-health.org



Feedback

Intended Audience: Dieticians (Inpatient & Ambulatory)

The Clinical Operations CEC Diabetes Expert Panel is accepting Dietician applications for participation. Calls are the fourth Thursday of the month in the afternoon. Interested colleagues can email Jim Vandewarker: jim.vandewarker@trinity-health.org



Feedback

Intended Audience: CNO, CMO, nursing leadership, IRF nursing leadership

The Rehab Expert Panel is seeking applicants for the role of Inpatient Rehab Nursing Leader.

Interested colleagues can email Ronda Winans: Ronda.Winans@trinity-health.org

Email: Jim.Vandewarker@Trinity-Health.org

Leader: Jim Vandewarker, R.N., director clinical transformation and Tammy Lundstrom, M.D., J.D., senior vice president and chief medical officer.

Link to team materials accessible only when connected to Trinity Health Network: [Clinical Operations CEC Homepage](#)

[Emergency Care Clinical Excellence Council](#)

Intended Audience: Emergency Care Providers, Emergency Care Nursing staff, Behavioral Health Providers and Nurses



Feedback

The Emergency Care Clinical Excellence Council is requesting volunteers to participate in the following Expert Panels:

- **Improving Care Delivery** – ED and Behavioral Health Providers and Nurses needed to address clinical guidance to reduce variation in clinical practice regarding optimizing care of behavioral health patients held in the ED, optimizing care of the agitated dementia patient and guidelines to optimize care of septic patients in the ED.
- **Reducing Unnecessary Utilization** – ED Nursing representatives needed to address clinical guidance to reduce variation in clinical practice in CT utilization in non-traumatic headache, CT utilization in Syncope and clinical guidelines for management of patient with syncope as well as reducing unnecessary IV Hydration in adults and pediatric patients in the ED.
- **Improving Caregiver Resilience and Patient Experience** - ED Providers and Nurses needed to provide guidance for improving communication strategies for colleagues to manage expectations of patients/ families while waiting for care in the ED, Strategies to improve comfort and experience during periods of waiting and improving education for discharged patients.

Interested colleagues please email Kelly Hojnacki hojnacka@trinity-health.org

Intended Audience: Emergency Care Providers, Emergency Care Nursing



Final Decision based upon feedback

SBAR #512 Pediatric Sedative Infusions - Given overwhelming support from CLU Feedback, the EC CEC recommends TogetherCare option 1: *Build new order set with specifications provided.* Add EPIC order panels and records for PICU

sedative, such as midazolam, propofol, ketamine and fentanyl based on the clinical expertise and recommendations of pediatric clinical specialists within Trinity Health.

[SBAR #512 Pediatric Sedative Infusions for ED](#)

Email: hajnacka@trinity-health.org

Leader: Kelly Hohnacki, R.N., director, clinical transformation and Jim DelVecchio, M.D., medical director, emergency care.

Link to team materials accessible only when connected to Trinity Health Network: [Emergency Care CEC Homepage](#)

[Medical Groups Clinical Leadership Group](#)

Intended Audience: Medical Group Providers



Information

The Trinity Health Medical Group Clinical Content Committee (THMG CCC) is focusing on 5 priorities to improve efficiency and effectiveness in the EHR.

THMG CCC Top 5 Priorities:

- Provider Efficiency
 - SmartSet Build
 - Refill Guidelines & Protocols
 - Document Management
 - Annual Wellness Visit Optimization

Provider Efficiency Spotlight:

Optimization through the Thrive After Go-live program has been done to improve workflow resulting in improvements to time spent in In Basket and messages per day sent or seen by Providers.

System Enhancements have been submitted to support Provider Efficiency and will be live in TogetherCare in the upcoming months:

- [BPA Updates supporting Provider Efficiency:](#)
 - Decreasing alerts for BMI criteria (updated BMI alert criteria)
 - Decreasing alerts for Providers with patients with recent Hemoglobin A1C (data shows this alert was not previously helpful for Providers)
 - Decrease alerts for patients who have previously given advise on smoking cessation
 - Decrease alerts for patients in different time zones
 - Decreased alerts for Providers ordering Opioids (data shows this alert was not previously helpful for Providers)
 - Decrease alerts for CHF patients (data shows this alert was not previously helpful for Providers)
- [Provider Efficiency in using the In Basket:](#)
 - Decreasing duplicate messages to Providers and pools
 - Decreasing messages from MyChart to Provider (routing to pool)
 - Implementing auto expiration for specific message types. Includes purging messages from the inbox outside of newly implemented expiration dates.

For more information, please contact Dan Weiswasser, M.D., at the email below.

Email: dweiswasser@trinity-health.org

Leader: Dan Weiswasser, M.D. and chief medical officer, Erik Carson, M.D. and Kayla Anderson, M.S.N., R.N., health informatics director

[Nursing Clinical Leadership Group](#)

Intended Audience: CNOs, Nursing colleagues



Feedback

The N-CLG is seeking bedside nurses to be members of the Trinity Health Nurse Practice Council. Please gain approval from your nursing leadership to participate and send your name with their approval to Ginger Hook at ginger.hook@trinity-health.org

Email: Joyce.Young@trinity-health.org

Leader: Joyce Young, R.N., Ph.D., vice president, system nursing services and Titus Gambrell, D.N.P., R.N., A.C.M., C.M.A.C., system chief nursing officer & vice-president, St. Mary's Health Care System

Link to team materials accessible only when connected to Trinity Health Network: [Nursing CLG Homepage](#)

[Pulmonary & Critical Care Clinical Excellence Council](#)

Intended Audience: Physicians, Advance Practice Providers, Respiratory Therapists, Nursing



Final Decision based upon feedback

SBAR #481 Oxygen Therapy Orders

Given the overwhelming support from feedback in the Clinical Leadership Update in February, the PCC CEC has supported the recommendation to amend the current orders for Oxygen Therapy within TogetherCare (Option 1), which includes the

changes to the Adult (RT73), Neonatal and Pediatric (RT74) Oxygen Therapy Order within TogetherCare. The changes are as follows:

1. Remove hard stop for device selection
2. Add hard stop and remove default for O2 Sat target (Maintain Buttons as exist now – 88% 90% 92% 95% other)
3. Change verbiage to read “Titrate oxygen to keep O2Sat at or above”

Ohio Medication orders:

- 1) The O2 ERX records use the same LQLs as corresponding EAPs (IP RT O2 DEVICE [121179] or IP RT PEDS O2 DEVICE [304121179] and IP RT TARGET O2 SAT [121176]). If existing LQLs are updated, then testing would just need to be conducted. If new LQLs are created for EAPs to replace existing one's then updates to OH O2 order panels might be necessary to ensure defaults in them remain constant.

[SBAR #481 Oxygen Therapy Orders](#)

Email: hojnacka@trinity-health.org

Leader: Kelly Hoinacki, R.N., director, clinical transformation and Bruno DiGiovine, M.D., M.P.H., medical director, medical specialties

Link to team materials accessible only when connected to Trinity Health Network:
[Pulmonary and Critical Care CEC Homepage](#)

[Radiology Clinical Leadership Group](#)

Intended Audience: Radiologists, Imaging Leadership, Imaging Colleagues



Information

The Radiology Clinical Leadership Group has endorsed Philips DynaCAD as a Tier 2 Advanced Visualization Application for MRI Breast. Please see attached SBAR.

[SBAR – MRI Breast Capability Standard](#)

Intended Audience: Radiologists



Feedback

The Radiology Clinical Leadership Group is seeking feedback for the proposed Home Reading Stations Configuration/Specifications. Please see attached SBAR and ACR Displays IT Reference Guide.

For further questions regarding this topic please reach out to Dr. Spencer Koch. spencer.koch@trinity-health.org

[SBAR – Radiologist Home Reading standards](#)

[ACR Displays IT reference Guide](#)

[Click here for survey.](#)

Email: Eric.Colaiani@saintalphonsus.org

Leaders: Eric Colaiani, director, St. Alphonsus Health Systems Services, Radiology Administration and Eric Ferguson, M.D.

Link to team materials accessible only when connected to Trinity Health Network: [Radiology CLG Homepage](#)

[Surgical Services Clinical Excellence Council](#)

Intended Audience: CMO, CNO, OR Tripod Leadership (Chair of Surgery, Chair of Anesthesia, OR Directors)



Implementation Bundle

Attached you will find the implementation bundle for the Six Point Surgical Safety Plan that was approved by the Surgery CEC in March 2023. This six-point surgical safety plan was presented to the Tripod OR leadership in December 2022 and the CLC (CMO/CNO) in January 2023.

Documents include:

- Implementation timeline
- Key points for the six point plan
- Plan example from Loyola University Medical Center
- Huddle scripting
- Information on purchase/ use of a visual management board for the surgical safety checklist (2 options)

Accompanying Submission Documents:

(Please indicate final order documents are to be bundled in and submit in addition to this form.)

1. Implementation Plan-excel file
[Six Point Surgical Safety Implementation Plan \(Excel\)](#)
2. Six Point Surgical Safety Plan
[Six Point Surgical Safety Plan](#)
3. Loyola Perioperative Safety Project (example) plan
[Loyola Perioperative Safety Project \(example\) plan](#)
4. Safety Huddle Scripting
[Safety Huddle Scripting](#)
5. Visual Management Board - purchase information
[Visual Management Board - purchase information](#)
 - a. Pricelist
[Pricelist](#)

- b. PDF #9031CH25 – Checklist boards example #1
[PDF #9031CH25 – Checklist boards example #1](#)
- c. PDF #9033LH – Checklist boards example #2
[PDF #9033LH – Checklist boards example #2](#)

Email: stoutcl@trinity-health.org

Leaders: Carole Stout, R.N., director, clinical transformation; Steve Ruby, M.D., medical director, surgical services; Matthew K. Folstein, M.D., FACS

Link to team materials accessible only when connected to Trinity Health Network: [Surgical Services CEC Homepage](#)
