Clinical Assessments
July 3, 2018

1. **Problem:** The length of time it takes for all the RCT members to complete the initial resident/patient admission assessment can take up to 14 days, resulting in residents/patients having to wait for services. The process itself is unclear and variable. Supplies needed for admission are not in one place, causing staff to make multiple trips to different places.

2. **Aim:** The admission application packet is available to the RCTs at least on the day before the planned admission. Complete the initial clinical assessments by 48 hours and the final clinical assessments by 7 days after admission.

3. **Intervention(s):**
   - Give RCTs access to the admission clinical packet before the admission
   - Implement a group paging system to notify RCT members on patient arrival
   - Create an admission kit that medicine and nursing can use
   - Inform case managers and ambulance companies to check in at the nursing station before going to the room
   - Create a sequence of clinical assessment based on disciplines so it is clear when various clinical assessments are made

4. **Measures/Indicators:** Measure the time from admission until the last clinical assessment is done.

5. **Results:**
   - 8 pieces of standard work were created and continue to support the clinical assessments process.
   - Resident Care Team members have access to Referrals drive and are notified of new admissions via email.
   - Unit clerks send out text pages to all RCT members when new admissions arrive so they can perform their assessments within the first 48 hours of admission.
   - 51 ADL kits have been ordered as of mid-June 2018. Units can order new ADL kits to maintain unique par levels as needed directly from the Central Processing Department.
• 13 admissions kits are available for use by both Physicians and Nurses. On some units Physicians prefer to carry their own equipment instead of using the kit; this practice is in alignment with the goal of reduced motion waste.

• From Q1 CY 2018, Nursing, Medicine, Clinical Nutrition, and Activity Therapy completed 100% of new admission assessments within 48 hours; Social Services completed 98%.

6. Lessons Learned: When the RCT is informed about the proposed admission beforehand they can prepare and be ready when the patient comes. When standard work is understood, everyone knows when they are to do their clinical assessments. Having admission kits and ADL starter kits for clinical staff use saves steps and time.

7. Next Steps: Continue monitoring to insure the initial clinical assessments are done within 48 hours and the final clinical assessments by day 7 after admission. Maintain the admission kits and ADL starter kits over time. Maintain the RCT group paging over time.

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