From the Office of Clinical Informatics

Northern Light Health

Patient Assessment Acuity Audits

Clairvia Web

Thursday, February 2, 2023

Table of Contents

Patient Assessment Acuity Audits 2

Overview 2

Purpose 2

Auditing Outcomes 2

Patient Outcome Expert (POE) 2

Frequency of Audits 2

POE Audit 3

Patient Selection 3

Patient Assessment 3

Blank Assessment Audit 3

Performing the Audit 4

ClinDoc Assessment by Patient Report 4

Compare Observation Score & Observation Value 5

Auditing Discrepancies 6

Submitting Audit in Clairvia 6

Submitting Results 6

Peer Review 7

Documentation Review and Discussion 7

Acuity Interrater Reliability 7

Peer Discussion 8

Resources 9

Reporting 9

Outcome Rating Summary 9

Helpful Information 9
Charting Peer Review/Acuity Audit 9
Assessment Not Populating 10
Mapping Catalog 10

Patient Assessment Acuity Audits

Overview

Purpose

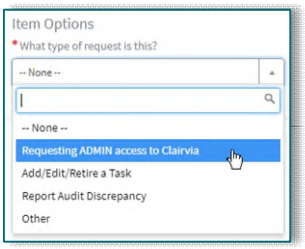
- **Applying nursing judgement to the acuity audit process aids in validating reliability and assists in discovering charting deficiencies and/or mapping discrepancies.**

Auditing Outcomes

- **Validate the accuracy and appropriateness of Clairvia's scoring of the clinical documentation.**
- **Validate the clinical documentation imported into Clairvia to ensure appropriateness and identify any missing clinical documentation.**
- **Identify areas of opportunity for nursing documentation improvement.**

Patient Outcome Expert (POE)

- **Expectations of a POE:**
  - Conduct timely acuity audits and peer reviews.
  - Educate nursing staff how EHR documentation is utilized to determine acuity scores and how to accurately document to best depict the nursing care requirements of each patient.
  - Contribute nursing clinical judgement to improve patient acuity process.
- **POE Access:**
  - Submit ServiceNow ticket to request Clairvia auditor access for the selected employee here.



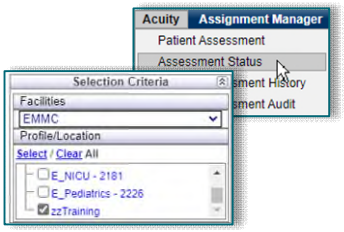
Frequency of Audits

- **A minimum of ten (10) Patient Assessment Acuity Audits will be completed by each nursing unit, each quarter.**
  - See the policy for more information: Policy Manager - MCN Healthcare (ellucid.com).

POE Audit

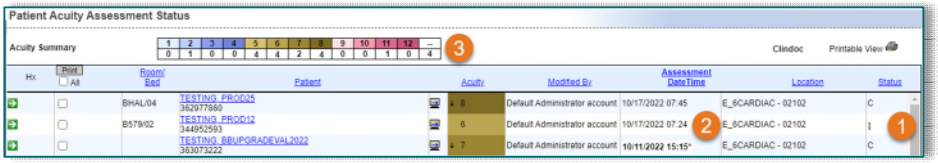
Patient Selection

Patient Assessment



Purpose: **Review the patients on your unit to identify an eligible patient for audit.**

STEP 1: From the toolbar, select **Acuity**, then **Assessment Status**.
STEP 2: In the **Selection Criteria**, select your Facility and Profile/Location (unit).
STEP 3: From the patient list, identify a patient who meets the following criteria:

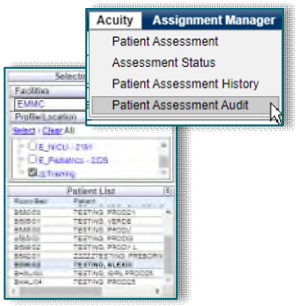


1. Completed assessment, as evidenced by a **C** in the **Status** column.
   - **I** indicates an incomplete status and **should not** be selected.
   - **A** indicates a completed audit and **should not** be selected.
2. Assessment completed within the past 6 hours. See the **Assessment DateTime** column for timestamp.
   - Assessments older than 12 hours are indicated with an asterisk.
3. Recommended to select a patient with an acuity score outside the range for the unit.

1	2	3	4	5	6	7	8	9	10	11	12	--
0	1	0	0	4	4	2	4	0	0	1	0	4

   - In the table above the patient list, the first row displays the acuity score range from 1 – 12 and the second row displays how many patients fall into each acuity score.
4. Recommended to select a patient you are unfamiliar with to prevent preexisting knowledge from disrupting the auditing process.

Blank Assessment Audit



Purpose: **A blank assessment audit is printed and/or saved as a PDF so the POE can capture audit results and any discrepancies, prior to entering the details into Clairvia.**

STEP 1: From the toolbar, select **Acuity**, then **Patient Assessment Audit**.
STEP 2: In the **Selection Criteria**, select the Facility, Profile/Location (unit), and the patient selected for the audit.

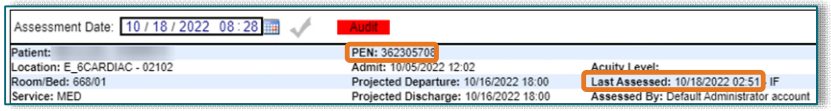
- The audit displays the Outcome categories used to generate an acuity score. The categories display in the left-most column of the table.

- Select the Outcome hyperlink to view the associated EHR documentation for the Outcome.

STEP 3: Select the **Audit Printable View** icon to open the printer-friendly view.

STEP 4: From the printer-friendly view, select the print or save icon.

STEP 5: Take note of the **PEN** (patient encounter number) and the **Last Assessed** timestamp in the demographics section. This information will be needed to view the clinical documentation associated with the assessment.



Performing the Audit

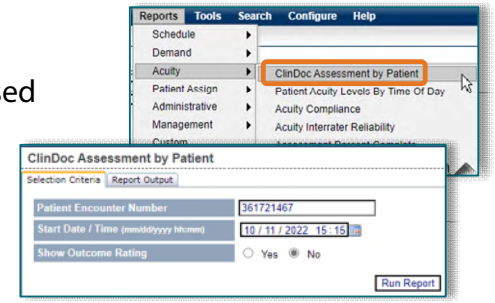
ClinDoc Assessment by Patient Report

Purpose: Provides the supporting clinical documentation used to generate the acuity score.

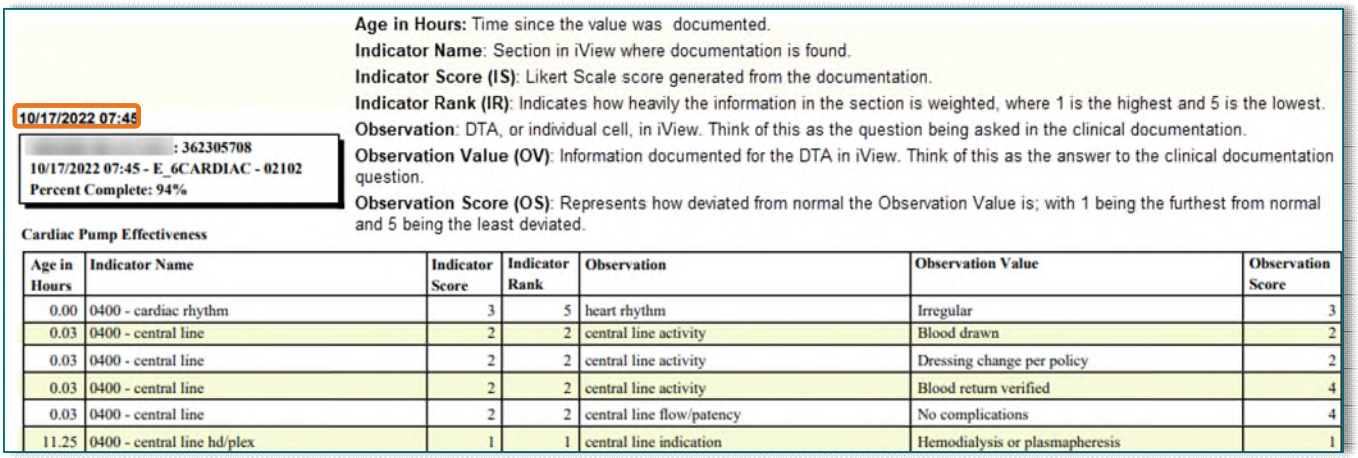
STEP 1: From the toolbar, select **Reports**, **Acuity**, then **ClinDoc Assessment by Patient**.

STEP 2: In the **Selection Criteria**, enter the patient's PEN, Last Assessed date and time, and select **No** to Show Outcome Rating, then select **Run Report**.

STEP 3: Confirm the date and time at the top of the page is the same as the **Last Assessed** timestamp in the Patient Acuity Assessment to ensure review of the appropriate assessment is being conducted.



- Data displays with the most recently completed assessment at the top and the oldest assessment at the bottom.



Age in Hours	Indicator Name	Indicator Score	Indicator Rank	Observation	Observation Value	Observation Score
0.00	0400 - cardiac rhythm	3	5	heart rhythm	Irregular	3
0.03	0400 - central line	2	2	central line activity	Blood drawn	2
0.03	0400 - central line	2	2	central line activity	Dressing change per policy	2
0.03	0400 - central line	2	2	central line activity	Blood return verified	4
0.03	0400 - central line	2	2	central line flow/patency	No complications	4
11.25	0400 - central line hd/plex	1	1	central line indication	Hemodialysis or plasmapheresis	1

STEP 4: Print the **ClinDoc Assessment by Patient** report to be referenced during the peer review.

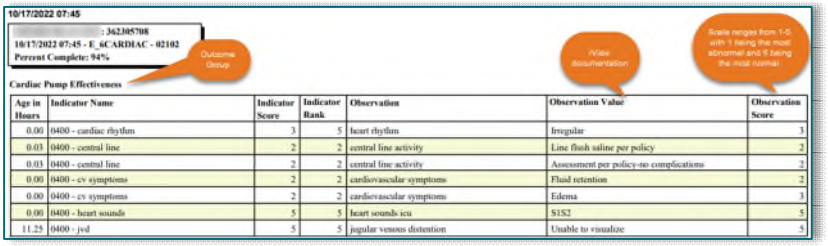
Reminder: The ClinDoc Assessment by Patient report displays all assessment documentation entered within the past 24 hours. When printing, ensure you are only printing the pages pertaining to the assessment in review.

Compare Observation Score & Observation Value

Purpose: **Ensure the clinical documentation received by Clairvia is appropriately scored and confirm all necessary documentation is received to generate an accurate acuity score.**

STEP 1: Compare each Observation Value to its associated Observation Score for appropriateness.

- **Ex**: If the Observation Value of "Unable to visualize" for jugular venous distention yields an Observation Score of 5 (normal), this would be deemed appropriate, and the POE can move on to the next Observation Value.



Age in Hours	Indicator Name	Indicator Score	Indicator Rank	Observation	Observation Value	Observation Score
0.00	0400 - cardiac rhythm	3	5	heart rhythm	Irregular	3
0.03	0400 - central line	2	2	central line activity	Line flush saline per policy	2
0.03	0400 - central line	2	2	central line activity	Assessment per policy-no complications	2
0.00	0400 - cv symptoms	2	2	cardiovascular symptoms	Fluid retention	2
0.00	0400 - cv symptoms	2	2	cardiovascular symptoms	Edema	3
0.00	0400 - heart sounds	5	5	heart sounds icu	S1S2	5
11.25	0400 - jvd	5	5	jugular venous distention	Unable to visualize	5

- **Ex**: It is expected the Observation Value of "Line flush saline per policy" to yield an Observation Score of 2. Though it is not abnormal to flush a central line, the presence of a central line is a deviation from normal, so a score of 2 is appropriate.

NOTE: The POE is auditing the documentation, not the personal knowledge of the patient. If the documentation (Observation Value) is not accurately reflecting the patient's condition, education should be provided to the nurse who completed the assessment to ensure documentation is accurate.

STEP 2: After comparing all Observation Values and Observation Scores within the Outcome Group, the POE will use nursing judgement to determine an overall acuity score for the Outcome Group.

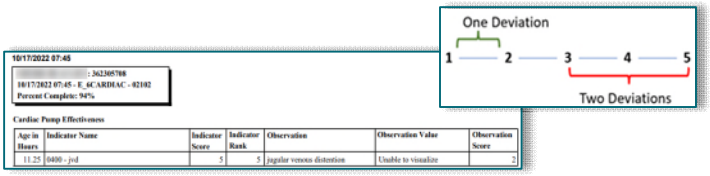
REMINDER: **POEs use their nursing judgement to designate Outcome Group scores based only on the Observation Values. Observation Scores should not be considered when scoring the Outcome Group.**

- Score the Outcome Groups using the 1-5 scale, where 1 is abnormal and 5 is normal.

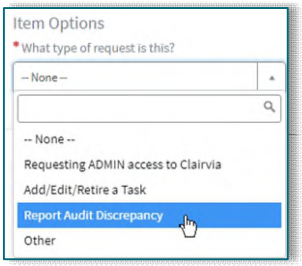
STEP 3: Mark the Outcome Group score on the blank assessment audit and repeat steps until all Outcome Groups have been scored.

Auditing Discrepancies

- **An Observation Score discrepancy is defined as a deviation from the expected score by two (2) or more.**
  - **Ex: It is expected the Observation Value of "Unable to visualize" for jugular venous distention to yield an Observation Score of 5. If the Observation Score was a 2, this would indicate a discrepancy.**



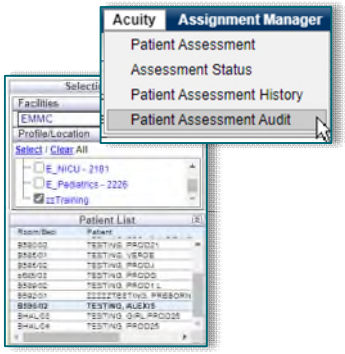
- **If discrepancies are noted, continue with completing the audit, using nursing judgement to determine an appropriate 1-5 score for the Outcome Group.**
- **After completing the review, submit <u>one</u> ServiceNow ticket for all noted discrepancies here.**
  - **Items to include in the ticket:**
    - ClinDoc Assessment Report
    - Patient Acuity Assessment
    - Observation Value/Score in question
    - Any applicable notes



Submitting Audit in Clairvia

Submitting Results

<u>Purpose</u>: Submit audit results into the Clairvia system.



<u>STEP 1</u>: From the toolbar, select **Acuity**, then **Patient Assessment Audit**.

<u>STEP 2</u>: In the **Selection Criteria**, select the Facility, Profile/Location (unit), and patient selected in the Patient Assessment process.

- If auditing in real-time, the **Assessment Date** does not need to be updated. If auditing retrospectively, enter the date and time of the assessment.

<u>STEP 3</u>: Indicate the Outcome Score for each Outcome Group by selecting the box that matches the audit findings. If no documentation is available for a particular outcome, select the **No Data** box.

<u>STEP 4</u>: Once all the Outcome Scores have been documented, select the **Save/Complete** button.

Peer Review

Documentation Review and Discussion

Acuity Interrater Reliability

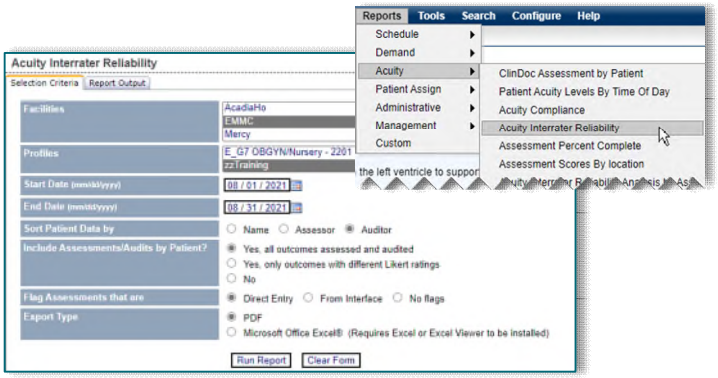
Purpose: Higher Interrater Reliability scores indicate agreement between the POE's audit and Clairvia's scoring of the documentation. POE's will utilize the report to conduct peer review discussions and identify opportunities for documentation improvement, clinical education needs, and/or mapping catalog discrepancies.

- **Target Interrater Reliability Score: At least 85%.**

STEP 1: From the toolbar, select Reports → Acuity → Acuity Interrater Reliability.

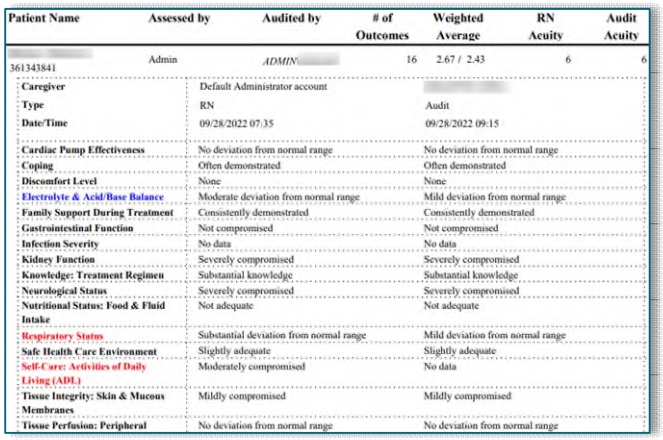
STEP 2: In Selection Criteria, select your facility, profile (unit), and date range. Set the remaining settings as follows:

- Sort Patient Data by: **Auditor**
- Include Assessments/Audits by Patient: **Yes**
- Flag Assessments that are: **Direct entry**
- Export Type: **PDF**



STEP 3: Select **Run Report**.

- The first page of the report displays an overall data summary of the parameters selected. The following pages show the individual audit details.
- Outcome Groups are color-coded to identify discrepancies between the POE's audit and the clinical documentation.
  - **Black** Text: Indicates agreement.
  - Blue Text: Indicates discrepancy by one value.
  - Red Text: Indicates discrepancy by two or more values.



Patient Name	Assessed by	Audited by	# of Outcomes	Weighted Average	RN Acuity	Audit Acuity
361343841	Admin	ADMIN	16	2.67 / 2.43	6	6

Caregiver	Default Administrator account	
Type	RN	Audit
Date/Time	09/28/2022 07:35	09/28/2022 09:15
Cardiac Pump Effectiveness	No deviation from normal range	No deviation from normal range
Coping	Often demonstrated	Often demonstrated
Discomfort Level	None	None
Electrolyte & Acid/Base Balance	Moderate deviation from normal range	Mild deviation from normal range
Family Support During Treatment	Consistently demonstrated	Consistently demonstrated
Gastrointestinal Function	Not compromised	Not compromised
Infection Severity	No data	No data
Kidney Function	Severely compromised	Severely compromised
Knowledge: Treatment Regimen	Substantial knowledge	Substantial knowledge
Neurological Status	Severely compromised	Severely compromised
Nutritional Status: Food & Fluid Intake	Not adequate	Not adequate
Respiratory Status	Substantial deviation from normal range	Mild deviation from normal range
Safe Health Care Environment	Slightly adequate	Slightly adequate
Self-Care: Activities of Daily Living (ADL)	Moderately compromised	No data
Tissue Integrity: Skin & Mucous Membranes	Mildly compromised	Mildly compromised
Tissue Perfusion: Peripheral	No deviation from normal range	No deviation from normal range

Peer Discussion

- **Persons Included:**
  - POE
  - Nurse who documented the assessment
- **Materials for Review:**
  - Acuity Interrater Reliability report
  - ClinDoc Assessment by Patient report
- **Discussion Topics:**
  - Review each Outcome Group and the associated documentation.
  - Discuss consistency of the Outcome Group scores between Clairvia and the POE's assessment. Review all outcomes, even those in absolute agreement.
  - Review the observation and values in the documentation system used for each outcome assessment.
    - An outcome with **No Data** indicates that mapped observations and values for the specific outcome were not received. If there is no documentation for the outcome, discuss how and where to enter documentation to be used in the outcome assessment.
      - If documentation was entered appropriately, submit a ServiceNow ticket and indicate which documentation is missing from the mapping.
  - Discuss whether the documentation accurately depicts nursing care requirements of the patient.
    - If no, explore possible causes, including the use of free text comments vs. drop-down values, absence of appropriate documentation choices, documentation timeliness, and mapping scores.
    - Any missing documentation identified should be included in a ServiceNow ticket for further investigation.

Resources

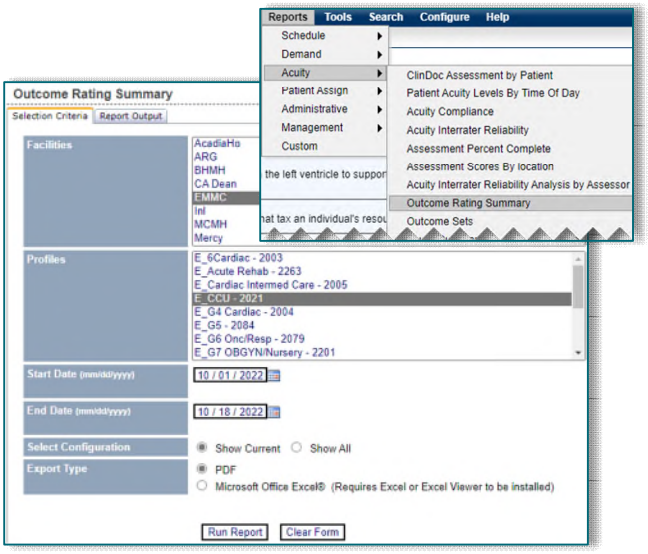
Reporting

Outcome Rating Summary

Purpose: Displays the average Outcome Group scores for the selected unit and timeframe, used to identify areas of documentation opportunity.

- **From the Clairvia Web toolbar, select Reports, Acuity, then Outcome Rating Summary.**

In Selection Criteria, select your facility, profile (unit), Start Date, End Date, Select Configuration as Show Current, and Export Type as PDF. Then select **Run Report**.



- **The report displays the Outcomes and the associated count and percentage of assessments that fall into the various scores.**

Zero: Indicates no documentation was found for the Outcome Group.

- **It is recommended to run this report monthly and review the results with staff. Consider focusing on one Outcome Group each month to improve documentation scores.**

Outcome Rating Summary
10/01/2022 to 10/18/2022

Configuration Date: 06/04/2015

		Likert Rating Count							Likert Rating Percent					
Weight	Outcome Name	0	1	2	3	4	5	Total # Assessments	0	1	2	3	4	5
1	Cardiac Pump Effectiveness	5	1,823	440	1	92	341	**2,702**	0%	67%	16%	0%	3%	13%
1	Safe Health Care Environment	98	850	1,420	270	60	4	**2,702**	4%	31%	53%	10%	2%	0%
1	Infection Severity	1,251	690	46	420	206	89	**2,702**	46%	26%	2%	16%	8%	3%
1	Kidney Function	6	1,051	696	7	157	785	**2,702**	0%	39%	26%	0%	6%	29%
1	Electrolyte & Acid/Base Balance	847	534	0	854	385	82	**2,702**	31%	20%	0%	32%	14%	3%
1	Nutritional Status: Food & Fluid Intake	878	801	253	37	95	638	**2,702**	32%	30%	9%	1%	4%	24%
1	Self-Care: Activities of Daily Living (ADL)	110	793	170	673	549	407	**2,702**	4%	29%	6%	25%	20%	15%
1	Gastrointestinal Function	13	1,096	250	14	215	1,114	**2,702**	0%	41%	9%	1%	8%	41%

Helpful Information

Charting Peer Review/Acuity Audit

- **Do not audit your own assessment of a patient. If you are working, ask a POE-peer to complete the audit.**
- **Complete audits within the same shift as the assessment to facilitate the discussion and documentation review with the nurse caring for the patient.**

Assessment Not Populating

- **Assessment documentation is imported into Clairvia every four (4) hours beginning at 0030, 0430, 0830, 1230, 1630, 2030. If an assessment is not populating, confirm the date and time of the assessment to see when it will be imported into Clairvia.**

NOTE: If the assessment does not populate after the import time, place a ServiceNow ticket.

Mapping Catalog

- **On the last Tuesday of each month, regular maintenance is completed in the mapping catalog, resulting in the inability to perform audits for 24 hours.**
- **If unsure of what an expected Observation Score should be for any Observation Value, reference the mapping catalog.**

207-973-7728 or 1-888-827-7728.