Increasing usage of remote video monitoring impacts patient safety and cost

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Introduction

- Falls occur at a rate of 3 to 5 per 1000 patient days, with approximately 700,000 to 1 million hospitalized patients falling annually (Daley et al., 2020)
- Falls within the United States cost more than \$50 billion dollars per year (Daley et al., 2020)
- Severe injury results in an increase length of patient stay usually between 6-12 days and an average of \$30,000 direct cost per patient (Hogan-Quigley et al., 2021).

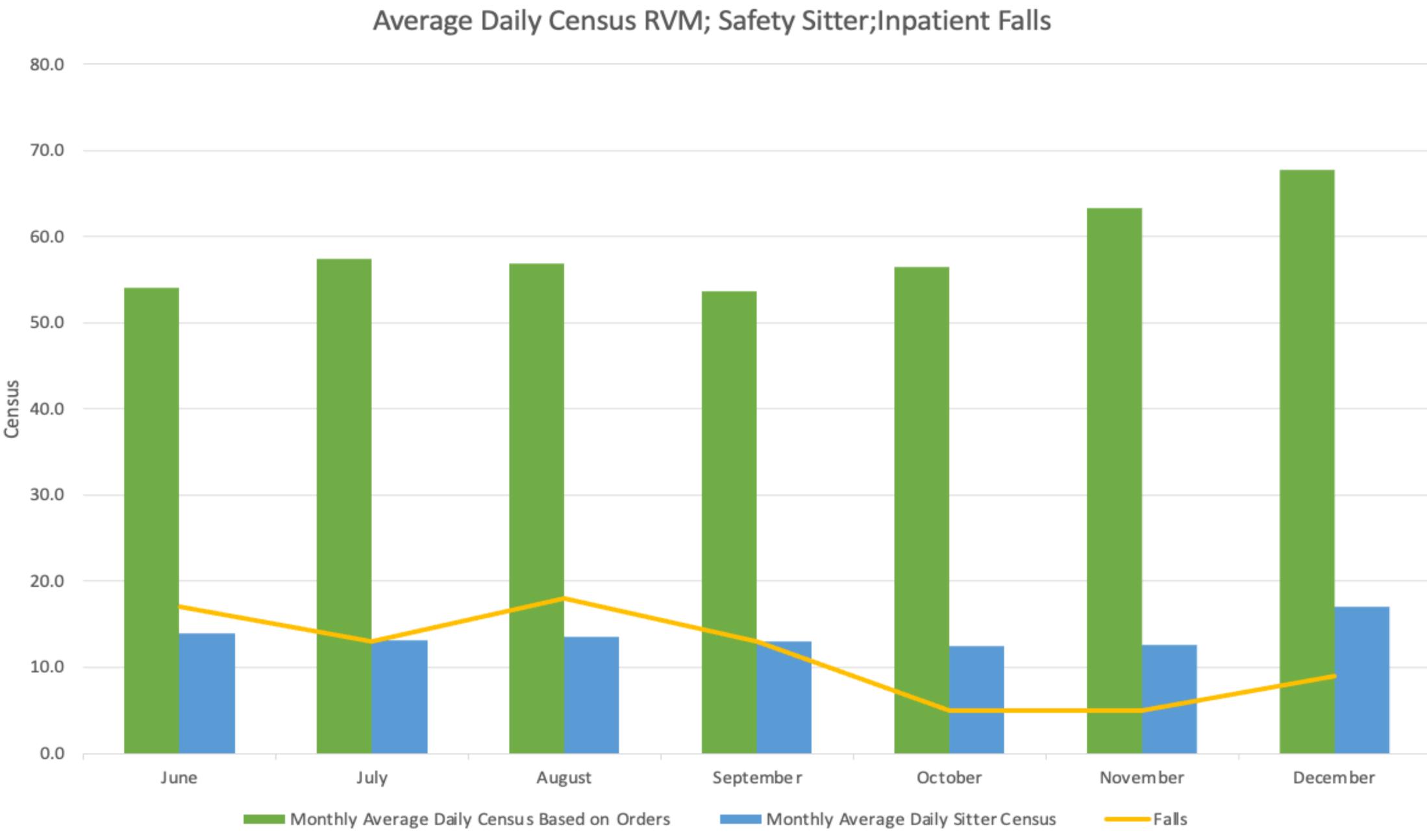
Problem

- Utilization of remote video monitoring remains low despite its proven ability to decrease inpatient falls
- 1:1 safety sitter usage remains extremely high with an average of 20+ orders per 12-hour shift increasing labor cost
- Inpatient falls remain high • Physician order is needed to implement remote video monitoring

Objectives

- Assess current remote video monitoring usage and workflow for obtaining/placing orders
- Start data collection to include:
- RVM utilization by unit (EHR Orders)
- 1:1 usage by unit (EHR Orders)
- Inpatient Falls by unit (NDNQI)
- Develop and implement the Nurse Driven Protocol for Remote Video Monitoring Implementation, Discontinuation and Failure
- Continue to evaluate data post implementation

Remote video monitoring improves patient safety while decreasing spending at the bedside

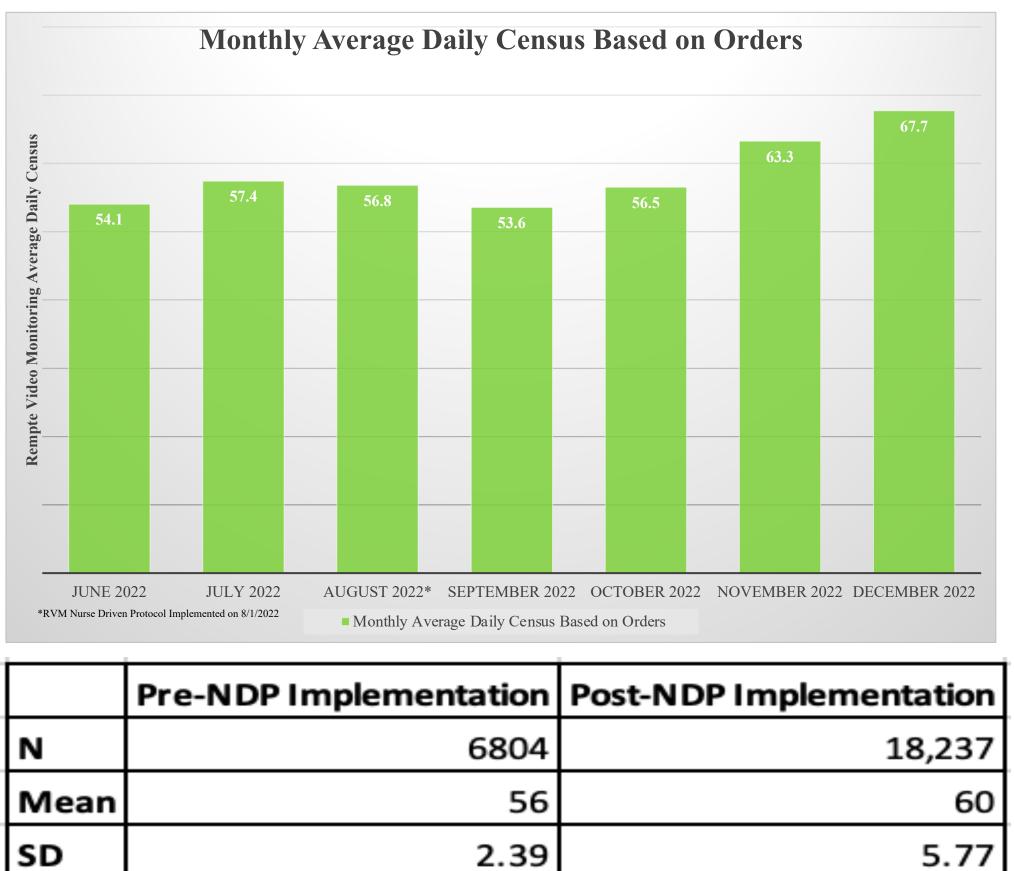




Aim

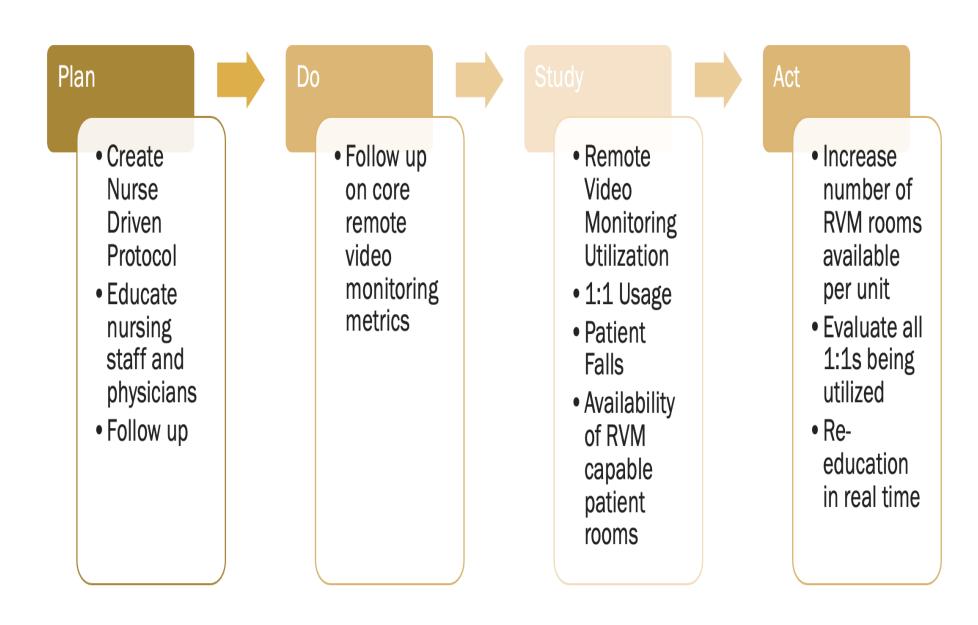
To increase remote video monitoring utilization from an average daily census of 54 to 60 by December 31, 2022, while decreasing inpatient falls and safety sitter utilization

Results



• Pre-implementation falls average 15 • Post-implementation falls average 10

Methods



Limitations

- RVM capable rooms (current
- capacity 201 rooms)
- Staffing constraints impeding the
- ability to open additional monitoring stations
- Study focused solely on units with
- remote video monitoring capabilities

Clinical Implications

- Overall utilization of Remote Video monitoring increased
- 1:1 safety sitter usage decreased
- Inpatient falls decreased across the board by almost half during the time of the study

References