NRS-460-RS-T4-Benchmark-Case Study-Discharge PlanningFinal

Student Name

Program Name or Degree Name (e.g., Bachelor of Science in Psychology), University

COURSE XXX: Title of Course

Instructor Name

Month XX, 2024

NRS-460 Benchmark - Case Study: Timothy Smith -

Discharge Planning

"Directions: Read the case study below. Evaluate the information and formulate a conclusion based on your evaluation. Complete the critical thinking table and submit the completed template to the assignment dropbox."

"It is necessary for an RN-BSN-prepared nurse to demonstrate an enhanced understanding of the complex management of disease during the discharge of a patient, and the additional aspects of communication and safety in the work environment. The purpose of this assignment is to participate in discharge planning for a patient utilizing communication and information technology and in a scenario where patient and provider safety is a concern."

PART I: Health History and Medical Information

"Evaluate the health history and medical information for Timothy Smith, presented below."

"Mr. Smith is ready to be discharged from the hospital. Timothy has been weaned off of oxygen. His tube feedings have been discontinued and he is tolerating a pureed diet.

The hospital case manager has set up services with a transitional care manager from a Home Health agency to facilitate safe discharge. The goal is for Mr. Smith to attain safe recovery and rehabilitation."

- 1. Broken left leg status
- 2. Weight bearing status: non-weight bearing, stand pivot with right leg only
 - a. Assistive devices: wheelchair
 - b. PICC line present for discharge
- Left upper leg wound care: dressing changes as needed for open reduction internal fixation (ORIF) on leg

- 4. Psychiatrist telehealth follow-up scheduled for a Zoom call upon discharge
- Telehealth follow-up visit scheduled two weeks after discharge with Primary Care Physician (PCP)

Lab Tests and Vitals

- 1. Room air, respiratory rate 16 breaths per minute
- 2. Vital signs are within normal limits

PART II: Critical Thinking Activity

"Use the findings from your evaluation to complete the following:"

Home Health Care and Rehabilitation Therapy

"During care coordination and transition of care planning, it is important to consider the type and level of care a patient might need."

"You are the transitional care manager assigned to Mr. Smith prior to discharge. Based on Mr. Smith's assessment findings, develop a discharge plan that encompasses his care needs following discharge. Your response should be a minimum of 200 words."

In my role as Mr. Smith's transitional care manager, I will be responsible for ensuring the safety of the client from the hospital back to his home while ensuring continuity of care. In the discharge plan, there will be affiliation to other interdisciplinary professionals to cater to Smith's home health care and rehabilitation requirements.

Home Health Nurse: A nurse specializing in home health will visit the patient at home to check his physical condition, take vital signs, and help him manage his medication. The nurse will also discuss medication administration and the side effects of the drugs Mr. Smith will be taking with him and his family members.

Physical Therapist: Recuperation from major trauma involves various invasive and noninvasive techniques; physical therapy plays a crucial role in Mr. Smith's recovery (Alodaibi et al., 2022). A physical therapist will help him regain his strength, coordination, and balance to minimize his chances of falling and help him get back to full functionality in many aspects of his everyday life. The therapist will also develop a specific exercise plan that will fit nicely into Mr. Smith's current functioning.

Occupational Therapist: An occupational therapist will focus on increasing Mr. Smith's functional abilities in ADLs, including dressing and bathing ("What Is Occupational Therapy?" 2020). They will advise on changes to be made at home and what they need to enhance their independence and safety, such as grab bars and other devices.

Social Worker: The social worker will facilitate the assessment of community services to help Mr. Smith, including rides to medical appointments or meals delivered to him. They will also identify whether he qualifies for government financial or social services support.

Dietitian: A dietician will be engaged in Mr. Smith's care to ensure that he observes the right diet as advised by his state conditions. Nutrition education will enhance his health status and well-being.

Areas of Concern to Prioritize During the Initial

Visit:

Medication Adherence: Ensuring Mr. Smith understands his medication regimen, including dosage, timing, and potential side effects, is crucial. Medication errors or non-adherence could lead to rehospitalization.

Fall Risk Assessment: Evaluating Mr. Smith's risk for falls is critical. The initial visit should involve an assessment

of his home environment for hazards and mobility status to implement appropriate interventions.

"Discuss three to five interdisciplinary roles that will be essential in supporting Mr. Smith's home health and rehabilitative care needs. Your response should be a minimum of 150 words."

When planning for care delivery and rehabilitation for Mr. Smith to enable him to transition to home health care, it requires a team of interrelated personnel to give him the best care.

Home Health Nurse: The primary person tasked with overseeing Mr. Smith's healthstatus after discharge is the home health nurse. They will screen, examine, and monitor his overall health status, administer any treatment that may be required, teach him how to manage his medications, and monitor for and treat any newhealth condition.

Physical Therapist: In this case, a physical therapist will assist Mr. Smith in exercising to help him with mobility and strength. Their involvement is the key to minimizing the risk of falling and thus retaining the level of functional autonomy in Mr. Smith.

Occupational Therapist: This professional will also help Mr. Smith on how to enhance his capacity for acquiring basic tasks or ADLs. They may also provide recommendations on adaptive tools and measures to increase his comfort and

safety at home.

Dietitian: A dietitian will see to it that Mr. Smith takes meals that are recommended for him to improve his health and prevent adverse effects from a poor diet.

Social Worker: The social worker will arrange for the transport means, financial assistance, and home makeover if needed, believing that Mr. Smith needs all-round support.

"You are the home health nurse assigned to treat Mr.

Smith. Identify two areas of concern you might prioritize during your initial visit with him following discharge. Your response should be a minimum of 150 words"

As a home health nurse in Mr. Smith's case, two primary areas of concern to prioritize during the initial visit are medication management and fall prevention. As for the predictability of further outcomes, Mr. Smith must receive medication management and adequately adhere to the prescribed regimen. I will check his knowledge of each medication, correct misunderstandings, and define factors such as cognitive impairment or lack of funds to adhere to the prescribed regimen. Ensuring that he fully comprehends them makes it possible to avoid complications and decrease readmission to the hospital.

The second area of concern is fall prevention. Since many patients in the community are at a high risk of falls, I will evaluate his mobility, identify any dangers in his home environment, and advise on the best changes to be made, such as replacing rugs or fixing grab bars. According to

Montero-Odasso et al. (2022), these interventions will enhance his safety and ability to continue living independently and reduce injury incidences.

Psychosocial and Spiritual Considerations

Providing holistic nursing care for patients with complex conditions requires the nurse to consider the patient's psychosocial and spiritual needs.

"Given the patient's current situation, discuss ways in which the nurse can take into account and address the patient's psychosocial and spiritual needs. Your response should be a minimum of 150 words".

Specifically, psychosocial and spiritual needs are the focus of the complete medical profile evaluation. Mr.

Smith's care. Besides, reintegrating into everyday life involves evaluating his mental conditions, his concerns, likely social rejection after being discharged, and other assessments thereof.

I would listen actively to help him voice his concerns and emotional support. He needs to find friends who can also help him with abstinence but also reconnect with support groups or counseling through which he can alleviate feelings of loneliness and anxiety.

Religious support is also crucial because joyful words and encouragement will greatly help Mr. Smith during his painful experience. I would ask the patient about religious preferences and, if he wishes to, provide his contact to a pastor or priest (Ernstmeyer & Christman, 2021). It is helpful for this patient's psychotherapeutic treatment to suggest intuition-orientation activities like prayer or meditation. Treating him

with respect and ensuring that he is attended to spiritually will make him a happy and give him the strength to recover.

Just Culture

"The patient is due to receive his IV antibiotic prior to discharge. As the nurse reviews the electronic orders, she notices that the antibiotic dose seems incorrect. Upon discussion with the provider and pharmacy, it was determined that the dose entered was incorrect."

"Discuss how reporting this near miss will help contribute to a just culture reflecting civility and respect. Your response should be a minimum of 200 words."

One feature of good culture in healthcare is reporting errors, such as Mr. Smith's incorrect choice of antibiotic dose. Culture allows staff to report incidents and/ or mistakes made without being penalized, but it also aims to ensure that the staff learns from the mistakes. In this case, this near miss is essential because a nurse has informed others about the danger Mr. Smith faced and all the other patients who may encounter the same fate in the future.

This approach helps maintain civility and respect among the healthcare team members since they can openly share information and ideas. Coping with the error involves communicating with the provider about the error and the pharmacy about the correct medication, affirming each member's worth in the process. It promotes safer working by motivating healthcare professionals to seek to ensure safety and quality of care rather than to cover any problem due to fear of punishment.

Also, reporting near-miss events enables organizations

to discover areas of development, such as ambiguous prescription details or software defects. Such circumstances allow for possible alterations in a system that would have otherwise led to such problems. In that case, the nurse's work as a caregiver reinforces the atmosphere of learning and improvement, respect, and civility appropriate to patient care.

"Discuss how clinical
judgement and critical
thinking should be applied
despite the use of
information and
communication technologies.
Your response should be a
minimum of 150 words".

Although ICTs are essential in healthcare delivery, all healthcare services require clinical judgment and critical thinking. EHR technology and decision support systems help with data gathering and analysis but cannot replace the nurse's experience assessing patient information (Fennelly et al., 2020). A key observation in critical thinking is the tendency to doubt data and its applicability and realize when the offered recommendations are unsuitable for some patients.

Expert clinical decision-making is paramount to integrating data in a context. This includes making decisions and identifying various inconsistencies that computers may fail to capture such as slight changes in patient status. Therefore, nurses must depend on technological screens while acting based on knowledge, perceptions, and client assessments.

Lastly, through the use of assessment skills and critical thinking measures, the implementation of technologies remains fixed rather than replacing the human touch, and patient care remains patient-centered and safer.

Levels of Risk

"As Mr. Smith is waiting for the nurse, he becomes impatient and starts to verbally attack the patient care technician as she obtains his vital signs."

"Identify actual and potential levels of risk to the care team within this situation given the patient's history of PTSD. Your response should be a minimum of 150 words."

In Mr. Smith's situation and his PTSD background, the actual level of risk pertains to verbally abusive communication with the patient care technician and the potential physical abuse if Mr. Smith were to go through his PTSD episode. The teacher may feel threatened or intimidated and thus cannot practice proper care as expected. The potential level of risk involves the spread of emotional distress, both to a technician as well as to Mr. Smith, with a possibility of subsequent erosion of the patient-provider trust. There is also the possibility that Mr. Smith may be overwhelmed by a PTSD trigger, which will cause a worse behavior or even a flashback that will endanger both him and the caregivers.

To manage these risks, precautionary steps should be taken before handling them, and one should adopt a flexible perspective when dealing with the issue, taking into consideration factors such as the anxiety that triggered Mr. Smith. An effective communication model indicating a proactive approach can adequately address the abovementioned risks.

What can the nurse do to

diffuse this situation? What steps can be put in place toensure patient and provider safety in the future? Your response should be a minimum of 150 words."

To reduce the tension, the nurse has to get closer to Mr. Smith without raising anger and be polite while responding to his complaints. One of the things that the nurse ought to do is to listen to what Mr. Smith has to say and, therefore, take a step forward and offer him an apology and an intervention in the form of an explanation of delays or probability periods. It is suggested that keeping the tone of the conversation friendly andunharmful and providing options will help Mr Smith claim backsome of the control, which in the case of PTSD seems to be crucial. The nurse should also look at finding other ways of responding to this; for example, they should look at distracting him or asking him to be moved to another area if possible.

All healthcare staff should also be trained to de-escalate for future safety or learn the signs of distress and how to deal with it calmly. Moreover, Mr. Smith's personal care plans should identify his PTSD risk factors, with the information that staff will be able to expect conflicts. Some organizational procedures that reduce frustration include the frequency of communication and the lack of long silence when communicating between two or many people. This will provide an assertive stance to deal with risky behaviors that patients showcase to other patients and guarantee friendly planning incongruent with fierce confrontations between patients and providers.

Patient Portal

"The nurse is helping Mr. Smith log in to the Patient Portal (i.e., MyChart) before discharge."

"Explain the considerations for ensuring the patient would be able to use this resource at home. In your discussion, consider the patient's condition and cognitive status based on his assessment findings and history of injury reviewed in previous topics. Your response should be a minimum of 200 words."

Other factors must be considered before enabling Mr. Smith to practice using the Patient Portal at home, especially his condition and memory state. Since he has a background of an injury on the head and may have some organic brain damage, it is crucial to determine Mr. Smith's literacy regarding digital technology. Specifically, the nurse has to decide whether or not Mr. Smith is comfortable using technology and if he has access to a good internet connection and an appropriate device, starting from a smartphone and a personal computer. To assist Mr. Smith in using the portals, it will be necessary to assign a simple tutorial based on the situation and to exercise the use of the login information.

Also important in this assessment is Mr. Smith's ability to comprehend the information displayed in the portal for navigating healthcare information technology tools to access one's health information, lab results, and medication instructions. If the patient has impairments to cognition, they should be given clear and possibly illustrated instructions. It may also be helpful for Mr. Smith to establish step-by-step practical instructions with a family member or caregiver to involve him during the training application. Since he might

have PTSD, the nurse should also calm him down about the privacy and security of his health information in the Patient Portal. An additional advantage for all the models is that the developed scanning processes can be accompanied by written instructions and a clear, step-by-step guide for using them. He must feel at ease using this tool so that he will be at ease dealing with his health and explicitly participating in his care.

"Discuss the benefits for both the patient and the care team in using information and communication technology to support the patient-provider relationship. Your response should be a minimum of 150 words."

There are many potential advantages of ICT in the context of the patient and of the care team to enhance the relationship with the patient; these include patient portal and telehealth. For patients, ICT solves the problem of accessing health information and appointments and secures communication with clinicians, which sets the patients in the center and makes them participate proactively in their care (Nordin et al., 2021). This is a convenience that enhances patients' sense of belonging to a healthcare team, as well as increases understanding of their care.

Conversely, patients and their care teams experience enhanced ICT use in managing patients' information and promoting effective communication, in which care team members can promptly answer patients' queries or concerns or clarify patients' care plans. The first of the incentives it offers is increased continuity of care, as clinicians and caregivers can

monitor patient trajectory and engage if complications occur.

Also, ICT reduces the clerical demands and frees the health care staff to spend more time with the patients, improving clinical-attendant interaction and increasing the quantity and quality of the offered services.

"What obstacles might
hinder his use of the Patient
Portal? Your response
should be a minimum of 150
words."

Using the Patient Portal benefits the organization; however, Mr. Smith may experience many barriers limiting his effectiveness. One critical challenge is improving or enhancing the digital skills of the staff. Suppose Mr. Smith needs to gain more knowledge of technology or computing the moment he gets into the portal. In that case, he may experience an overload and hence give up or have the least morale to continue with the technology. This could be aggravated if he rarely uses computers or smartphones.

Another barrier is that, because of previous injuries or an illness, he might have impaired cognitive function, which would prevent him from remembering the details that are essential in using the portal. Besides, anxiety or even PTSD symptoms can interfere with Mr. Smith's ability to learn new technology, especially if he tends to get stressed easily. Finally, the inability to obtain the necessary aids, such as a stable connection and a suitable device or material, can pose a significant challenge. To overcome these challenges, one has

to offer individual assistance, teach Mr. Smith, and include a caregiver to ensure he uses the Patient Portal efficiently.

Telehealth

Mr. Smith is scheduled for a telehealth appointment with the psychiatrist upon discharge.

"Discuss the information and resources the nurse should ensure the patient has available in preparation for his visit. Your response should be a minimum of 150 words."

Before the telehealth appointment with a psychiatrist, the nurse needs to equip Mr. Smith with everything he needs to know. First, the user should have a stable Internet connection and an appropriate gadget for interacting through video calls, whether a smartphone, a tablet, or a laptop. He should ascertain whether he understands how the device works and then assist him in getting used to telehealth communication.

The nurse should also ensure quiet and private space at home before the appointment to observe confidentiality and prevent interruptions (Pratiwi et al., 2022). Furthermore, the nurse should explain to Mr. Smith how to log in to the session using a code or a link to the appointment. Additionally, the nurse needs to check if Mr. Smith knows how to get the most out of the appointment and write down questions or concerns for the psychiatrist.

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