GEDA Executive Summary Care Processes Template – Level 3

Care Process

Select the care process this corresponds to from this dropdown menu:
A.2 Reduce NPO status

Your care process name:
Geriatric PO Intake Guideline

Date care process approved by your EM Department/Division:
2/1/2023

Description

Rationale: Provide any background or rationale for this process.
Older adults can often spend prolonged periods of time in the ED. They also may have a diminished thirst reflex and limited mobility that could prevent them from obtaining food or water while in the ED. Therefore, we are creating a pro-active approach to both reducing NPO status and ensuring older patients have access to food and drink when desired. We use both systems constraints (in the EMR) and staff training of RN/NAs to offer food and drink. We will also engage volunteers when available to help 'round' on patients in the ED and offer snacks and drink if they are able to drink.

Describe the population that the care process will apply to and any exemptions. For example, it may apply to all patients age 65 and over or a subset based on age, ESI, or another positive screening tool. Patients who are severely ill or intubated may be exempted:
All patients over 64.

Hours of the day when the care process will be implemented or available if applicable:
24/7

Describe where in the ED workflow this care process fits in. For example, it may occur in triage, once the patient is roomed, at discharge, after discharge, after admission, during another transition of care, or other time:
This will take place after the patient is roomed and the bedside RN has performed their evaluation.

Brief description of the care process:
Nursing support staff (CSTs and NAs) will pro-actively obtain approval from the assessing physician or advanced practice clinician (APC) following the initial patient exam as to whether or not patients over the age of 65 can eat or drink. Nursing support staff will then provide these approved patients with PO fluids and crackers. Patients with NPO designation will be provided with oral care swabs to promote comfort and decrease the risk of infection. Any geriatric patient can be offered a diet tray following the completion of testing while awaiting disposition with treating provider approval. Procedure:

After physician or APC has seen the patient, CST or NA will query physician as to whether the patient can have PO liquids or foods.

If the patient is not NPO per the MD/APP, then the CST or NA will provide the patient with PO fluids and crackers.

For patients who may be there for an extended period of time, if cleared by the MD/APP, then a meal tray can be ordered.

In addition, if an NPO order is placed, there is a trigger in the EMR, Epic, to require the ordering physician or APC to indicate a reason for the NPO status.

Finally, on shifts during which a volunteer is present, the volunteer will check the NPO status of patients and bring a drink or snack to any patients who are not NPO and who would like it.

Who will be responsible for performing the actions in the care process:
RN/NA for pro-actively offering food/water, and the physician/APC for only entering an NPO order with a clear indication. Volunteers, when available, will also play a role as above.

Describe how this care process is geriatric-specific:
This is one of the required baseline care processes, and is in place for all patients 65 and over.

Describe any further follow-up or interventions involved:
This care processes will be re-assessed for effectiveness and practical implementation at the quarterly EM QI meeting.

Education and Monitoring

Where relevant, describe how you will educate the relevant staff, physicians, or other stakeholders about the care process:
RN/NA staff will receive in-service education and reminders at morning/evening shift huddles during the first month of implementation and periodically thereafter.

Describe how you will monitor adherence to the care process.
We will monitor the number of NPO orders and also the number of meal tray orders.

Please describe how you will help improve the rates of completion or impact of the protocol if rates are currently low or become low in the future.
We will provide periodic reminders at the daily shift huddles, and will also place signs in the medication room as a reminder to provide patients with food and water where possible.

If relevant, please upload any further evidence or documentation of adherence to the care process.
Attach image of signs present in work/med room.

Please attach your official ED care process policy if present, or other relevant documentation such as order sets, flow charts, etc. Please do not include hospital-wide policies. This policy should be ED-specific.
N/a