



PROVIDERS TREAT, CARETHROUGH CONNECTS,
PATIENTS (AND NURSES!) THRIVE



A CareThrough Executive Brief

COPING WITH NURSE BURNOUT IN THE TIME OF COVID-19

CARE TEAM EXCELLENCE & INNOVATION SERIES

Nurse burnout is no new challenge for nurse leaders. In recent years nurse leaders have been faced with increases in attrition, nursing shortages, and difficulty managing the operational needs of an ever changing practice environment. So how do we face these familiar challenges while dealing with the added stress of a global pandemic? One way is by providing resource support that sufficiently allows nurses to work top of license. But how do you achieve this without increasing the number of budgeted nurse FTE? Also, how do we continue to support the needs of our communities that have been hit so hard by a global pandemic.

Challenges

Healthcare organizations and nursing leaders routinely seek to develop strategies that protect their hospitals from the threat of resource loss which may negatively impact their efforts to improve nurse and patient safety (2020)¹. A major stressor reported by nurses is worry around incomplete patient documentation. The Centers for Medicare and Medicaid (CMS) recommends streamlining documentation during time of emergency¹. But what does that mean for organizations? How much cost is associated with streamlining documentation? What will this do to quality?

In our discussions with staff nurses, the majority state that they feel like they cannot accurately document on COVID patients” because of a lack of time, which creates a considerable amount of stress. Streamlining documentation to include only what is absolutely necessary is understandable during a COVID surge – but what documentation goes missing in these circumstances? New York state allowed nurses to follow specific streamlined documentation rules when COVID cases were at their highest, stating nurses should document “anything that, in the judgment of the RN is a pertinent clinical finding or would compromise patient safety if it was not documented.”² In addition, nurses are excused from documenting care plans or any education in the patient’s chart, however, these are staples of nursing care and critical in achieving proper transitions of care².

CareThrough conducted a nurse leadership survey in mid-2020 where they provided feedback regarding their greatest challenges during COVID-19 response efforts. Nurse leaders who have responded to our survey overwhelmingly stated that their biggest concern is the wellbeing of their staff nurses.

Addressing Nurse Burnout

One way to care for nurses at the bedside is to limit the time they are exposed to COVID-19 patients. Utilizing a care team that reduces the clerical burden on nursing staff allows nurses to spend less time moving in and out of patient rooms and more time completing their top of license tasks in one sitting. On average, caring for COVID-19 patients has increased the cost of personal protective equipment (PPE) by 1064%³. By limiting the number of times nurses have to don and doff PPE we also limit exposure time and cost for organizations.

PPE Costs* ³	Pre-COVID-19 Requirements	Pre-COVID-19 Pricing w/ Current CDC Guidelines	Current-COVID-19 Pricing w/ Current CDC Guidelines	Current-COVID-19 Pricing w/ Current CDC Guidelines, Nitril Gloves, N95 Masks
Total Costs Per Day	\$35.00	\$236.00	\$2,510.25	\$2,558.25
PPE	\$0.35	\$2.36	\$25.10	\$25.58
Percentage Markup		674%	1064%	1084%

* Pre-COVID-19 pricing is based on multiple facilities averaged over 12-month period.

Another way to mitigate nurse burnout is to establish adequate support teams enabling nurses to work top of license while maintaining an accurate and complete patient record. Part of the nursing care model is to act as a liaison between the patient and physician or advanced practice practitioner (APP) to ensure proper care is delivered. For example, utilizing a scribe for a nurse during a pandemic allows the bedside nurse to spend time at the patient’s bedside without worrying about whether or not their documentation is accurate and complete. On average, nurses spend 1/3 of their shift documenting in the EHR.

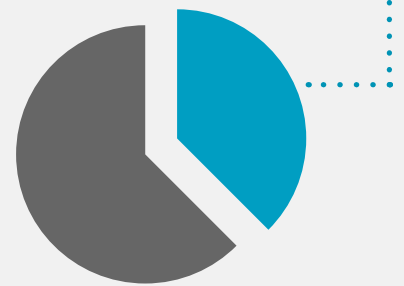
Based on a recent survey, nurse leaders have considered using telephonic discharge assistants, helping hands staff, care bundling, and virtual visits or telecharting. CareThrough’s suite of innovative solutions offers organizations opportunities to achieve these goals while also increasing long-term ROI. Nurse Care Team Assistants, Population Health Navigators, and Speke documentation technology are just a few ways CareThrough can help.

Care Team Assistants

Nurse Care Team Assistants (N-CTAs) work in the inpatient setting to provide documentation and clinical support to nurses, allowing the nurse to work at the top of their clinical license. N-CTAs work 1:1 or 2:1 with nurses to achieve better patient care and enhance nurse staffing. N-CTAs perform real time documentation for nurses just like scribes do for our physician partners, while also providing clinical support.

From our sister-company, SoundLines, **Speke** is the first true ambient documentation assistant. This groundbreaking technology improves efficiency and supports physicians and nurses to ensure they can focus on patients and provide top-of-license care. As a hybrid approach, Speke can assist with documentation while other in-person ancillary staff supports the care team with other tasks.

1/3 of a Nurse’s Shift is Spent Documenting in the EHR



“I don’t come to work with anxiety and worry anymore because I know I always have my partner (CTA) with me. We work together all day to care for our patients.”

– Nurse, Multi-Location Hospital

Supporting the Entire Care Team: Population Health and ED Care Navigators

In addition to unit based nursing assistants, CareThrough can help support the entire care team ensuring that the most vulnerable populations we serve are receiving the best care possible. **Population Health Assistants (PHA)** work remotely or onsite to improve the overall health of a target patient population (e.g. Medicare patients). Prior to visits, the PHA reviews patient charts for any gaps in care and works with patients and providers to address them. After visits, they work on ensuring plans of care are acted upon through telephonic outreach.

ED Care Navigators work onsite to meet with patients in the ED at the point of discharge. They schedule follow up appointments and provide resources to the patient. Those resources may include: low- or no-cost primary care, community programs that supply food or transportation, materials on securing insurance, and more.

Chronic Care Management

CCM Care Navigators work remotely or onsite to make outreach calls to Medicare beneficiaries who have two or more chronic conditions (e.g. hypertension + diabetes). They speak directly to patients about their health goals and plans for managing their chronic conditions as well as any social, financial or logistical barriers to optimal care.

Proven Results with CareThrough⁴

Our partners have reported a consistent reduction in paid nurse hours and nurse overtime and turnover when implementing our services. Nurses report being more satisfied with their work environment and nurse leaders can uniquely manage their nursing resource pool without incurring additional cost.



**Decreased
Attrition**

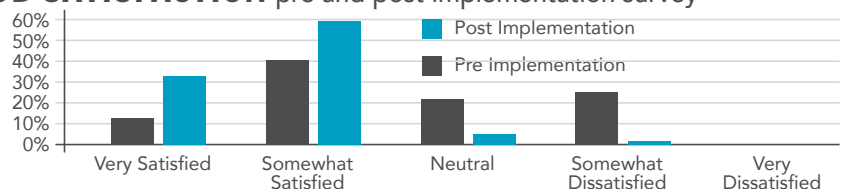
overall by over **40%**



**Reduced
Incidental Overtime**

by as much as **5 hours** per nurse, per week

JOB SATISFACTION pre and post implementation survey



Discover More at CareThrough's Learning Center

As part of our Care Team Excellence & Innovation series, we will continue to explore the challenges identified in this brief and offer additional insights on ways that nursing care teams can be optimized in a post-COVID environment. You can sign up for our newsletter, and find additional resources by visiting the Learning Center on CareThrough.com.



About Us

CareThrough is part of the **HealthChannels** family of healthcare solutions, including ScribeAmerica, the nation's most frequently used medical scribe company. This group of three distinct, highly specialized companies is dedicated to helping providers improve clinical outcomes through highly-skilled clerical support. Collectively, these health channels meet the full range of increasingly complex healthcare data and documentation needs—each one devoted to a different critical need. The leader in patient navigation and population health management, HealthChannels recruits, trains, and manages more than 25,000 employees in over 3,500 locations across 50 states.

We welcome the opportunity to discuss this executive brief and challenges you may face at your facility. Our nurse executive and CareThrough Client Solutions team work with over 3,500 partners to customize strategies that meet their unique needs.

Our team can be reached at info@carethrough.com, or you can learn more at carethrough.com.

CareThrough 

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