

# 13. NURSE-MANAGED WARD SOLUTION

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## BACKGROUND:

The Nurse-managed Ward (NMW) in the Galliera Hospital in Genoa, Italy was created when the hospital offer was transformed into a care model based on levels of intensity. This aimed to raise the level of assistance and organisation.

## OBJECTIVES:

- Take charge of patients who, after diagnostic-therapeutic care, need nursing assistance, post-hospitalisation follow-up and home support, e.g. phone calls and planning of nursing clinic visits
- Provide personalised care, and improve suitability and quality of assistance
- Reduce inappropriate hospitalisation and re-hospitalisation, and improve integration between the hospital and local community
- Optimise rotation index and reduce managerial costs

## METHODS:

The NMW is a supplementary care unit, established in June 2017 and equipped with 12 extra beds. It provides hospitalisation at low and medium levels of care. Nurses take over responsibility for assisting patients, although the patients' original institution remains in charge of their clinical supervision, until they are discharged from the hospital. This assistance model is useful for patients who have completed their diagnosis or therapy. However, these patients still require nursing assistance, before returning home or to their residential care homes.

The regional council took the decision to launch the NMW initiative at Galliera Hospital, and later to establish a second area managed by nurses at the Azienda Brignole Sale in December 2017. This area has 12 beds and aims to ensure the continuity of assistance between the hospital and the local community. The maximum hospitalisation period is 15 days at Galliera NMW, whereas it is 30 days at Brignole Sale NMW.



Nurses take over responsibility for assisting patients at the NMW. © Cardinal Health

## RESULTS:

### What has been achieved?

- ✓ More patients treated – 499 in 11 months
- ✓ Longer average duration of hospital stay – 7.84 days (from June 2017 to April 2018)
- ✓ Improved bed rotation index – 41.58 patients/bed (from June 2017 to April 2018)
- ✓ Shorter patient waiting list
- ✓ 'Open' management approach adopted, offering flexible visiting hours (from 7.00 to 21.00), which facilitates relationships between the patients and relatives
- ✓ Fewer transfers from the NMW to acute units – 5 transfers in 2017 (1%), and 0 in 2018

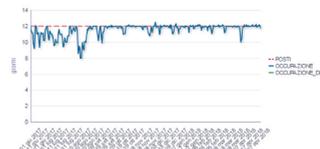
Structure	Number	%
Emergency Ward	140	28,06%
General Surgery	62	12,42%
Internal Medicine	53	10,62%
Neurosurgery	52	10,42%
Orthopaedic	35	7,01%
Urology	33	6,61%
Other wards	124	24,85%
<b>Total</b>	<b>499</b>	<b>100,00%</b>

Table showing the main users of the NMW.  
 Source: E.O. Ospedali Galliera

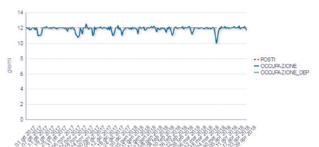
## TAKE-AWAYS:

### What worked well?

- ✓ Assessing inclusion criteria based on three internationally validated indices:
  - MEWS (Modified Early Warning Score)
  - ICI (Index of Care Intensity)
  - IDA (Index of Dependence on Assistance)
- ✓ Reducing the number of transfers to acute units (1%)
- ✓ Involving all the staff in the hospital to overcome their scepticism
  - After their initial reaction, they changed their opinions and contributed to making the project a success
- ✓ Improving staff welfare in the NMW, by better understanding the nurse's role throughout the hospital
  - This strongly impacted the motivation of the NMW staff and gave them a greater sense of responsibility
- ✓ Using the Surgiq IT platform (used since 2008 for patients in various clinical plans)
  - This was updated with specific functionalities to enable the tracking and management of all phases in the process



Graph showing higher occupancy rate achieved from June 2017 to April 2018 (96.06%).  
 Source: E.O. Ospedali Galliera



Graph showing higher bed occupancy rate achieved from October 2017 to April 2018 (98.80%).  
 Source: E.O. Ospedali Galliera

