## **Nursing Education Instructional Guide**

Managing Length of Stay: A Video Guide for Hospital Case Managers

## **Target Audience**

- · Directors of case management
- · Case managers
- VPs of patient services
- · VPs of quality
- · Nurse managers
- Chief operating officers

#### **Statement of Need**

This 20-minute training video will provide case managers with helpful, practical, how-to strategies for moving each patient through the care continuum as quickly and safely as possible. This video also comes with additional tools and forms such as eight best practice strategies for reducing length of stay, a form for sharing patient information, a long-stay summary report, and long-stay summary report codes. (This activity is intended for individual use only.)

## **Educational Objectives**

Upon completion of this activity, participants should be able to:

- · Demonstrate the correct manner to discuss discharge with patients
- · Identify at least five pieces of patient information that need to be shared across departments
- Justify patient discharge when patients no longer meet medical necessity
- · Discuss appropriate and timely care plans with patients and physicians
- Evaluate the necessity of medical tests to determine whether they can be performed on an outpatient basis

Managing Length of Stay: A Video Guide for Hospital Case Managers

### **Faculty**

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## **Nursing Contact Hours**

HCPro, Inc., is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center Commission on Accreditation.

This educational activity for 1.0 nursing contact hour is provided by HCPro, Inc.

### **Commission for Case Management Certification (CCMC)**

This program is approved by the CCMC for 1.0 Continuing Education Unit.

## **Faculty Disclosure Statement**

HCPro, Inc., has confirmed that none of the faculty or contributors have any relevant financial relationships to disclose related to the content of this educational activity.

#### Instructions

To be eligible to receive your nursing contact hour for this activity, you are required to do the following:

- 1. Watch the video Managing Length of Stay: A Video Guide for Hospital Case Managers
- 2. Complete the exam and receive a passing score of 80%
- 3. Complete the evaluation
- 4. Provide your contact information located on the exam and evaluation
- 5. If you are submitting a group of exams for your staff, please include a typed list of the names of all participants, as well as contact information for the primary contact at your facility.
- 6. Submit exam and evaluation to HCPro, Inc.

Please provide all of the information requested above and mail or fax your completed exam answer key page that includes the program evaluation and contact information to:

HCPro, Inc.

Attention: Continuing Education Manager

P.O. Box 1168

Marblehead, MA 01945

Fax: 781/639-2982

If you have any questions, please contact customer service at 877/727-1728.

## **Continuing Education Exam**

Name:			
Title:			
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#### 1. Length of stay (LOS) refers to:

- a. How long a physician visits a patient
- b. The number of hours allotted for visitors
- c. The time between making a referral and transferring a patient
- d. The amount of time patients spend in the hospital

#### 2. Which of the following is NOT a function of a hospital?

- a. To stabilize medical conditions
- b. To diagnose medical conditions
- c. To provide long-term care
- d. To develop a plan for continuing care

#### 3. When is an appropriate time to speak to patients about their discharge?

- a. One day prior to discharge
- b. As early in the stay as possible
- c. When they show signs of improvement
- d. When the physician orders it

# 4. Which of the following is NOT one of the topics mentioned in the video that case managers should discuss with patients?

- a. Their meal preferences
- b. Hospitals are for acutely ill patients
- c. Their projected care plan
- d. The next level of care for them to seek treatment, if necessary

#### 5. If possible, who else should be present when speaking to patients about discharge?

- a. A unit nurse
- b. A social worker
- c. A patient's family member
- d. A case management technician

#### 6. What is the first step in planning or preparing for discharge?

- a. Setting goals with patients
- b. Reviewing patients' charts
- c. Researching patients' backgrounds
- d. Meeting the patients

#### 7. When discussing discharge, it is important to offer patients:

- A choice in their discharge
- b. A phone call
- c. A beverage
- d. A chance to speak to a nurse

#### 8. Case managers should speak to patients when:

- a. It is convenient for the case manager
- b. The patient doesn't have visitors
- c. The patient is able to concentrate
- d. The patient is getting better

#### 9. Which of the following is NOT a purpose of care coordination rounds?

- Introduce new staff members
- b. Assess how patient and family needs can be met
- c. Coordinate patients' care
- d. Discuss discharge target date

#### 10. How often should care coordination or multidisciplinary rounds be held?

- a. One to four times per week
- b. Two to six times per week
- c. Three to seven times per week
- d. Four to eight times per week

## 11. Which of the following is NOT one of the people who should be present at care coordination rounds to be sure they are successful?

- a. Social worker
- b. Case manager
- c. Unit or charge nurse
- d. Hospital administrator

## 12. Which of the following is mentioned in the video as a topic that should be discussed at care coordination rounds?

- a. The nurses assigned to the patient
- b. The patient's background and family situation
- c. The patient's name, age, physician, and LOS to date
- d. What care the patient has already received

#### 13. Which of the following is NOT one of the responsibilities of the care coordination round leader?

- a. Do most of the speaking
- b. Prepare briefly
- c. Point out what should be documented
- d. Identify next steps

#### 14. Where should care coordination rounds take place?

- a. Anywhere a group can assemble
- b. At the nurses' station
- c. Behind closed doors to ensure patient privacy
- d. A hallway

#### 15. Gathering information about patients to be presented at rounds:

- a. Is not necessary; information will be discussed during the rounds
- b. Should be done beforehand
- c. Is the responsibility of the unit nurse
- d. Can be done from the patient's chart

#### 16. It is important for case managers to round with physicians:

- a. To ensure that the physician is making rounds
- b. To check patients' status
- c. To answer any patient questions
- d. To hear what the physician is telling the patient and what the patient is asking the physician

#### 17. Which of the following is NOT a benefit of a case manager rounding with the physician?

- a. Monitoring patients' progress
- b. Explaining the physician's reasoning to the patient
- c. Making sure the physician takes time to answer the patient's questions
- d. Ensuring that the physician provides information on the discharge plan

#### 18. Allowing a patient to stay in the hospital longer than is medically necessary:

- a. Happens sometimes
- b. Can be best for the patient
- c. Is not best for the facility or the patient
- d. Should be done on occasion

#### 19. It is appropriate to order a test to be done as an outpatient when the patient doesn't meet medical necessity and:

- a. The patient can drive him- or herself to the test
- b. Family members agree the test can be done as an outpatient
- c. The patient is feeling better
- d. The test is not related to the admission diagnosis

#### 20. Offering alternatives to physicians:

- a. Is inappropriate
- b. Should be done only in extreme cases
- c. Can shave days off LOS
- d. Should be done by a nurse or physician advisor

## **Continuing Education Exam Answer Key**

(Please record all exam and evaluation answers here.)

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9. How much time did it take for you to complete this activity? \_\_\_\_\_

Return completed form to:

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10. Do you have any additional comments on this activity?