Thank you for spending time with us during pizza sessions and providing feedback on the suggestion boards. It REALLY helped us learn about your units, the workflow, and to discuss some of the challenges and opportunities for improvement.

We also recognize how hard everyone is working despite the challenges you’re being faced with every day. Thank you for everything you do. We have seen some amazing teamwork and also observed some “best practices”. Keep it up! 😊

More to Come...

Our work doesn’t stop here... 😊 We’ve heard you and are still working with other department leaders/teams and executive leadership to address your concerns while also maintaining the focus of what SIOM was created for.
A Brief Look at Some of The Work SIOM Initiated (or Partnered With) From Round One …

- Documentation
  - One-time Documentation
  - Ongoing Documentation
  - I/O’s, Medications from VPIMS to flow into HED
- Bedside Monitoring
- PACU Board
- Standardized Handover from ED/PACU to Floor
- Discharge Checklist
- Bed Management and OR Integration
- Altered the Surgery Scheduling Form
- Discharge Wizard/Patient Education
- Orders for Direct Admits from Vanderbilt Clinics
- Evaluated Need for a Present Provider

- Pharmacy
- Timing of Post-op Antibiotics
- Genie
- Bedside Delivery of Discharge Medication
- Briefings
- Post Discharge Follow-Up Phone Call
- EstDC
- Beginning Floor Care in PACU
- Communication of Work Being Done Within SIOM Back to Staff
- Anticipatory Order Set
- High Risk Readmit Coordinator
- Transport Opportunities for Improvement

A Brief Look at What’s to Come in “Round 2” …

In addition to continuing the work listed above, SIOM has also begun work on other projects:

- Medical Insurance Source of Truth
- Surgery Engagement
- Transition Plan Documentation
- Scheduled Discharges
- SIOM Dashboard

A Few Updates on Some of the Projects SIOM is Working On (or Has Partnered With):

- Standardized Handover From ED/PACU
  The long term goal is to have an automated SBAR printed out, with the information from VPIMS (this applies for patients coming from the PACU only), to the unit the patient will be going to as soon as the bed is assigned. *Telephone report will still take place but there should less writing needed since the information will be already printed out on the SBAR.* Until this happens, continue to use the SBAR format when giving and receiving report from ED/PACU to the Inpatient Units.

- Discharge Letters / Patient Education
  We’re hoping to expand the use of the Discharge Letters (through Wiz – Discharge Wizard) to same day surgical patients instead of just inpatients. SIOM is currently speaking with specific services about feasibility and training needed.

- Documentation
  Vanderbilt’s HITS and VPIMS Teams are working on getting the information from VPIMS to flow into HED (I/O’s and Medication). The Rapid Cycle Team is also working on reducing the number of fields required to be filled out on the Nursing Admission History and daily documentation requirements.

- Staff Engagement
  We’ve noticed many new faces when we’ve walked around the units and as we’ve talked with some of you, we also realized there’s just too many projects to keep track of as well so we were able to get on the Vanderbilt Nursing’s “In the Know and Nursing Communications” Website so you can look at our current and past issues of the “SIOM Newsletters”. When you go to the site it will ask you to log in with your VUNet ID. This is the actual address for the SIOM Newsletters: