

**Implementing the Acuity Adaptable Care Model in a Pediatric Pulmonary Unit**  
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**I. Problem**

Children's Memorial Hospital (CMH) is a 250 bed, free standing, pediatric academic medical center located in Chicago, IL. In preparation for the design and construction of a new hospital, alternative care delivery models will be tested to evaluate the opportunity to improve patient safety, patient satisfaction and enhance bed flexibility.

**II. Evidence**

The use of semi-private rooms in the current facility have resulted in patient/family dissatisfaction, increased patient transfers/hand-offs and therefore increased opportunity for error.

**III. Strategy**

The acuity adaptable pilot on 9 West at Children's Memorial Hospital was conducted from June 1, 2006 until September 1, 2006. The original evaluation plan was based on the outcomes that were demonstrated by the Methodist Hospital, Clarian Health Partners acuity adaptable unit (Hendrich, Fay & Sorrells 2004) and the desire to test an alternative care model prior to the design and construction of the new Children's Memorial Hospital.

**IV. Practice Change**

The project proposal is for the pilot of a 17 bed, private room, acuity adaptable or universal room pediatric pulmonary unit utilizing an existing 34 bed, semi-private room, medical surgical unit.

## **V. Evaluation**

The objective of the pilot was to provide an alternative care delivery model that will:

- improve patient satisfaction
- improve employee satisfaction
- decrease the number of patient hand offs
- decrease averted medication errors

## **VI. Results**

- Significant improvement in patient satisfaction with nursing
- Improvement in employee satisfaction with the work environment
- The number of intra-unit transfers was decreased by 93%.
- Wrong patient averted errors were reduced by 48%.
- Wrong dose averted errors were reduced by 33%.

## **VII. Recommendations**

In light of the fiscal challenges that most hospitals face today, it is not economically feasible to construct all patient rooms in a facility to meet the criteria for universal or acuity adaptable rooms. The requirement for the increased size, private room environment, space that supports a healing environment including room for the family and technology to support a variety of acuity levels is cost prohibitive. However, the outcomes that have been demonstrated by this pilot validate the need to consider implementation of the concept in those areas where larger numbers of patients with predictable courses of treatment can be cohorted. This model has been incorporated into the design of the new 36 bed Pediatric Comprehensive Cardiac Unit, opening in 2012.

## **VIII. Bibliography**

Hendrich, A., Fay, J. & Sorrells, A. (2004). Effects of acuity adaptable rooms on flow of patients and delivery of care. *American Journal of Critical Care*, (13)1, 35 – 45.