

# REMOTE PATIENT MONITORING A NEW MODEL OF CARE: LEVERAGING DNP STUDENT PROJECTS FOR PROGRAM DEVELOPMENT

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# OBJECTIVES

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- By the end of the presentation the participant will be able to:
  - identify how students can be leveraged in non-research focused facilities for quality improvement projects
  - identify the patient, parent/caregiver, and provider outcomes related to the use of RPM in a pediatric palliative care program
  - Identify how DNP students' projects can be used to develop a new program or service line in a clinical setting

# BACKGROUND/PROBLEM

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- Virtual visits were not being done in the clinic
- It was difficult to get daily or weekly data from families
- Physician drove to homes throughout the state
- Physician wanted to better time the child's time of death to assure that staff was with the family
- Coming to the clinic required great effort by families due to child's complexity

# BACKGROUND/PROBLEM

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- RPM has been successfully used in adult palliative and hospice care
- Research and funding has focused on adult populations
- At the start of the project no data had been published on pediatric palliative RPM use.
- Medicare covered RPM, state Medicaid coverage varied.



# SETTING AND TEAM



- One small collaborative study “the little engine that could”
- Children’s Hospital of the King’s Daughters (CHKD)
  - Free Standing Pediatric Hospital
  - Limited research focus/agenda
  - Small telehealth program
- (CHKD) Pain and Palliative Care Program – Interested in “trying” RPM •
- Old Dominion University-Center for Innovation, Education, and Research (C-TIER)
- Doctorate of Nursing Practice students
- Clinical Nurse Specialist student
- Attending, Office RN, Resident



# QI RESEARCH PROJECT

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- 1-year project prospective project
- 40 participants (20 study/20 control)
- Evaluated caregiver burden, collaborative relationship with provider, and acceptance of telehealth/technology
- Evaluated provider acceptance of the acceptability of teleconferencing services as a form of pediatric pain and palliative care for families using RPM.
- Evaluated pediatric patient's hospitalization rates and length, ER visits and length of stay, clinic encounters, cancellation of clinic and virtual visits, provider home visits, and points of contact with the team as a result of RPM
- Evaluated cost benefit

# OUTCOMES

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- 1-pediatric resident
  - Completed telehealth certification course
  - Leading another departments RPM project
- 2 DNP students
  - Completed telehealth certification course
  - Graduated
  - Presented and published data in electronic Pediatric Palliative Care Journal
- Project status – Completed – Completing analysis
- Publications – 4 papers published in the Pediatric Palliative and Hospice Care Pediatric E-Journal
- Product “development” – Collaborating with the RPM company for improved pediatric peripheral and recording

