The Knisley Code pilot

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**Recommended Citation**
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Background

• Get With the Guidelines statements are published by American Heart Association

• Statements are supported by rigorous review and approval process

• AHA/ASA position on the basis of that evaluation (Guidelines and Statements - Professional Heart Daily | American Heart Association).
A Reflection of our Roots

- 3 designated ICU multidisciplinary code teams
- No standardized training for how or what should be documented on the white Code Sheets
- Sheets are designed for code documentation and were being completed by both ACLS and non-ACLS personal who were caring for patients on the MedSurg Units at the time of arrest
A Problem Identified

- Initiative was started to train ICU nurses with Code Narrator consisting of:
- Formal education how to document within the electronic record
- Identify salient pieces of the resuscitation that needed to be documented in the chart to align with the GWTG

Local Problem

ASLMC ICUs ONLY: Monthly Codes and Narrator Use for Jan 2021 - Oct 2021
Based on Verified Codes Recorded in Code Log

<table>
<thead>
<tr>
<th>Month</th>
<th>Codes</th>
<th>Codes with Narrator</th>
<th>Percent Codes with Narrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021.01</td>
<td>13</td>
<td>12</td>
<td>92%</td>
</tr>
<tr>
<td>2021.02</td>
<td>13</td>
<td>8</td>
<td>62%</td>
</tr>
<tr>
<td>2021.03</td>
<td>12</td>
<td>5</td>
<td>42%</td>
</tr>
<tr>
<td>2021.04</td>
<td>12</td>
<td>9</td>
<td>75%</td>
</tr>
<tr>
<td>2021.05</td>
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<td>16</td>
<td>92%</td>
</tr>
<tr>
<td>2021.06</td>
<td>13</td>
<td>12</td>
<td>100%</td>
</tr>
<tr>
<td>2021.07</td>
<td>9</td>
<td>9</td>
<td>100%</td>
</tr>
<tr>
<td>2021.08</td>
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<td>10</td>
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</tr>
<tr>
<td>2021.09</td>
<td>17</td>
<td>13</td>
<td>59%</td>
</tr>
<tr>
<td>2021.10</td>
<td>13</td>
<td>10</td>
<td>77%</td>
</tr>
</tbody>
</table>

Advocate Aurora Health
**Problem and Knowledge Focused Trigger**
A lack of consistent documentation for code events which limited us from accurately evaluating our data/practice alignment with GWTG

**Priority**
Our organization as we highly value patient safety and excellence in practice.

**Form a Team**
We have a site Multidisciplinary Code 4 Committee that supported our work and the gathering a smaller team, the Kinsley Code responders

**Relevant Literature and Research**
Already been identified, we needed to demonstrate our practice reflected what is in the literature.
Timeline

- **Spring 2021**: Discussion of role designation for Code response idea brought forward.

- **Fall 2021**: Pilot proposed for Knisely with go-live date of 12/1/21.
  - SICU/NICU ANSGC involvement & feedback specifically around role designation
  - Survey sent out on current code process.

- **November 2022**:
  - Education sessions planned
    - Education session on MS teams/in person to review GWTG and code pilot.
  - Huddles with Charge nurses & key stakeholders (second responders to codes)
Timeline continued

• **November:**
  • Standardized paper format on all code carts
  • Code Champions to help build momentum and follow through

• **12/1/21- March 1st – Pilot initiated.**
  • Monthly meetings
  • Check in with champions.
  • Leveraging staff knowledge.
## Education

**SICU**
- Code Narrator
  - 11/16 1800-1845
  - 11/18 15-16

**NeICU**
- Zoll- 11/22
- Meds/Code Cart-
  - 11/11 15-16;
  - 11/12 0745-0845:

**Mock Code**
- Week of Thanksgiving
  - 11/22, 11/23, 11/24
  - 6\textsuperscript{th} floor Learning Lab (SPH room)
Role Designation

SICU RN Role Responsibility

- Equipment: Lucas & IO

- 1 SICU RN will be responsible for placing the Lucas on the patient.

- 1 SICU RN is responsible for time keeping and ultimately responsible for ensuring documentation is entered into the code narrator.
Role Designation

NeICU RN Role Responsibility

- Equipment: Back-up IO, orange lanyards to all code responders
- 1 NeICU RN will manage the Zoll.
- 1 NeICU RN will be on a side of the patient to be able to assist with administering medication.
Results

ASLMC ICUs ONLY: Monthly Codes and Narrator Use for Nov 2021 - Jun 2022
Based on Verified Codes Recorded in Code Log

- Code Totals
  - 2021.11: 22
  - 2021.12: 21
  - 2022.01: 20
  - 2022.02: 17
  - 2022.03: 15
  - 2022.04: 12
  - 2022.05: 12
  - 2022.06: 10

- Codes with Narrator
  - 2021.11: 17
  - 2021.12: 20
  - 2022.01: 12
  - 2022.02: 11
  - 2022.03: 10
  - 2022.04: 8
  - 2022.05: 7
  - 2022.06: 10

- Percent Codes with Narrator
  - 2021.11: 71%
  - 2021.12: 80%
  - 2022.01: 80%
  - 2022.02: 81%
  - 2022.03: 83%
  - 2022.04: 91%
  - 2022.05: 100%
  - 2022.06: 95%
Implications for our Future Practice

• Pilot work provided baseline resuscitation data and increased documentation with improved code narrator use.

• Future work and expansion of this project will include the assignment of the code narrator role to all ICU nurses on the code response team and increased monitoring of Get with the Guidelines®.

• Resuscitation outcomes for specific metrics as defined by GWTG as well as for other improvement opportunities that can be defined by case review.
Unexpected and Welcome Implications for our future Practice

- Nurse ownership of practice and process.
- Collaboration and team building between our ICU and MedSurg Nurse teams.
- Applicability of the project to our Tower and Cardiac Surgery Teams
References