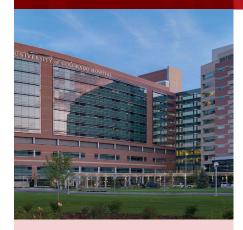
UCHealth Gains Consistency, Quality and Flexibility with CPR eLearning Format





UCHealth's unique combination of academic-based and community-focused medicine brings innovative and leadingedge care to patients throughout the Rocky Mountain region. The system has three facilities with consecutive Magnet designations by the American Nurses Credentialing Center – Poudre Valley Hospital has four, University of Colorado Hospital has four, and Medical Center of the Rockies has two. UCHealth has multiple rankings among the best hospitals in the country by U.S. News & World Report, other rating services and health care organizations that closely examine medical specialties.

PROVIDER STORY

To achieve greater consistency and quality of CPR training for staff members, **UCHealth** worked with the American Heart Association (AHA) to bring training inside the organization. Using HeartCode® blended learning, the system gained training efficiencies and financial benefits in addition to greater quality and consistency.

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Trudy Orona, MS, RN, CCRN, Life Support Supervisor
AHA Training Center Coordinator, UCHealth

CHALLENGE

In 2014, when one of the health system's ambulatory care clinicians saved a patient's life with her best practice CPR skills, it only confirmed what Trudy Orona already knew—that the AHA's HeartCode program is the kind of training UCHealth employees need.

The self-directed, comprehensive blended learning program administered at UCHealth includes cognitive online learning, followed by a hands-on skills session with an instructor and manikin that provides directive feedback.

"During the clinician's CPR skills training session, the instructor kept her a little longer to embed the CPR skills a bit further," said Orona, MS, RN, CCRN, life support supervisor, AHA training center coordinator, UCHealth. Two weeks later, when the clinician witnessed a cardiac arrest, she was confident and ready to use an automated external defibrillator (AED) and perform high-quality CPR. "The patient survived, and our clinician attributed her ability to react the way she did to her training and our instructor's willingness to help her with her skills."

SOLUTION

The culture of UCHealth University of Colorado Hospital - the region's only academic medical center - has always encouraged innovation and research. More than a decade ago, the hospital was sending employees offcampus to other AHA-designated training centers for CPR training.

But that limited UCHealth's control of consistent training for the approximately 9,000 in BLS and 5,000 in ACLS that are trained annually. Administrators felt there was a better way and decided to bring training inside the organization.

When deciding to bring training in-house, administrators also considered the financial picture. "With traditional training's four- to eight-hour courses, it takes three employees to certify one person: the instructor, the person training and the person who has to backfill the vacancy on the patient floor," said Orona. "That means that three employees are out just to certify one."





AHA's HeartCode blended learning courses:

- Standardize content and delivery of high-quality resuscitation training for consistency
- Enable training of large numbers of students across different care settings and varied locations
- Allow students to complete the cognitive portion of the courses online anywhere, anytime at their own pace
- Are designed for sequential learning to develop critical thinking and decisionmaking skills
- Use eSimulation technology that allows students to treat patients in virtual, life-like situations and receive immediate feedback
- Include hands-on CPR skills practice and testing to ensure students are performing high-quality CPR

SOLUTION CONTINUED

That immediately changed when UCHealth brought training in-house and began offering HeartCode courses for employees. Employees now simply cover for each other while they individually complete their skills verification.

"We strategically schedule the classes right before or after work, and it's nice for employees, managers and leadership," says Orona. "Employees appreciate the flexibility, and managers value the idea that they don't lose employees for large amounts of time."

The health system's in-house training program has paid off. CPR skills and quality show marked improvement. Historically, in-hospital cardiac arrest survival rates (per AHA national benchmarks) range from 22 percent to 25 percent**, while UCHealth's survival rates are in the 26 to 28 percent range—statistically higher than the average.

In addition, a medical technology manufacturer* performed a 2017 CPR benchmark and evaluation study at UCHealth's Metro Denver facilities. It showed the facilities to be at 75 percent of compliance, compared to a national average of 60 to 65 percent. "With that, we feel confident that our CPR program is doing what we need it to do," said Orona.

UCHealth also has a course completion rate of approximately 100 percent. If an employee's card expires, their facility entry badge is deactivated. "We do receive last-minute phone calls from employees, but having their badges potentially shut off is a huge incentive to keep their cards current," said Orona.

RESULTS

Justifying the funding and implementing a new program in today's challenging times isn't easy. "I do feel that Heart Code is the latest, greatest, best way to go," said Orona. "But it's necessary to come up with a great plan to present it to leadership." To that end, Orona has the following thoughts and suggestions:

Determine your numbers "Leadership listens to data," said Orona. "Show how it takes three people to certify one with the traditional method, and determine the exact cost to put one employee through CPR training currently. Then show how that would be different with Heart Code."

Demonstrate the benefits of consistent online training "Explain how everyone would receive the same information with Heart Code," said Orona. "Also, when the program is online, content changes are immediate—so our employees always have access to the latest information."

Begin with baby steps "Don't try to transform your whole program overnight," said Orona. "It's still a change for employees, no matter how wonderful the program is. If you approach it with baby steps, you'll get more buy-in. Start with BLS and show the benefit. Track your numbers, outcomes and costs. Those things are huge, and they will make a difference."

^{*}Study conducted by ZOLL, a resuscitation and acute critical care technology manufacturer **AHA Cardiac Arrest Statistics; https://cpr.heart.org