



# “U-ACT” Unit Based Accountable Care Teams Improve Patient Outcomes

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## Introduction

Unit-Based Accountable Care Teams (U-ACT) are a collaborative between Nurses and Physicians that include Infection Control, Patient Logistics, and Environmental Health Services. Despite diversity within individual unit teams, U-ACT groups share the common goal of improving patient outcomes and clinical quality indicators across the organization. Nurse and Physician leadership on each U-ACT group assures system wide integration of best practices for achievement of the highest level of quality and safety for patients. Unit teams meet in their respective services line and collaborate with other U-ACT teams to share best practices.

## Team Meetings and Activities

U-ACT meetings are held weekly to review patient safety and quality issues in real time. Meetings create an open forum for interprofessional collaboration related to patient care and the patient experience. Action plans are created for identified areas and results are reviewed.

### Hand Hygiene

1. Identify barriers
2. Engage interprofessional conversations to promote compliance

### CAUTI

1. Review adherence to urinary retention protocol and standards of care
2. Review presence of indwelling catheters during interprofessional patient rounds

### CLABSI

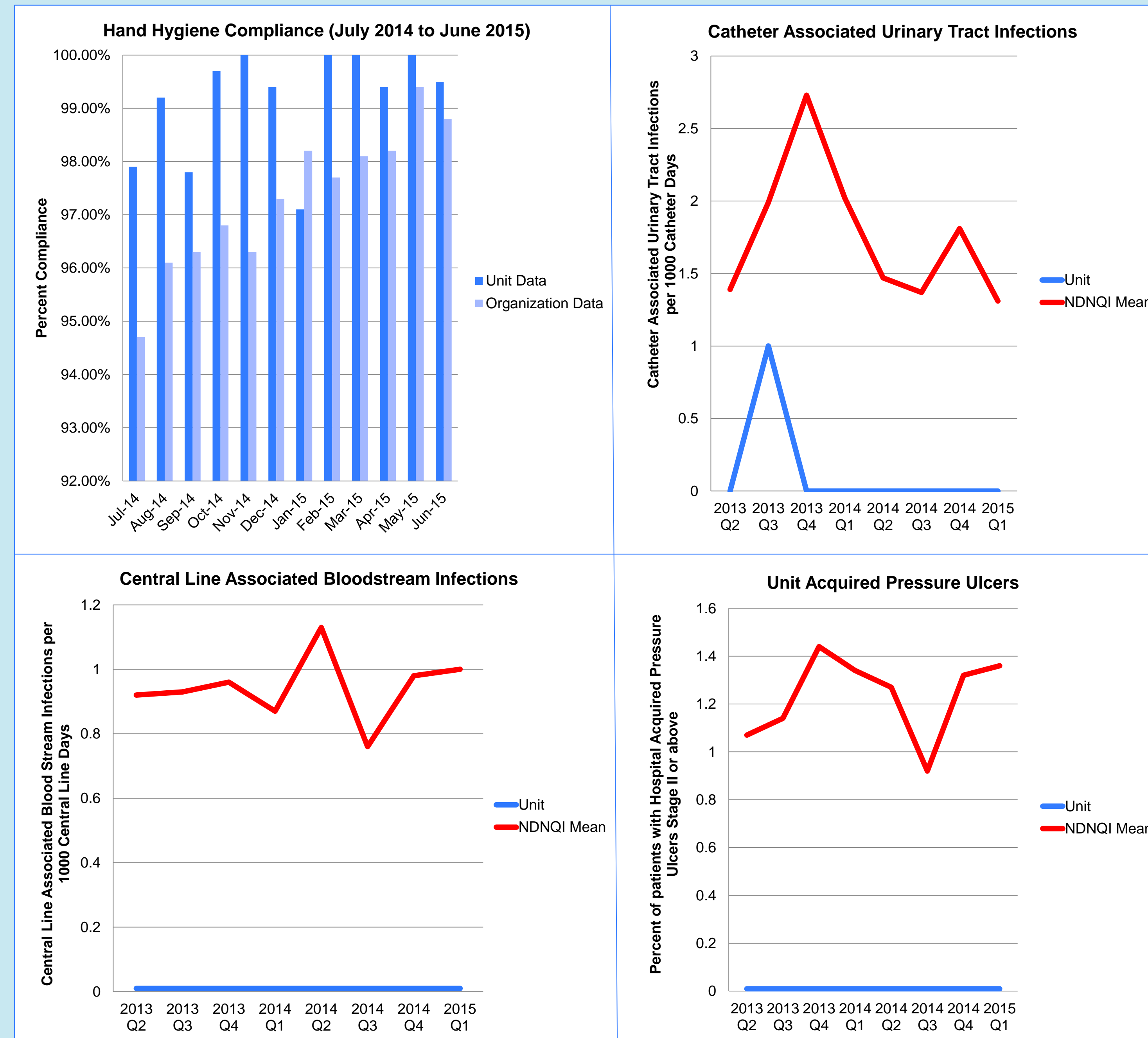
1. Review and discuss patient needs for device
2. Perform root cause analysis on all bloodstream infections
3. Monitor adherence to CLABSI bundle including indications for central lines as well as maintenance of and discontinuation

### Pressure Ulcers

1. Ensure participation by all members of the team assisting in ambulation and positioning
2. Promote RN/MD communication to provide appropriate skin care

## Outcomes

U-ACT work on the unit demonstrated improved and sustained quality outcomes;



## Discussion

U-ACTs create a grass roots coalition, taking quality actions at the bedside and on the unit. Successes as well as failures are shared with other U-ACT groups to enhance the patient experience across the organization. Additionally, the importance of physician and advanced practice clinician involvement cannot be overstated as key stakeholders to ensure sustained success.

## Conclusions

Quality outcomes are every health care worker's responsibility. Unit-based Accountable Care Teams (U-ACTs) improve patient outcomes through Nurse and Physician team leadership and collaboration. The efforts of U-ACT Nurse-Physician led interdisciplinary teams demonstrated results in achieving quality and safety for patients.

### References

- Squire, J., Linklater, S., Grimshaw, J., et al. (2014). Understanding practice factors that influence physician hand hygiene compliance. *Infection Control and Hospital Epidemiology*, 35(12), 1511-1520. DOI: 10.1086/678597
- How-to guide: Prevent catheter-associated urinary tract infections. (2011). Cambridge, MA: Institute for Healthcare Improvement. (Available at [www.ihl.org](http://www.ihl.org)).
- How-to guide: Prevent central line-associated bloodstream infections (CLABSI). (2012). Cambridge, MA: Institute for Healthcare Improvement. (Available at [www.ihl.org](http://www.ihl.org))

**Making Zero Happen!**

**Congratulations to the 3 South Addition Team!**

We are working towards our goal of zero preventable harm.