OBJECTIVES
• Describe the 8 patient characteristics in the Synergy Model
• Describe the 8 Nurse characteristics in the Synergy Model
• Apply the Synergy Model construct to test questions

AACN Synergy Model for Patient Care
• Optimal outcomes result from the synergy of a nurse’s competencies matching the needs of patients and their families

Critically Ill Patient Needs
Characteristics consistently seen in patients experiencing critical events and assessed by nurses
• Resiliency
• Predictability
• Complexity
• Vulnerability
• Participation in care
• Participation in decision making
• Resource availability
• Physiological Stability

RESILIENCY
• Capacity to return to a restorative level of functioning using a compensatory coping mechanism
• Ability to rebound after an insult
• Prisoner of war is more “resilient” to natural disaster

VULNERABILITY
• Level of susceptibility to stressors that may adversely affect outcomes
• Immuno-compromised patients are “vulnerable” to infection.
STABILITY

• Ability to maintain homeostasis during and following physiologic insults

• Children from a “stable” family situation are able to recover from kidney transplantation more effectively than children living in Foster Homes.

COMPLEXITY

• Intricate entanglement of two or more systems
  • Body
  • Family dynamics
  • Environment

• Patient with Multi-system organ failure has high mortality rate due to the “complexity” of the systems involvement.

RESOURCE AVAILABILITY

• Ability to access personal, psychosocial, technical & financial resources to enhance recovery

• Patients who are internet savvy (and has access to) are able to manage their medical condition better due to this “resources”

PARTICIPATION IN CARE

• Level of interest and active involvement in the care delivery

• Patient with tracheostomy asks if he can learn how to suction himself tend to recover much faster due to his desire for “participation” in his care.

PARTICIPATION IN DECISION MAKING

• Level of engagement in comprehending and acting upon info to execute informed decisions

• Stroke patient who actively discusses with health care team members regarding the best place for her to be discharged to is high in “Participation in Decision Making”

PREDICTABILITY

• Able to expect a certain course of events or course of illness

• A patient with MI has a high risk for dysrhythmias and cardiogenic shock. This is high in “predictability”.
Nurse Characteristics
(Competencies) required to meet specific patient needs:
• Advocacy
• Judgment
• Caring practices
• Collaboration
• Response to diversity
• Systems thinking
• Clinical inquiry
• Facilitation of learning

Reflect an integration of knowledge, skills, and experience

CLINICAL JUDGEMENT
• Ability to store & retrieve knowledge, apply knowledge, & distinguish the best intervention for a given situation
• Use of Critical Thinking
  • Observe, think about the process…ask questions
  • Reflective practice
  • Focused attentiveness
  • Anticipation of crisis & risks
  • “I used a good Clinical Judgement when the patient complained about the new onset CP. I monitored VS, did 12-lead, called the MD, and drew labs.”

ADVOCACY
• Working on another’s behalf; representing the concerns of the patient/family and nursing staff
• Helping to resolve ethical and clinical concerns within and outside the clinical setting
• “When the resident ordered Dopamine drip for my HTN patient, I advocated for patient’s safety & questioned his decision in a professional manner”

CARING PRACTICES
• WHAT WE DO to provide the supportive, therapeutic, compassionate environment for patients AND staff
• VIGILENCE
• ENGAGEMENT
• RESPONSIVENESS
• A nurse demonstrated a caring practice by facilitating patient’s 6 year old daughter to read her favorite book at the bedside even she is comatose.

COLLABORATION
• TOGETHER we promote optimal (and realistic) outcomes
• Seek other’s professional opinions
• Interdisciplinary work with colleagues & community
• When a dying patient’s family members request for the presence of a Shaman to burn incense, the nurse collaborates with other HC team to arrange for this activity.

SYSTEM THINKING
• Global perspective...able to negotiate the needs of the patient/family through the health care system and beyond
• The nurse has a system thinking when she actively participates in a hospital committee to establish protocol regarding patients’ visiting hour.
RESPONSE TO DIVERSITY
• Recognize, Appreciate, and Incorporate differences into the provision of care
• Recognize individuality while observing for patterns that respond to nursing interventions
• The nurse respects Chinese patient’s request to have her acupuncturist perform treatment for cancer pain.

CLINICAL INQUIRY
• Questioning & evaluating practice, providing informed practice (EBP)
• Innovating through research and experiential learning
• Connect research with clinical practice
• The nurse consults with unit CNS and reviews research articles regarding best practice on visiting hours.

FACILITATOR OF LEARNING
• Adult Learning Theory
• Formal and informal teaching methods
• Learning strategies to match patient’s unique needs (and their developmental level)
• The nurse incorporates “bubble blowing” game in the teaching on effective way to deal with breathing difficulty to a 5 year old Asthmatic patient.

Synergy
emerging from the interaction between the patient needs and the nurse characteristics results in optimum outcomes
Indicators----
• Patient and family satisfaction
• Rate of adverse incidents
• Complication rate
• Adherence to the discharge plan
• Mortality rate
• Length of stay

Scenario #1
• Ms. Green, a Type 1 diabetic with chronic renal failure is admitted to the PACU after an AV Fistula graft revision in her left upper arm. Heparin is infusing at 16 units/kg/hr. The patient is awake and following commands and is scheduled to be admitted to your unit within the next 30 minutes.

Most appropriate response?
• The PACU gets a call from the lab, reporting her PTT=21 seconds
  a. Contact the surgeon for heparin adjustment orders
  b. Assess the patient’s extremity for signs of ischemia
  c. Adjust the heparin drip per standing orders
  d. Contact the lab for a STAT PTT redraw
Most appropriate response?

• RN assessing patient prior to transfer from PACU discovers her left arm to appear dusky, and without a palpable radial pulse. Ms. Green reports increased pain and a loss of sensation in the operative arm.

a. Send a STAT aPTT
b. Contact the Charge Nurse
c. Call report to the receiving unit
d. Contact the attending surgeon

Scenario #1

• The surgeon determines the graft has occluded and orders a return to surgery. Discussing with Ms. Green, the nurse notes she is concerned about surviving the surgery, but understands its necessity in order to save the fistula. As she is being returned to the O.R., she requests a brief visit with her husband and children, who are in the waiting room.

Most appropriate response?

a. Allow the patient a couple of minutes of visitation
b. Contact the surgeon to talk with the family
c. Disregard the patient’s request for visitation
d. Explain the need for urgency in getting to the operating room

Scenario #2

Mr. Vidal is admitted to the ED with chest pain radiating to the left arm and neck, dyspnea and N/V x 2hrs. The patient denies any history of cardiac disease.

Most appropriate nursing action?

a. Attach a cardiac monitor and pulse ox
b. Assess ABCs
c. Ask the patient’s wife about symptom onset
d. Provide oxygen via a nonrebreather mask

Most appropriate action?

Ten minutes later, the patient is in wide complex tachycardia, unresponsive and pulseless. The nurse begins CPR and calls a code. The physician’s first order is for Amiodarone 300mg IV bolus.

a. Repeat the order out loud
b. Suggest epinephrine, 1 mg IV
c. Suggest immediate defibrillation
d. Ask for dose clarification

Most appropriate action?

Mrs. Vidal insists on remaining in the room during the code.

a. Ask another nurse to stay with the spouse
b. Stay with the spouse and explain the code
c. Escort the spouse to the unit quiet room
d. Ask a family member to stay with the spouse
Scenario #3
Mr. Hill, a Native American from a nearby rural reservation is admitted to a GAC bed from the ED with a diagnosis of hepatic encephalopathy; hx. Alcoholism x25yrs, was found “down” by a grown daughter- she called 911. Transferred by air. Air crew noted he was unresponsive, but maintained a BP of 146/72, heart rate 110. Oral airway inserted and patient placed on a 100% nonrebreather.

Most appropriate action?
- Establish the patient’s code status with the adult daughter
- Arrange for a transfer to the ICU
- Assess the patient’s hemodynamic and respiratory status
- Contact the physician for orders

Scenario #3
Upon physical assessment, patient is jaundiced, nonresponsive, but stable. Abdominal distension noted with visible fluid waves. Abdominal XRAYS reveal massive ascites and a peritoneal tap is ordered. The daughter has signed consent for the procedure, but voices concern to the nurse regarding its necessity.

Most appropriate action?
- Determine if the procedure had been fully explained by the physician
- Seek clarification of the grown daughter’s concern
- Contact the physician to tell him of her concern
- Request an Ethics consult

Most appropriate intervention?
Following the peritoneal tap the patient’s BP drops to 88/64 and he is tachypneic (RR 32) with labored respiratory effort, and SpO2 of 84%.
- Deliver a 500ml NS bolus and assist breathing with a bag-valve-mask at 100% oxygen
- Deliver 250ml Albumin IV and assist breathing with BVM at 100% oxygen
- Deliver a 500ml NS bolus and apply noninvasive PPV
- Deliver 250ml Albumin IV and apply noninvasive PPV

Scenario #3
Mr. Hill is transferred to the ICU and intubated. The daughter, in consultation with tribal elders, elects to withdraw vent support. She requests a tribal drummer be allowed to drum and sing as her parent dies.
A nurse coworker expresses concern regarding the perceived noise and disruption.
Most appropriate response?

A. We will have the ceremony outside in the garden
B. Don’t you understand what the ceremony means to them?
C. What concerns do you have about the ceremony?
D. The physician has approved the ceremony in the room

Most appropriate response?

An adolescent with a history of admissions for chronic status asthmaticus is being prepared for discharge. The nurse is aware the patient has not been compliant with medications because it “makes him feel too different” from his peers.

- Arrange for the school nurse to monitor his compliance
- Provide the patient with articles on the relationship of hospitalization and medication compliance
- Refer the patient to a support group for adolescents with asthma
- Advise the parents to withhold privileges he remains noncompliant

Most appropriate response?

When teaching patient’s wife proper method of dressing change at home, the nurse understands

A. The wife learns best if shown the complex procedure all at once
B. The wife’s prior experience with dressing changes is irrelevant to this learning session
C. The patient and his wife learn best when they perceive a need to learn
D. Since they both are adult learners, they do not need much time to practice the skill

REFERENCES