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Timely decision making thru Home Care Bundles
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Introduction
Nurses working in community face different sets of decision challenges and rapid
decisions were expected. Variety specialty service and frailty patients for early
discharge to Community nurses (CNs) will generate the potential clinical information
need to guide clinical decisions. Consequently, to seeking information what was
readily available were perceived as severity obstacle during home visits. Moreover,
decision making in real time for choosing a management strategy is inevitable and
challenge to our junior staff. To improving CNs' accessibility to the information and
support clinical decision-making at the point of care, a shared decision-making on the
electronic platform by integration of clinical knowledge, guideline and clinical decision
was studying in United Christian Hospital Community Nursing Service (CNS) at 2017.

Objectives
1.   To provide accessible precise and reliable clinical information
2.   Supported to handle the clinical uncertainty to which CNs will be dispatched
during home visits
3.   To enhance patient safety and quality at the point of care

Methodology
Home care bundles for variety specialties have been designed by Community Nurse
Consultant and variety specialties CN coordinators. The bundles had been distilled
into four main topics: Key Assessment, Triage Tool according to level of deterioration,
Troubleshooting and Guidelines. The evidence based and advices from specialties to
convert into guidelines and workflow of troubleshooting and acts a triage tool to better
utilization of health care service.
In aim of facilitation, the home care bundles will integrate into iPad mini which CNs will
be used during home visits. After 3 months, a closed end questionnaire was designed
and invited all CNs to participate, which was review the utilization and content.

Result

100 % (n= 74) questionnaire returned, 100% (n=74) staff had home care bundles in their own handheld device.   There are approximate 40% (n=29) less than 3yrs CN experience in the program.   Findings showed that the Home Care Bundles was highly rated in terms of their accessibility and usefulness.   It also can be used to reduce inappropriate variations in practice and to promote the delivery of high quality care.

In the result, 86% (n=25) junior staffs had accessed the Home care bundles in last 3 months. 97% (n=24) of them agreed the bundles could contribute to triage appropriate nursing care timely during home visits.   In view of the seniority being Community nurses, the result definite to support the effective of Home Care Bundles to junior staff who worked <3 yrs.

Furthermore, 71% of CNs (n=53) used the bundles contributed clinical information for decision making when providing the care and 74% (n=39) experienced to avoid seeking emergency department by using the information of bundles.

Conclusion

The timely and feasible Home Care Bundles can meet the needs of CNs working in a complex and time-pressured environment. This program is the embodiment of ideas that assist CNs in improving their clinical practice and decision making during home visits. Despite significant advances in this program, clinical decision support system used in nursing practice will be our next step.