

Mitigating the labor crisis in post-acute care

Strategies for improving nurse efficiency and retention through adoption of the Macy Catheter®

Industry Challenges

As Florence Nightingale once observed, "The goal of nursing is to put the patient in the best condition..."

Today's retention and recruitment landscape begs the question: What strategies can healthcare entities utilize to put nurses in the best condition to deliver quality care and to prevent exacerbation of existing staffing challenges?

For at least twenty years, steadily coalescing factors have posed a threat to the nursing profession that, if continued, may result in a critical RN staffing shortage. The ramifications of an insufficient nursing workforce would spread throughout the entire healthcare infrastructure.

Nurses don't struggle or consider leaving their profession due to patient care; they struggle when tasked with excessive workloads and when administrative support proves inadequate. Healthcare entities can make efforts toward combating RN staffing challenges, such as providing equipment that aids delivery of more effective, more efficient care. Better equipment and care delivery options result in more manageable workloads and improved patient outcomes. Empowered nurses and comfortable patients inherently result in greater career fulfillment.

The Macy Catheter®

When the oral route is compromised and ineffectively mitigates symptoms near end-of-life, alternate methods for medication administration like sublingual (SL), intravenous (IV), subcutaneous (SubQ), and suppositories can ultimately be burdensome and costly. IV, SubQ, and suppository alternatives must be ordered, delivered, and set up, processes that can encumber patients, families, and clinicians

with symptom control delays that may span hours or even days. Symptom control delays yield higher transfer rates to in-patient units, which can be a costly, arduous process.

By equipping nursing staff with an easy method for rapid administration of medication and fluids, the Macy Catheter® can help nurses manage patients' symptoms in a single,

short visit. The device is the optimal alternative when oral delivery is compromised—particularly for hospice and palliative care cases—although the device is equally applicable to skilled nursing, emergency departments, and home healthcare settings.

Patented and FDA-cleared, the Macy Catheter® provides access to the clinically proven rectal route of delivery. It is designed to render the rectal route a practical, painless, and discreet alternative for medications that can be prescribed per rectum.

The Nursing Staffing Crisis

RNs represent a healthcare vanguard—the frontline's frontline—and comprise the largest staffing group within the broader field, accounting for 40% of staffing operating costs.[1] However, roughly two decades of industry-wide cost-cutting has heavily targeted nurses, resulting in significantly overburdened personnel.[2] The RN staffing shortage, while already concerning, is occurring at a time when an aging U.S. population has begun to place an increasing strain on healthcare infrastructure.

The United States Registered Nurse
Workforce Report Card and Shortage
Forecast projected a nationwide
nurse shortage to emerge between
2016 and 2030.[3]



Percentage of nurses who plan to retire within the next five years[4]

The nursing staffing shortage is becoming more and more pronounced in home health care (including SNF/LTC, home care, and hospice), especially during the pandemic; COVID-19 upended schedules due to the new challenges of quarantine periods and exposures to the virus. The dire need for nurses in the hospital and/or acute care during the height of the pandemic created higher compensation offers.[5] Resultantly, many nurses have left home health care for higher paying positions in hospitals and other medical facilities.



Mitigation of nursing staffing shortages in home health care requires adoption of technology that empowers caregivers at home to partner with nurses throughout the ongoing care of the patient, resulting in more comfortable, higher quality care in the setting of the patient's choice.

Nursing Frustrations and Fatigue

Nurses' work stress accumulates when their efforts to care for their patients require painful, invasive, or slow-acting methods. When nurses confront an inability to improve patient experiences and outcomes, frustration and fatigue can ensue.

Burnout, depression, anxiety, and compassion fatigue remain all too common among RNs. The effects of an inability to alleviate patients' suffering become ever more pronounced within hospice and palliative care scenarios. Medication shortages—particularly for injectables—and IV placement contribute to administration challenges. Finally, symptoms such

Using the Macy Catheter® to Mitigate Challenges

The Macy Catheter® facilitates use of oral medications already in the home, allowing patients, caregivers, and clinicians to avoid the frustration, delays, and costs usually associated with switching routes of medication delivery.

Key Benefit: Easier Placement

The Macy Catheter's non-sterile placement requires roughly three minutes and remains viable for up to 28 days. Once inserted, a caregiver inflates a small, soft

as pain, nausea, and breathing difficulties can complicate oral medication and fluid administration for many patients.

When nurses encounter severe symptoms for which the sublingual route does not work, they often "chase" symptoms by titrating the dose and frequency of the sublingual medication before attempting a new route in an often futile attempt to control symptoms. This can take hours or even days. Symptoms not adequately controlled lead to increased triage calls and subsequent calls to prescribers and case managing nursing staff.



balloon with 15ml of tap water to secure the catheter in place. The catheter is removed or easily expelled with a bowel movement and, depending on agency policy, the same or new catheter may be reinserted after the bowel movement. The device is designed to be as minimally invasive as possible and as easy as possible for caregivers to use.

Key Benefit: Effective Delivery

Use of the Macy Catheter® for medication administration is considered a "micro enema" (i.e., a volume under 20ml of rectally delivered medication best absorbed in the distal third of the rectum). Highly effective, micro enemas provide rapid care because:

- The rectal mucosa is highly vascularized.
- There is a high percentage of absorptive cells present.
- Liquid medications are absorbed and enter circulation quickly.
- Increased bioavailability (distal 1/3 of rectum venous return bypasses liver).

"I didn't realize that there was something better than what we were already using. This is a whole new level of practice, and I'll never go back to the practice I had before."

—Dr. Wendy Schmitz, MD Vice President of Medical Services, Ohio's Hospice

Key Benefit: Versatility

Most medications may be discreetly delivered via the single port placed on the patient's leg. Caregivers may use Hospi's LiquiPill to effortlessly grind tablet medication, add water, and create solutions (as directed by the prescriber).

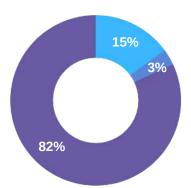
Medication Versatility *	Rectal	SQ	IV	SL	Trans-dermal	Intra-nasal
Opioids	√	✓	✓	✓	Limited	Limited
NSAIDS	\checkmark		Limited		Local	
Benzodiazepines	√	✓	✓	Limited		Limited
Antiemetics	√	√	\checkmark			
Anticonvulsants	√		\checkmark			
Sedatives	√	✓	✓			
Antidepressants	√					
Neuroleptics	√	✓	✓			
Anticholinergics	√		✓	✓		
Steroids	√	√	\checkmark			
Antibiotics	√		✓			

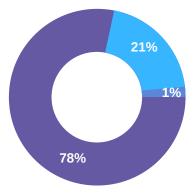
^{*}Based on pharmacokinetic studies in literature.

Industry Insights: Ohio's Hospice Nursing Survey[6] Macy Catheter® for Severe Symptom Management

Macy Catheter® when compared to subcutaneous medication delivery (comfort)

- More comfortable than SQ
- Equally as comfortable as SQ
- Less comfortable than SQ



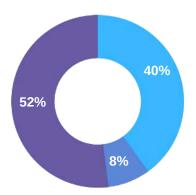


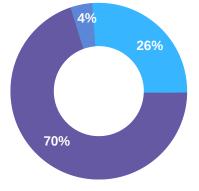
Macy Catheter® when compared to sublingual medication delivery (comfort)

- More comfortable than SL
- Equally as comfortable as SL
- Less comfortable than SL

Macy Catheter® when compared to subcutaneous medication delivery (effectiveness)

- More effective than SQ
- Equally as effective as SQ
- Less effective than SQ





Macy Catheter® when compared to sublingual medication delivery (effectiveness)

- More effective than SL
- Equally as effective as SL
- Less effective than SL

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Even the nurses that were the holdouts... I talked with one... she said 'I wanted to hate it, I didn't want to like it, and I love it.' The nurses are on-board.

— Dr. Wendy Schmitz, MD, Vice President of Medical Services, Ohio's Hospice



Nurse and Caregiver Testimonials

Hospice/palliative care nurses share their experiences with the Macy Catheter®

"We were able to place the Macy to meet her pain management needs, but the other thing that was pretty amazing... we were actually able to lower her doses, and she had better relief [than she did previously]."

"The main thing about the catheter is that it makes it so much easier for the caregivers and the symptoms of the patient are so much easier to be controlled."

"Once medication had been given, the patient was resting comfortably in 30 minutes. The family immediately relaxed and had peace and they were able to spend the next two days beside their son as he passed comfortably."

Cheri Hartman, FNP-BC, ACHPN Hospice of Florida

Gail Simburger, RN, CHPN Nurse Practitioner, Treasure Coast After Hours/Weekends RN, Providence Hospice of Seattle

Kevin Moore, RN, BSN, CHPN Home Care Nurse Manager, Hospice of Southern Georgia







"It is so simple to use and works so well to take care of the patient in a crisis or other situation where it is applicable... We worked very collaboratively with the nursing homes to do education. Every time patients exhibited a certain level of protocol-driven outcome, the Macy Catheter would be utilized. Through that small pilot study, we were able to reduce hospitalization rates down to 3.2%. We were able to reduce emergency department utilization to 0%."

"Now looking back over all the years that I had to deal with patients that were terminally agitated. [and there's quite a lot of those], patients that are having difficulty with the taste of medication, patients who are having trouble breathing...

I really truly believe, now why wouldn't people want to use this to alleviate the suffering of their loved ones?"

Robert Parker, DNP, RN, CENP, CHPN CHP, Chief Compliance Officer, VP Clinical Excellence and Integrity, Intrepid USA Healthcare Services

Deana Chitambar, RN, CHPN Kaiser Hospice of Roseville, California







The Macy Catheter reflects the mission of Hospi, as it allows for comfort and dignity.

Bradford Macy, RN, BSN, CHPN Co-founder and President 2013 Certified Hospice and Palliative Care Nurse of the Year

To learn more about the Macy Catheter or other products and services from Hospi, please contact us at:



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Citations

1

ANA Enterprise. Nurse Staffing Crisis.

https://www.nursingworld.org/practice-policy/nurse-staffing/nurse-staffing-crisis/

Sean P. Clarke and Nancy E. Donaldson. *Nurse Staffing and Patient Care Quality and Safety.* https://www.ncbi.nlm.nih.gov/books/NBK2676/

American Association of Colleges of Nursing. *Fact Sheet: Nursing Shortage.* https://www.aacnnursing.org/Portals/42/News/Factsheets/Nursing-Shortage-Factsheet.pdf

Journal of Nursing Regulation. *The 2020 National Nursing Workforce Survey.* https://www.journalofnursingregulation.com/article/S2155-8256(21)00027-2/fulltext#secst0550

Whelan, Robbie. "High Pay for Covid-19 Nurses Leads to Shortages at Some Hospitals." *The Wall Street Journal, Dow Jones & Company, 29 Aug. 2021,* www.wsj.com/articles/high-pay-for-covid-19-nurses-leads-to-shortages-at-some-hospitals-11630253483

Quinlin, L., Schmitz, W., & Jefferson, M. (2020). Macy Catheter: Integration and Evaluation in a Hospice Setting to Provide Symptom Relief During End-of-Life Care. Clinical journal of oncology nursing, 24(6), 689-693.