

Displaying Clinical Excellence: *Innovative Transparency Creates World-Class Patient Care*

Michelle Hampton PhD, RN, CCRN; Sally Carmen DNP, RN, APRN, CNL; Elaine Nelson, DNP, RN, NEA-BC



Goal: Enhance nurse awareness and understanding of empirical outcomes.

Background:

- 726 bed tertiary care facility
- 3rd Magnet designation
- Nurses don't fully understand empirical outcomes and can't translate into actionable items

Clinical Excellence Boards

- Exhibits 8 quarters of benchmarked unit specific empirical outcomes, including NQD data, nursing engagement results, and professional development metrics
- Green stars denote data above the benchmark a majority of the time for each unit.
- Displayed in 100% of nursing units where staff frequent

Re-Designed Nursing Score Card

- Reduces size of nursing score card from 16 pages to a single page
- Provides a global view of empirical outcomes across the organization
- Color coded for easy interpretation of results
- Provides for the identification of trends
- Scorecard shared in all hospital councils and committees

Clinical Excellence



Unit Goals:

Implementation of Sustainable Change

- Magnet champions assist in development of CEBs and commit to providing education to their peers
- Inter-disciplinary teams tour 100% of nursing units and engage staff to validate their understanding of the data.
- Unit Based Councils (UBC) establish measurable goals based off of unit based outcomes.

Outcomes

- UBCs (100%) establish specific and measurable goals
- Improve understanding of easily accessed, trended, and benchmarked data.
- Enhance the quality of nursing care.
- A shared governance evaluation (2014) showed that 45 UBCs (n=767) determined improved outcomes related to patient satisfaction (85.51%), in particular: Nurse Communication (72.1%), Quietness (74.64%), and Teamwork (83.15%).
- UBCs resolve improved outcomes related to RN career advancement participation (59.6%), RN certification (55.43%) and RN Education-BSN rate (49.28%)

Nursing KPI Scorecard						
May 2015						
Stretch Touch Below Touch						
QUALITY INDICATORS - Monthly						
Measure	Touch	Stretch	Actual	Not Met	Not Met Prev 2 Months	Not Met 7/12 Months
VTE (Quarterly YTD 2015)	99.50%	100.00%	100.00%	-	-	-
CAUTI	2.99	2.85	0.93	Unit B, Unit C, Unit D	-	-
PATIENT SATISFACTION (Percentile Ranking)						
Measure	Touch	Stretch	Actual	Not Met	Not Met Prev 2 Months	Not Met 7/12 Months
Nurse Communication	60	90	82	Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z	Unit B, Unit C, Unit D, Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z	Unit B, Unit C, Unit D, Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z
Cleanliness of Hospital	75	90	37	Unit B, Unit C, Unit D, Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z	Unit A	Unit A
Quietness of Hospital	75	90	52	Unit B, Unit C, Unit D, Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z	Unit A	Unit A
PHCAHPS Index Percentile Rank	60	90	58	Unit B, Unit C, Unit D, Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z	Unit A	Unit A
Unit Y-Overall Score (THFW)	75	90	94	-	-	NA
Unit Y-Overall Score (Burleson)	75	90	98	-	-	NA
Unit Y-Overall Score (WillowPark)	75	90	99	-	-	NA
OP-Overall Score	75	90	91	-	-	NA
AMB-Overall Score	60	90	66	Unit J	-	NA
NON-NDNQI NURSING SENSITIVE INDICATOR						
Measure	Touch	Stretch	Actual	Not Met	Not Met Prev 2 Months	Not Met 7/12 Months
First Case On Time Starts	Peri-Op 60%	70%	48%	-	-	-
Turnover Time	Peri-Op ≤34 min	≤30 min	24 min	-	-	-
Breastfeeding Rate (exclusive)	Women's 81.9%	90%	82%	-	-	-
Elective Deliveries <39 weeks gestation	Women's 5%	0%	8%	-	-	-
Retention Rate (>1 Year)	Ambulatory (Avg) 90%	95%	79.2%	-	-	-
Quarterly Data						
NDNQI NURSING SENSITIVE INDICATORS (Quarterly Data)						
Measure	Touch	Stretch	Actual	Not Met	Not Met Previous 2 Qtrs	Not Met 5 of 8 Qtrs
HAPU (stage 2 and above)	Critical Care Units 4.00	0	Unit B, Unit C, Unit D, Unit E, Unit F, Unit G, Unit H, Unit I, Unit J, Unit K, Unit L, Unit M, Unit N, Unit O, Unit P, Unit Q, Unit R, Unit S, Unit T, Unit U, Unit V, Unit W, Unit X, Unit Y, Unit Z	Unit B	Unit B	Unit B
HAPU (stage 2 and above)	Non Critical Care 1.30	0	Unit Z, Unit H	-	-	Unit Z
Restraints	Critical Care Units 17.00	0	Unit B	Unit N	Unit B, Unit A	Unit B, Unit A
Restraints	Non Critical Care 1.30	0	-	-	-	Unit D
Falls (injury)	Critical Care Units 0.02	0	-	-	-	-
Falls (injury)	Non Critical Care 0.07	0	Unit C	-	-	Unit G, Unit D
Professional Development						
Measure	Touch	Stretch	Actual	Not Met	Not Met	Not Met
RN Unit Yucation - % BSN or Higher (Direct Care)	62%	70%	65.20%	-	-	-
RN Unit Yucation - % BSN or Higher (All)	65%	70%	66.40%	-	-	-
RN Certification *ANCC Approval Unit Y (Direct Care)	43%	45%	43.00%	-	-	-
RN Certification *ANCC Approval Unit Y (Nurse Managers)	43%	45%	43.00%	-	-	-
NCAP Participation	*RN by Application only 35%	20%	44.60%	-	-	-
NCAP 4 Participation	*RN by Application only	9.40%	-	-	-	-