

## An Innovative Strategic Planning Model To Enhance Stakeholder Engagement in Strategic Planning (C728)

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### Objectives

1. Describe a data-driven method for strategic planning.
2. Discuss ways to engage clinical nurse and interprofessional stakeholders in strategic planning.
3. Use information presented about this strategic planning method to design similar initiatives.

### The Hospital of the University of Pennsylvania

- ♦ Located in Philadelphia, PA
- ♦ Part of the University of Pennsylvania Health System
- ♦ 789 bed quaternary academic medical center
  - Adult Admissions 36,737
  - Outpatient Visits 1,515,612
  - ED Visits 63,565
  - Births 4,221
  - Professional Nurses 1,880
- ♦ Magnet designated since 2007

\*Penn Medicine Facts and Figures, 2015

Background

WHAT?

Strategy guides organizations toward meeting consumer needs

WHO?

Nursing strategy: outlines nursing's role in advancing organizational goals

WHY?

Engaging nurses in strategy development is critical

- Nurses have keen insight into consumer/ clinician needs
- Identify imperatives that transform nursing practice to meet these needs

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Gaps



Benchmarking & literature review revealed *little strategy development* within nursing



Very few organizations document their method for *developing nursing strategy*

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OPPORTUNITY:

Engage nurses in creating a strategy that lives in nursing practice



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### Creating Strategy that Lives in Practice

**Project Aims:**

1. Elicit nurses' perspectives about key priorities
2. Create strategy that nurses could easily incorporate into day to day practice

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### Data-Driven Method

- ♦ Qualitative descriptive IRB-approved study
- ♦ 3-Phase Process
  - Phase I: Data collection and analysis
  - Phase II: Vetting
  - Phase III: Dissemination
- ♦ Final Product: one-page infographic outlining *nursing's strategic imperatives*

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### Phase I: Data Collection and Analysis

- ♦ Data collected via 42 focus groups with 197 nurses
  - Clinical nurses from all inpatient units
  - Clinical nurses from select outpatient areas
  - Advanced practice nurses from inpatient/ outpatient areas
  - All nursing leadership groups
- ♦ Data analysis method: Thematic Analysis (Boyatzis, 1998)
- ♦ Emergent themes defined strategic imperatives

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### Phase II: Vetting

- ♦ **“Theme Teams” Event: Facilitated session with key stakeholders (n=46)**
  - Nursing: 31
  - Pharmacy: 2
  - Patient/ Family Advisors: 4
  - SW/ CRC: 2
  - EVS/ Dietary: 6
  - Bed management: 1
- ♦ **Translated imperatives into “*specific, well-defined, on the ground actions and behaviors*”**  
(O'Connor & Dorfheld, 2014)
- ♦ **Phase I and II findings vetted with interprofessional thought leaders to lead to development of final infographic**

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### Phase III: Dissemination

- ♦ **Incorporated feedback from multiple stakeholder groups to revise actions tied to each imperatives**
- ♦ **Created 1-page infographic: summarize imperatives and key actions linked to each imperative**
- ♦ **Infographic shared with every participant group via unit-level meetings led by CNE**

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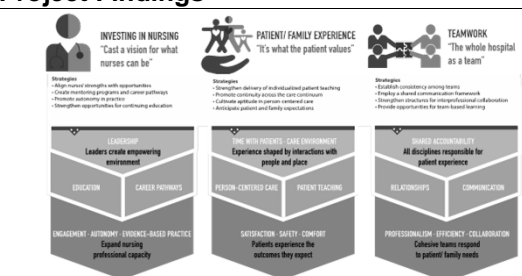
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### Project Findings



**INVESTING IN NURSING**  
"Cast a vision for what nurses can be"

**PATIENT/ FAMILY EXPERIENCE**  
"It's what the patient values"

**TEAMWORK**  
"The whole hospital as a team"

**LEADERSHIP**  
Leaders create empowering environment

**EDUCATION**

**CAREER PATHWAYS**

**ENGAGEMENT - AUTONOMY - EVIDENCE-BASED PRACTICE**  
Expand nursing professional capacity

**WORK WITH PATIENTS - CARE ENVIRONMENT**  
Experience shaped by interactions with people and places

**PERSON-CENTERED CARE**

**PATIENT TEACHING**


**SATISFACTION - SAFETY - COMFORT**  
Patients experience the outcomes they request

**SHARED ACCOUNTABILITY**  
All disciplines responsible for patient experience

**RELATIONSHIPS**

**COMMUNICATION**

**PROFESSIONALISM - EFFICIENCY - COLLABORATION**  
Collective teams respond to patient/family needs

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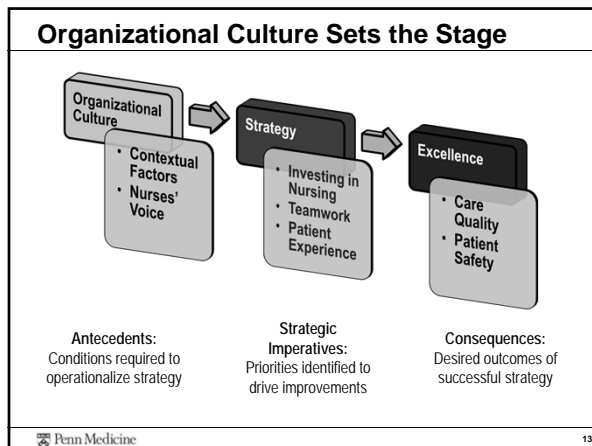
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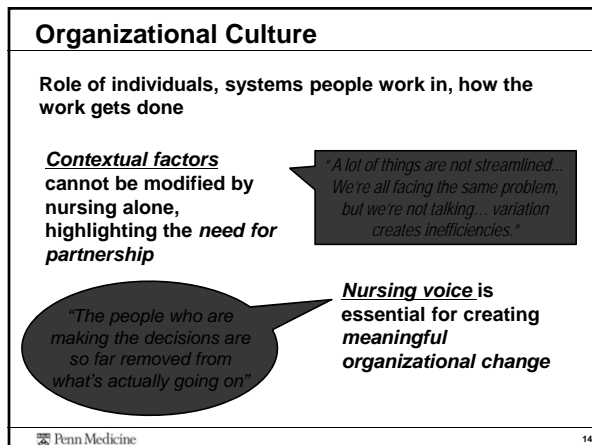
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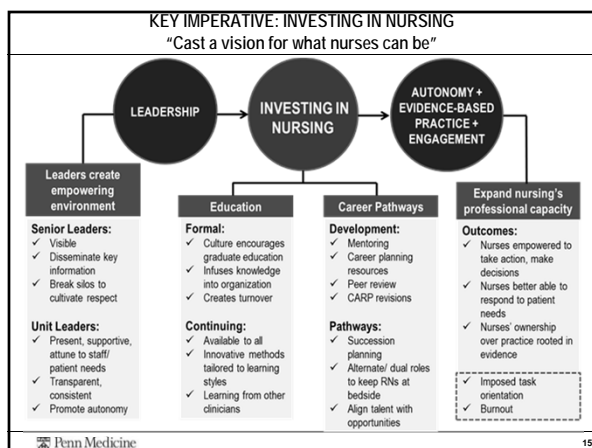
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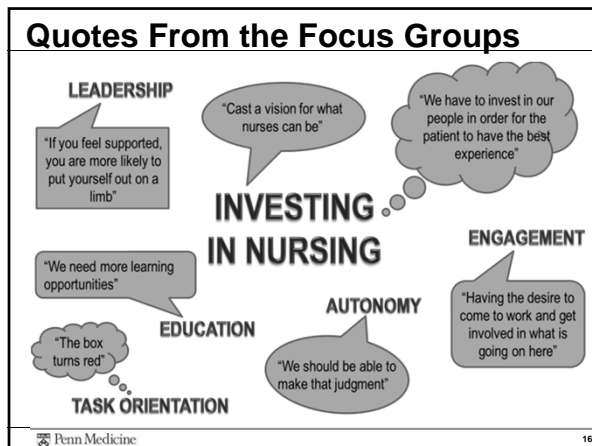
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### Investing in Nursing: High-Level Action Items

<b>Structures</b>	<ol style="list-style-type: none"> <li>1. Establish <i>mentoring programs</i> and <i>career pathways</i></li> <li>2. Create roles that include <i>protected time</i></li> <li>3. Expand access to <i>education across settings and disciplines</i></li> </ol>
<b>Processes</b>	<ol style="list-style-type: none"> <li>1. Recognize and <i>align individual strengths with opportunities</i></li> <li>2. Promote opportunities for <i>autonomy in practice</i></li> <li>3. Provide education that addresses <i>nurses' identified learning needs</i></li> <li>4. Increase <i>integration of evidence</i> into practice</li> </ol>
<b>Outcomes</b>	<ol style="list-style-type: none"> <li>1. Improved <i>RN satisfaction</i> (NDNQI)</li> <li>2. Improved nursing <i>engagement</i></li> <li>3. Increased nursing <i>retention</i> / decreased <i>turnover</i></li> <li>4. Improved <i>certification rates</i></li> </ol>

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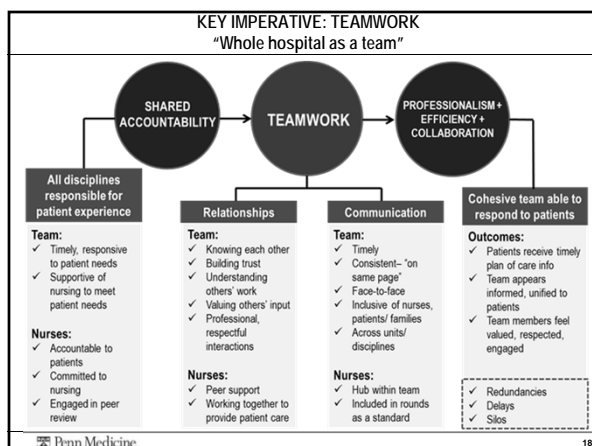
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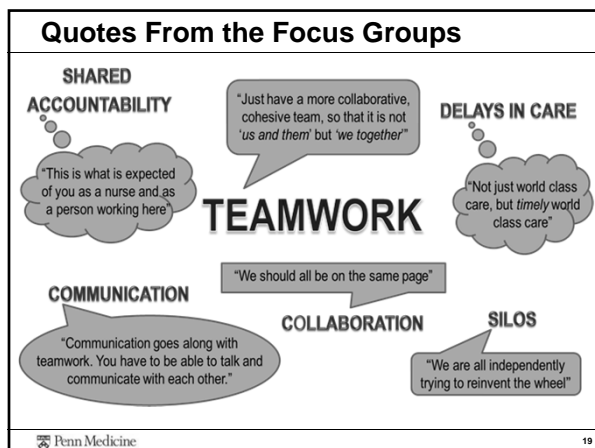
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### Teamwork: High-Level Action Items

Structures	1. Create <i>consistent teams to build relationships</i>
	2. Maximize application of <i>technology to facilitate team communication</i>
	3. Employ a shared <i>communication framework</i>
	4. Strengthen <i>structures for interprofessional collaboration</i>
	5. Establish team <i>standards and accountabilities</i>
Processes	1. Elucidate team members' <i>roles and responsibilities</i>
	2. Purposefully <i>engage multiple team members in decision making</i>
	3. Forge <i>relationships that promote collaboration</i>
	4. <i>Communicate directly and timely</i> with team members
	5. <i>Engage pts/ families, all professional partners</i> in bedside rounding, huddles
	6. Provide ongoing interprofessional education to <i>strengthen teamwork core competencies</i>
Outcomes	1. Increased <i>employee engagement</i>
	2. Decreased <i>adverse events</i>

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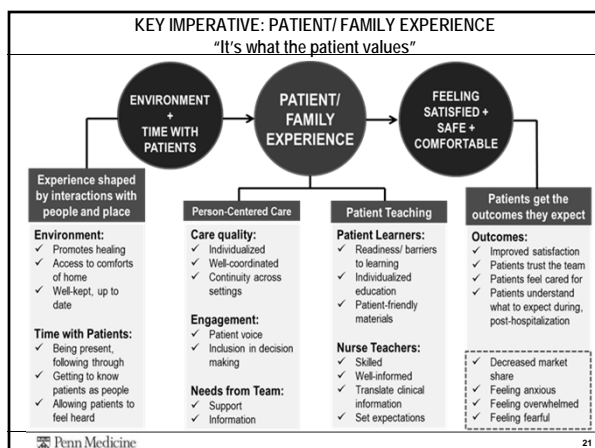
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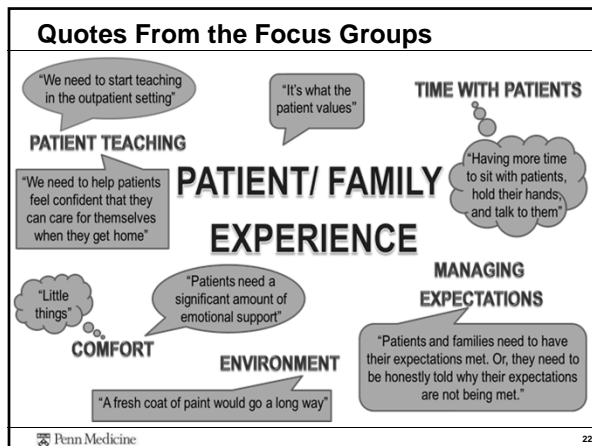
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### Patient/ Family Experience: High-Level Action Items

Structures	<ol style="list-style-type: none"> <li>1. Invest in the <i>physical environment</i></li> <li>2. Create <i>shared accountabilities</i> for shaping patient experience</li> <li>3. Establish communication structures that <i>span care continuum</i></li> </ol>
Processes	<ol style="list-style-type: none"> <li>1. <i>Include patient/ family advisors</i> in initiatives from the outset</li> <li>2. Provide ongoing training to promote <i>competence in person-centered care</i></li> <li>3. Strengthen delivery of <i>individualized patient teaching</i></li> <li>4. <i>Anticipate patient and family expectations</i> to choreograph experience</li> </ol>
Outcomes	<ol style="list-style-type: none"> <li>1. Improved <i>patient satisfaction (HCAHPS)</i></li> <li>2. Improved <i>RN satisfaction (NDNQI)</i></li> <li>3. Increased <i>employee engagement</i></li> <li>4. Increased <i>brand loyalty, expanded market share</i></li> </ol>

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### Achieving Excellence in Quality & Safety

Quality care & patient safety were cross-cutting themes:

- ♦ **Quality Care**
  - Efficient
  - Coordinated
  - Person and family centered
- ♦ **Patient Safety**
  - Rooted in a just culture
  - Requires use of evidence by all disciplines
  - Requires communication among team members and with patients/ families
  - Nurses provide essential surveillance to protect patients

Excellence will be achieved through deliberate commitment to the Nursing Strategic Imperatives

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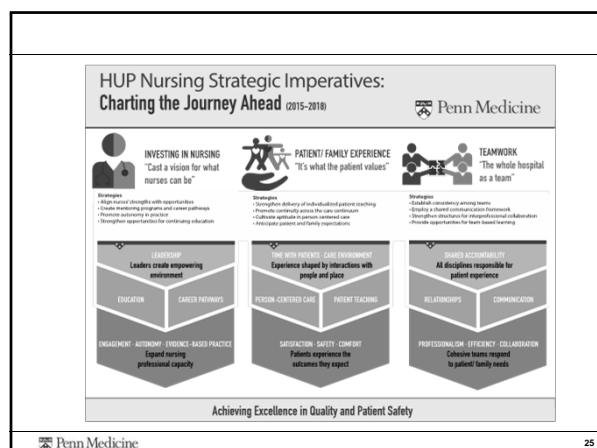
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## Keys to Engagement

- ◆ Clinical nurse participation throughout
- ◆ Attention to the message
- ◆ Commitment to clinical nurses

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## Participation in Focus Groups

- ◆ **Messaging**
  - Opportunity to share voice
  - Collaborate with Chief Nurse
- ◆ **Clarification**
  - What are strategic imperatives?
  - Why do they matter?
- ◆ **Commitment**

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The Voice of the Clinical Nurse

- ♦ All areas of practice
- ♦ Safe space
- ♦ Open-ended questions


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Disseminating the Final Product

- ♦ Hearing directly from Chief Nurse
- ♦ Nurses' direct quotes
- ♦ Successfully drew links


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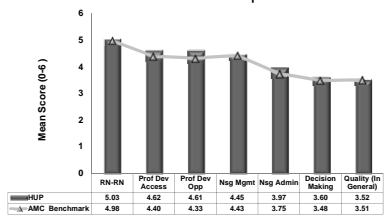
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
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Signs of Success

- ♦ Department of Nursing as one team
- ♦ Motivates action & focuses work
- ♦ Commitment to imperatives reflected in:
  - RN Satisfaction Scores
  - Current work that advances imperatives



	RN-RN	Prof Dev Access	Prof Dev Opp	Neg Mgmt	Neg Admin	Decision Making	Quality (In General)
■ HUP	5.03	4.62	4.61	4.45	3.97	3.60	3.52
--- AMIC Benchmark	4.98	4.40	4.33	4.43	3.75	3.48	3.51


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## Day to Day Application

EVERY UNIT is working on initiatives that tie to our imperatives. Consider a few examples:


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## Application 1




### INVESTING IN NURSING

"Cast a vision for what nurses can be"

**In medicine:**

- One-third of nurses on each unit have become **Geriatric Resource Nurses (GRNs)** as part of the federally-funded AGE (Advancing Gerontological Excellence) Program.
- They've received **30+ hours of evidence-based training** focused on providing care to older adults.
- GRNs **conduct specialized gero-focused assessments** and work with peers/ interprofessional team members to develop individualized care plans.


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## Application 2




### PATIENT/ FAMILY EXPERIENCE

"It's what the patient values"

**In the cardiovascular service line:**

- Nurses from inpatient and outpatient areas have **partnered to develop a pre-operative class for patients being admitted for cardiac surgery.**
- This class is intended to **better prepare patients and families for what they will experience** when they arrive for surgery.


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### Application 3



**TEAMWORK**  
 "The whole hospital  
 as a team"

**Radiology is partnering with Ground White to:**

- ♦ **Build relationships** between nurses in both areas who commonly work together to care for patients but don't know each other.
- ♦ These units are **setting up shadowing to help nurses understand each other's workflow and the experiences** that patients have in each area.


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### Conclusion

- ♦ **Nurses have keen insight that can be used to drive strategy development**
- ♦ **Nurses must be meaningfully engaged from start to finish**
- ♦ **Engaging nurses helps create commitment to advancing strategy**


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