Empowering Clinical Nurses to Improve Quality Outcomes

October 8, 2015
Session C848 3:45-4:45pm
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- 499 bed hospital
- 22,000 surgeries a year
- 26,000 admissions
- 4,000 newborn deliveries
- 60,000 emergency visits
- 1,000 physicians on staff
- 1,200 nurses on staff
Objectives

- Identify methods to educate and engage clinical nurses in the quality data process.
- Describe a process to streamline quality data reporting.
- Outline approaches to empower clinical nurses to identify improvement opportunities.

Shared Governance

- Established in 2010
- Based on our Professional Practice Model
- Partnership, Equity, Accountability, Ownership
- Culture, not a program
26 Quintillion Bytes

• Journey to Magnet Excellence – 2011
• Show me the data!
• Roadblock
Beginning Our Data Journey

Barriers:
1. Patient outcome data is abundant
2. Originates from multiple sources
3. Same metric – different benchmarks
4. Confusing to clinical nurses

To Illustrate the Point...
And More….

In-Patient Falls

Horizontally….
The Problem
All accurate data, but what does it mean to the clinical nurse?
Problem Statement

clinical nurse without direct access to data

+ 

inhibits RNs ability to interpret & analyze

= 

missing opportunities to develop effective approaches for achieving optimal patient outcomes.

Back to Square One

- 1 clinical nurse
- 1 nurse educator
- 1 clinical nurse specialist
- 1 interim nurse manager
Identified Targeted Metrics

- Quality
  - Falls
  - CLABSI
  - CAUTI
  - HAPU
- Patient Experience
  - Pain
  - Response Time
  - Nursing Communication
  - Discharge

The Mining Process

Gathered Existing Reports:
- What does it mean?
- Who sets each benchmark? Goal?
- Who is responsible to bring it to the table?
- What is the process to get it to the clinical nurses?

Ah Ha!! Moment
Simple & Uniform

Create a **SIMPLE** graph TEMPLATE
- Line graph
- Standardized colors (blue, red)
- Quarterly data
- Easy to read
- Visually appealing
Simple
Simple
Simple

Nurses are intelligent problem solvers, but they do not have TIME

Simple and Gorgeous

Thought we were Ready!
Presentation to the Leadership Team

- Excited to show our “easy process”
- Colorful graphs
- Enthusiastic presentation

We had not addressed the fundamental problem...

EDUCATION
Understanding the Task Ahead

Phase Two
Clinical Nurse EDUCATION

Get to Work
Enable Success

Team Crossover
Credibility
Relatability
Accessibility

Educational Plan

Three month curriculum
1. Professional Practice Model
2. NDNQI
3. Patient Satisfaction
Go Forth and Educate!

- Educate their peers
- One month time frame
- Easy access to Champion co chairs

January: Professional Practice Model (PPM)

Two Domains Were Key
February: NDNQI

- Metrics: Falls, CLABSI, CAUTI, HAPU
- Started as language translators
  - CAUTI vs catheter infections

Back to Basics

What is “Unit Specific Nurse Sensitive Data”?

- Unit specific = each unit able to be compared to LIKE UNITS from other LIKE HOSPITALS, nationally
- Nurse Sensitive = measures and outcomes that we directly affect in our daily practice
- Data = the number of incidents compiled into meaningful statistics, based on patient days

Don’t be afraid of Graphs!

- You read and interpret them EVERY DAY in your nursing practice
- Key components:
  1. Data Points
  2. Benchmark (goal)
  3. Units of measure
Start with what you Know!

Add a Benchmark...

Hospital Data
Unit Based Data

- Distributed unit specific data
- Analyzed in unit cohorts

Here’s What Happened
March: Patient Satisfaction

Same process, four measures:

1. Call Light Response Time
2. Attitude Towards Requests
3. Extent Ready for Discharge
4. How Well Pain was Controlled

Building on Knowledge

Let’s compare

<table>
<thead>
<tr>
<th>Patient Satisfaction (PG)</th>
<th>Nursing Quality (NDQI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOT unit specific comparison</td>
<td>“like unit” comparison</td>
</tr>
<tr>
<td>Random sampling, some exclusions</td>
<td>All patients, patient days</td>
</tr>
<tr>
<td>Value based purchasing</td>
<td>Value based purchasing</td>
</tr>
<tr>
<td>Some nursing sensitive</td>
<td>All nursing sensitive</td>
</tr>
</tbody>
</table>

Unit Level Data
Outcomes

Outcome: 3WT

Outcome: NICU
**Outcome: HAPU**

![Inpatient HAPU Graph]

Source: National Database of Inpatient Quality Indicators

**Summary**

- Data overload
- Inconsistent reports
- No access to data by clinical nurses
- Did not understand graph language

**Summary**

- It's not just about understanding data and graphs:

  **Empowering Clinical Nurses to Improve Quality Outcomes**

  - Interpret data critically
  - Use data to make changes in practice
  - Assess impact
Reference

All data provided from Hillcrest Magnet Document 2015

THANK YOU