

Establishing Ambulatory Nursing-Sensitive Indicators

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C901

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Objectives

1. State the value of ambulatory care nursing.
2. Articulate the importance of creating a body of knowledge to support professional nursing in ambulatory care setting.
3. Verbalize how sharing best practice can contribute to the development of ambulatory Nurse Sensitive Indicators (NSI)



Nursing's Moment of Opportunity

Nurses' regular, close proximity to patients and **scientific understanding of care processes across the continuum of care** give them a unique ability to act as partners with other health professionals and to **lead in the improvement and redesign of the health care system and its many practice environments**, including hospitals, schools, homes, retail health clinics, long-term care facilities, battlefields, and **community and public health centers**. (IOM, 2010)



The Future of Nursing

Nurses thus are poised to help **bridge the gap between coverage and access**, to **coordinate increasingly complex** care for a wide range of patients, to fulfill their potential as **primary care providers to the full extent of their education and training**, and to enable the full economic value of their contributions across practice settings to be realized. (IOM, 2010)



What is Ambulatory Nursing?

- Professional ambulatory care nursing is a complex, multi-faceted specialty of independent and collaborative practice.
- Built on a broad knowledge base of nursing and health sciences, and applies clinical expertise rooted in the nursing process.
- Nurses use evidence based information to achieve and ensure patient safety, quality care, and improving patient outcomes.

(AAACN Position Paper: Role of the Ambulatory Nurse, 2010)



A Paradigm Shift is underway: The Nurse in the Ambulatory Setting and the Transformation of Healthcare

“Transition of health care from the inpatient to the outpatient setting has led to challenges with access to care and coordination of services, and has increased the complexity of care delivered outside the hospital walls.”

(AAACN, 2010)



The Imperative:

The Role of Ambulatory Care Nursing in the Evolving Healthcare Landscape



Inpatient Days per 1000 vs
Outpatient Utilization in Community Hospitals
1993 – 2013



The Commonwealth Fund Report

According to a new Commonwealth Fund Report the US has the most expensive health care system and ranks last overall among 11 industrialized countries on measures of health system quality.

(Mahon, et al, 6-2014)

The Following Table Replicated with permission from The Commonwealth Fund



EXHIBIT ES-1. OVERALL RANKING

COUNTRY RANKINGS

Top 2*
Middle
Bottom 2**

	AUS	CAN	FRA	GER	NETR	NZ	NOR	DNK	DNK2	UK	US
OVERALL RANKING (2013)	6	10	9	5	5	7	7	3	2	1	11
Quality Care	2	9	8	7	5	4	11	10	3	1	5
Effective Care	4	7	9	6	5	2	11	10	8	1	3
Safe Care	3	10	7	6	7	9	11	9	4	1	7
Coordinated Care	4	8	9	10	5	2	7	11	3	1	6
Patient-Centered Care	5	8	10	7	3	6	11	9	2	1	4
Access	8	9	11	2	4	7	5	4	2	1	5
Cost-Related Problem	9	5	10	4	6	6	3	1	7	1	11
Timeliness of Care	6	11	10	4	2	7	8	9	1	3	5
Efficiency	4	10	8	9	7	3	4	2	6	1	11
Equity	8	9	7	1	8	10	5	1	2	2	11
Healthy Lives	4	8	1	7	5	9	6	2	3	10	11
Health Expenditures/Capita, 2011**	\$3,800	\$4,522	\$4,118	\$4,495	\$5,059	\$3,182	\$5,669	\$3,925	\$5,643	\$3,405	\$8,508

Notes: * Includes AUS. ** Expenditures shown in US\$ PPP (purchasing power parity) Adjusted to 2011 US\$ (data are from 2010).
Source: Calculated by the Commonwealth Fund based on 2011 International Health Policy Survey of Senior Adults; 2012 International Health Policy Survey of Primary Care Physicians; 2013 International Health Policy Survey of Community Health Workers; 2012 World Health Organization; and Organization for Economic Cooperation and Development, OECD Health Data, 2011 (Paris: OECD, Nov 2013).

Evolving Strategy for Transformation

US National Quality Strategy

1. Better Care
2. Healthier People and Communities
3. More Affordable Care

Institute of Medicine Future of Nursing Report

- Top of Scope
- Full Partners in Decision Making
- Reach to Highest Levels of Education
- Seek Effective Workforce Planning and Data Infrastructure Creation

(Berwick, 2008; IOM, 2001; HHS, 2011)



Evolving Strategy for Transformation

Professional Nursing Organization Response to this Mandate:

- **ANA**
 - ANCC: Magnet Recognition Program requires all standards for an institution to include ANY RN- practicing in inpatient or outpatient areas.
 - NDNQI: Held a national invitational Summit with Ambulatory Care nurse experts and leaders to identify ambulatory nursing specific outcome measures
- **AAACN**
 - Identifies ambulatory care practice as a specialty that provides accessible, high quality, and cost-effective health care.
 - Member of ANA Constitute Assembly
 - Develop nurse sensitive indicators, establish care coordination and transitions management standards, advance professional accountability and structural empowerment in ambulatory arena



Slide 10

r10 **obtain permission**
rstart, 07/29/15

The Ambulatory Nurse's Role in Healthcare Transformation: A Paradigm Shift

"If nursing is to have an active role in transforming health care, it will need to shift more nursing care from the bedside in the hospital to the outpatient and community settings through care coordination. Care coordination is not one specific job or position, but part of all RN's roles as nurses, regardless of their employee position."

"Nursing will need research that focuses more on community and outpatient settings, management in these settings, and staffing patterns and outcomes of RN staffing."

(Mensik, 2013)



Role of the Registered Nurse in Primary Health Care: Meeting Health Care Needs in the 21st Century

- National study funded by Robert Wood Johnson published in Nursing Outlook (impact factor 8)
- Qualitative study
- Looked at specific high performing Primary Care Practices across the country (23)
- Selected through literature review, American Academy of Nursing and American Board of Internal Medicine Foundation recommendations

(Smolowitz, et al, 2014)



Professional Nurses used their knowledge and skills to perform:

- Delegated care for episodic illness management
- Telephone triage
- Medication reconciliation
- Health coaching
- Assessment and documentation of health status
- Intensive care/case management with a focus on chronic illness
- Hospital transition management
- Practice management and staff supervision
- Quality improvement and team leadership

(Smolowitz, et al, 2014)



Value Added by the Professional Ambulatory Nursing Model

- Case management and transition management by RNs
 - Prevented ED visits
 - Reduced hospital readmissions
- Telephone triage by RNs
 - Preventing ED visits and re-hospitalizations
 - Cost savings;
 - Quality enhancement;
 - Improved satisfaction for
 - Patients
 - Payers
 - Care delivery organizations

(Smolowitz, etal, 2014)



Recommendations from RWJF Funded Study

- Design RN primary health care roles and responsibilities as outlined by exemplar primary health care settings
- Develop, endorse, and adopt quality measures that capture processes and outcomes that reflect the contributions of RNs
- Clarify and maximize the role of members of the interprofessional primary health care team to identify the distinct contributions of effective RN practice in primary health care settings.

(Smolowitz, etal, 2014)



Ambulatory Care Nursing: Growth as a Professional Specialty



(Mastal, 2010).



Nursing-Sensitive Indicators: What Exactly Are They? When did they begin?

- Florence Nightengale used statistical methods to generate reports correlating patient outcomes to environmental conditions (Montalvo, 2007; Dossey, 2005; Nightengale, 1859/1946).
- Those indicators that capture care or its outcomes most affected by nursing care (ANA, 1996)
 - 1996- Collaborative Alliance for Nursing Outcomes (CALNOC) launched after beginning as one of six ANA pilot sites that contributed to the ANA NDNQI
 - 1998- National Database for Nursing Quality Indicators (NDNQI) was established for acute care settings.
 - 2000- American Nurses Association: Nursing Quality Indicators Beyond Acute Care



Expanding ANA Nursing Quality Indicators to Community-based Practices

- "Indicator development requires extensive time and money. The Committee members urge all nurses and nursing organizations, both in the United States and internationally, to join with the ANA to continue expanding this work. Now, more than ever, it is incumbent upon organized nursing to demonstrate the contributions of professional nursing practice to improved health outcomes and cost-effective healthcare."

(Sawyer, et al, 2002)



Making Nursing-Sensitive Quality Indicators Real in Ambulatory Care

- Design instruments and data collection methodologies.
- Establish a framework for data collection, analysis, and reporting.
- Adopt and pilot test a core set of standardized nursing-sensitive quality indicators.
- Develop a plan for consensus and national adoption of a core set of standardized nursing sensitive quality indicators.

(Swan, 2008)



Summary of AACN NSI Task Force Activities

- AACN Call for applicants to NSI taskforce: June, 2013
 - First several months: literature review, brainstorming, review of best practices, expert reports
- ANA invitation to AACN NSI TF and Leader participation in ANA Ambulatory NSI Summit: Jan 2014
 - 10 members attended: advocacy for measures that include lifespan, tele health, patient education and patient experience. (Martinez, et al 2015)
 - Measures chosen: Medication Reconciliation, Blood Pressure Management, Depression Screening, Pain Assessment, All Cause Readmissions (Lewis, 2014)
 - NDNQI released two measures in August 2014: Process measures related to medication reconciliation and diagnostic test results



AACN NSI Taskforce Ongoing Work

- Development of Industry Report- Fall, 2015
 - Overview of Current Healthcare Environment and Imperative of Assessing Value to Role of Ambulatory RN
 - Survey of Indicators in Development in Nursing Industry Across Country: NDNQI/Press Ganey, Collaborative Alliance for Nursing Outcomes (CALNOC)
 - Advocacy Statements from AACN regarding what recommendations could be made to these indicators within Industry from AACN Expert RN opinion
 - Goal: Help catalyze nationwide testing and development of ambulatory NSIs
- Seek to partner as expert body with entities to develop proposed specialty indicators



Industry Measures Reviewed in Report: Measures that are already endorsed or being developed (ACO, NQF, NDNQI, CMS, PQRS)

- NDNQI Released Measures
- CALNOC Pilot Measures: Ambulatory Surgery arena
- Pain Assessment and Follow Up
- Hypertension Prevention and Screening
- Patient Falls Screening
- Proposed Structure for measurement of RN Demographics: Staffing, Certification, Education, Skill Mix
- Advocacy for Patient Satisfaction



AAACN NSIs Proposed for Development

- Patient Engagement
- Telephone Triage
- Readmissions for Key Patient Populations
- Mental Health
- Key activities such as vaccine administration, clean urine specimen tracking, electronic messaging



AAACN Nurse Sensitive Indicator Industry Report: Includes Exemplars from Across the Country

Examples of Innovative Nurse Sensitive and Value Added Roles and Metrics being utilized in microsystems across country:

- Kaiser Permanente
- Children's Hospital at the Medical University of South Carolina
- Rush System for Health
- Sentara Health
- UC Davis
- Children's Hospital Colorado



We Need You.....

- There is very little in the literature to support any of any ambulatory NSIs
- We know that exciting, innovative, and creative work is occurring on many care settings across the country
- We need you to share your innovations, successes and best practices



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Note of Appreciation

- AACN NSI Taskforce Members
- AACN Board of Directors
- AACN Executive Team



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